To comply with the Community Services Block Grant all eligible entities must complete a Community Action Plan (CAP) as a condition to receive funding through a Community Services Block Grant. Federal law mandates the Community Action Plan to include a community-needs assessment for the reporting area.

The purpose of this Community Action Plan is to identify, describe and prioritize current and future socioeconomic needs of Kendall and Grundy County residents, and to describe actions intended to address these needs. In other words, it is a road map for initiating organizational actions that promote and inspire individual and family socioeconomic stability and well-being.

*Approved and adopted by Kendall County Health Department Board of Health on September 20, 2022

*Approved and adopted by Kendall Grundy Community Action Advisory Board on September 22, 2022
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COMMUNITY ACTION PLAN

SUMMARY
Kendall-Grundy Community Action (KGCA), a division of the Kendall County Health Department (KCHD), is pleased to present its 2023 Comprehensive Community Action Plan. The material collected and shared in this report reflects the overwhelming amount of available data, showing the ever-widening divide and needs between the two counties of Kendall and Grundy. In both counties, participation of a blend of community members, area board members and other stakeholders made the 2023 Comprehensive Community Action Plan possible.

After careful review of the many changes that have occurred between the two counties over the past three years, we are currently preparing for new developments that will likely be coming to our agency. We have consistently provided all the various stakeholders throughout our communities, updates on the data concerning the community. This has been implemented so that feedback can be gathered to enhance our work towards increasing socioeconomic stability and well-being for the residents of Kendall and Grundy County.

Our Community Action plan provides a glimpse into the workings of the agency as a whole, as well as the communities we serve. With the innumerable changes in needs as our population continues to grow, diversify and evolve, we will continue to dedicate our efforts to the issues our residents may be facing. Our goal as an agency is to address those issues while seeking positive and innovative ways to address them. As a Community Action Agency, we are proud of what we have accomplished in the past few years with precious, yet limited resources, and we are excited about all we hope to achieve in the future for the residents of Kendall and Grundy County.

We are committed to working with all area stakeholders, service providers, and community advocates to ensure we are providing the necessary programs to address the root effects of poverty and to move families and individuals towards a life path of socioeconomic stability and well-being.

Our 2023 Comprehensive Community Action Plan was completed under the supervision of the Kendall County Board of Health and Community Action Tripartite Advisory Board. As a Community Action Agency, we sought the needs of our population through various methods of research, leveraging other sources of community-wide data. Key among these data sources include the Kendall County Health Department’s Illinois Project for Local Assessment of Needs (IPLAN), the Kendall County Health Department’s Strategic Plan 2027, and the Grundy County Health Department Illinois Project for Local Assessment of Needs (IPLAN).

Additional sources include Grundy County Economic Development’s Planner, Kendall County Economic Dashboard, Northeastern Illinois Area Agency on Aging Public Information Document, Illinois Bureau of

Additionally, current and future needs of our customers are gathered through frequent administration of our Needs Assessment survey (Effectiveness Insight Instrument). This valuable customer input serves to identify the extent to which needs are being met and how to better address those needs that are not fully met.

Below are the 2023 Community Action Plan Main Priority Choices that were identified by Kendall-Grundy Community Action customers who received a Needs Assessment survey upon intake. The survey question asked the customer to identify their top three concerns that they felt the community needed to address. The results of this data, organized by county, have set the framework for the development of the 2023 Community Action Plan.

For our Kendall County customers, lack of affordable housing received the highest percentage of responses. 18.6% identified lack of affordable housing as being a top concern in the community. Lack of affordable childcare with 17.9% and both lack of living wage jobs and high utility prices followed close behind at 16.6% as second and third top concerns for Kendall county customers. It should be noted that customers have more frequently identified access to mental health services since the Covid-19 pandemic, taking the place of affordable health care as a prioritized need from previous years.
For our Grundy County customers, access to mental health services received the highest percentage of responses with 18.7% as being customers’ top concern in the community. Like Kendall County, this is a newly identified need within both communities. Utility prices have seen a significant increase in 2022, at 17.3%, high utilities prices follow access to mental health services as a top concern for Grundy County customers. Tied with high utilities prices is lack of affordable housing at 17.3%. Following close behind is lack of living wage jobs at 16% and lack of affordable childcare at 14.7%.

These concerns will be referenced throughout the entirety of the CAP. These concerns will assist us in analyzing the Needs Assessment for both counties. These concerns will also play a role in further shaping our services, coordination, and outreach to our low-income communities, as well as creating innovative initiatives with the goal of strengthening our ability to help the low-income community reach a higher level of socioeconomic stability and well-being.

Kendall-Grundy’s Community Action Plan provides a glimpse into the workings of the agency as a whole as well as the communities it serves. With the many impacts of COVID-19, drastic price increases for utilities, as well as the rising and falling of unemployment rates, we will continue to be dedicated to the issues at hand and look for positive ways to address them. As a Community Action Agency, we are proud of what we have accomplished with such a small staff and are excited about all we hope to provide for Kendall and Grundy County residents.

Community Service Block Grant (CSBG) funding will be coordinated with resources within the Kendall County Health Department, including the resources received to implement the Low Income Home Energy Assistance Program, Low Income Water Assistance Program and Illinois Home Weatherization Assistance Program which serve both Kendall and Grundy county.

All CSBG eligible households will be referred to other appropriate services as part of meeting each household’s individual needs. We are committed to working with community partners and area stakeholders to ensure we are providing the necessary programs to meet the socioeconomic needs of our customers.
Needs Assessment
The Needs Assessment is performed every three years. For the 2023 Comprehensive Community Action Plan the 2022, or most recent Needs Assessment data and information, will be referred and utilized. To develop the 2022 Community Needs Assessment, we utilized a number of methods to solicit community opinions on growth, development, poverty, and service priorities in the area served. The 2022 Community Needs Assessment is the primary means to define and implement local level programs and plans that will address the specific needs of the community. Both county’s unique needs are identified, analyzed, and prioritized. Plans for implementation include coordinating with other various community organizations and agencies and utilizing a model of community assets rather than just acknowledging service gaps.

The goal of the Community Action Plan (CAP) is to serve as the primary planning tool for the Community Service Block Grant program. The CAP provides information on linkages and coordination efforts with other agencies and programs within our service area that are designed to reduce the incidences of crisis situations and stimulate the movement toward socioeconomic stability and well-being within the low-income population.

The final process of evaluation and monitoring consists of an examination of program elements in order to discover explanations for successes, failures, and changes. The scope of the process evaluation included evaluating service providers, attending quarterly Leadership Team meetings, adopting a 2022-2027 agency wide Strategic Plan, KGCA staff participating in monthly unit meetings, consistently going over policies and procedures, customer outreach efforts, services and the process for service provision, applicant and community linkages, use of community resources, procedures for change from the planned programs with the guidance of the Kendall County Board of Health and the Community Action Tripartite Advisory Board, analyzing critical elements of program implementation, implementation summary and replication, and dissemination efforts.

KGCA staff, using the Needs Assessment survey tool, was able to identify priority areas of needs for services. This information will be carefully analyzed and used to address the agency’s strengths and opportunities for improvement and will help with policy review and staff development. The purpose of the Needs Assessment is as follows:

1. Identify community problems using data and community perception
2. Prioritize community problems
3. Create a plan to address priority problems using measurable objectives
4. Identify key community players who should participate in the implementation plan
5. Define a workable evaluation strategy to assure implementation and outcome of the plan
6. Improve the health and quality of life in KGCA’s service area

As referenced in the following chart our Needs Assessment represents a key element (Assessment) of the Results Oriented Management and Accountability cycle.

The results of the 2022 Customer Needs Assessment and 2022 Satisfaction Survey are presented on the following pages and include analysis of the following Kendall and Grundy County community characteristics:
Demographics, Employment, Education, Housing, Health, Food and Nutrition, and Transportation.
For Kendall/Grundy Community Action’s Kendall County customers, lack of affordable housing received the highest percentage of responses with 18.6% as being customers’ top concern in the community. Lack of affordable childcare with 17.9%, and both lack of living wage jobs and high utilities prices at 16.6% followed close behind as second and third top concerns for KGCA’s Kendall County customers. To be noted, the last needs assessment, conducted in 2019, had lack of transportation as the top main concern while access to mental health services was all together absent among the top six main concerns. The COVID-19 pandemic may have played a part in the community’s regard for access to mental health services. Stress related to the illness itself is only one part of the equation, mass home-confinement directives such as stay-at-home orders, quarantine, and isolation have raised concern about how people will react individually and collectively. (Pfefferbaum, 2020, p.5). Stress, depression, irritability, insomnia, fear, confusion, anger, frustration, boredom, and stigma associated with isolation and quarantine have all played a role in how the COVID-19 pandemic has impacted mental health within our communities. Many of these stressors continue to persist even after stay-at-home mandates were lifted.
When customers residing in Kendall County were asked what services were needed most in their community, 20% of customers expressed the need for utility bill assistance, for which there is limited assistance in Kendall County outside of the Low Income Home Energy Assistance Program (LIHEAP) and the Low Income Household Water Assistance Program (LIHWAP), which are only available to eligible customers once per program year. The only other program available is Nicor Sharing, which is a one-time program that only assists customers with a small portion of their utility bill. Two other services that customers expressed a need for were financial assistance to pay for car registration fees and assistance in getting personal care items, both at 12%. Many community food pantries within the Kendall County area have personal care products available, data regarding the need for those products and service may be more indicative of community awareness or lack thereof. Possibly increasing referrals to local food pantries could help to address this need. It comes as no surprise that financial assistance for car repairs make up for 16% of services needed in Kendall County. Rising costs of new and used cars and shortages mean that people are holding on to cars much longer than in previous years. Currently, there is limited and temporary assistance available for those in need of car repairs and/or registration fees in Kendall County.

Customers from Kendall County were also asked to write freely about any problems or needs that they were unable to receive help with. Their answers are below.

Are there any problems or needs that you or your family faced within the last 12 months that you were unable to receive help with?

- Need better housing
- Transportation on a regular basis
- Help with property taxes
- Getting help with car repairs
- Transportation to Chicago or my daughters
- ComEd and Nicor bills are high
- Paying my house mortgage
- Just to be able to afford rent, water, and garbage collection
- Rent and having a lack of a ride
- Didn’t know of all these programs
- Gas prices rising
- Counseling that accepts Medicaid

These answers indicate that Kendall County customers are experiencing an increased cost of living, due in part to COVID-19 and the effects of the war in Ukraine. Employment numbers are improving, and jobs are available in various industries. However, customers continue to experience difficulty paying their utility bills, rent, and need assistance with transportation. Rising energy costs and inflation are hitting low-income families the hardest. Below is another customer’s answer:

“Right now one of my biggest monthly expenses is utilities. It seems like every month my bills keep getting higher and higher. It used to be that my electric bill was always pretty high but my gas bill was manageable. Now I’m getting slammed by both bills.”
For Kendall/Grundy Community Action’s Grundy County customers, Access to mental health services received the highest percentage of responses with 18.7% as being customers’ top concern in the community. This is the first time that this concern has been prevalent for both counties. Reasons for this are very similar to Kendall County’s and likely have correlations to COVID-19. High utilities prices and lack of affordable housing both at 17.3% followed close behind tied as second top concerns. Lack of transportation and lack of living wage jobs are both at 16% and have been present as top priority needs over the years for KGCA’s Grundy County customers.

When customers residing in Grundy County were asked what services were needed most in their community, making homes more energy efficient came out on top with 33.3% of the customers surveyed expressing this as a service need. This was also Kendall County’s number one service need. Financial assistance with utility bills comes in at second with 22.2% of customers identifying such as a top priority need. The top two needs are directly correlated with each other in that more energy efficient homes will contribute to lower utility bills annually. One-time services will help assist customers in colder months when the cost of heating a home has a greater impact on families. The other top two services that customers expressed as a service need were financial assistance with rent and assistance finding a permanent full-time job.
Both Kendall and Grundy county customers have expressed similar needs in terms of energy efficiency and high utility bills. Different from previous years, both counties considered these needs to be the top two priorities. The two counties identified needs share many similarities. Grundy county customers have identified finding permanent full-time jobs as a concern, while Kendall county customers presented a need for personal care items such as soap, diapers, and other related hygiene products. Customers from both counties have expressed a need for assistance in finding a permanent full-time job, which would help relieve them of poverty and increase their socioeconomic stability and well-being. Overall, the need for energy efficiency and assistance with utility bills is undeniably a top priority for the entire KGCA service area.

Kim Kleinprinz, KGCA’s weatherization tech, gave some insight on these findings:

“With COVID people are in their homes more, or they’re having more home offices. They are in their houses more. People are looking at long-term fixes for their homes. Things like windows and the roof are the first thing that people are wanting to have fixed.”

Melissa Creamer, KGCA’s Director, also gave some insight on these findings:

“Everyone is starting to see people in their neighborhoods getting solar panels installed on their roof. They are probably talking to their neighbors hearing that the solar panels are saving all this money. The problem is that somebody that is low income, doesn’t necessarily have the same opportunities to save money due to the cost of things like solar panels and electric cars. Electric cars and solar panels are expensive. So, if there are programs for the low-income community to obtain solar panels, and energy conservation, I bet you, there is going to be a lot of interest in those programs.”

Customers from Grundy County were also asked to write freely about any problems or needs that they were unable to receive help with. Their answers are below.

Are there any problems or needs that you or your family faced within the last 12 months that you were unable to receive help with?

- Dental
- Reliable transportation
- Internet and cable I can afford
- Paying my Gas and Electric bills
- I need help with dental bills
- I need help to get a vehicle to go places
- Paying house payments

The answers provided by Grundy County customers are indicative of how COVID-19 impacted the community. Many responses illustrate the need for employment related resources. The impacts of COVID-19 also put many Grundy County customers behind on their bills. With new employment opportunities opening up closer to their homes, Grundy County customers are in a phase of recovery after the initial impacts of the COVID-19 pandemic. Financial assistance with utilities, rent, and car repairs is needed to supplement those periods in-between employment and to assist families and individuals currently faced with economic hardship.

One customer expressed, “I can’t afford to get a decent car. I have plenty to worry about right now like working and paying my bills, but how am I supposed to do those things if I don’t have reliable transportation. Any car that I can afford right now ends up needing repairs every few months. Those repairs end up costing more than the car is even worth. All of my money goes to rent and just trying to live.”
Demographics Data

KGCA’s customer population

Below is a demographic report from the Single Tracking Reporting Systems for KGCA customers served over the past year. Of KGCA’s customers, about 37.9% were a single parent female household, 44% identified as Caucasian, 14.5% were employed, 59.9% were renting, and 25% were between the ages of 25-44.

<table>
<thead>
<tr>
<th>Name of CSBG Eligible Entity Reporting:</th>
<th>Kendall Grundy Community Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Total unduplicated number of all INDIVIDUALS about whom one or more characteristics were obtained:</td>
<td>3,963</td>
</tr>
<tr>
<td>B. Total unduplicated number of all HOUSEHOLDs about whom one or more characteristics were obtained:</td>
<td>1,199</td>
</tr>
<tr>
<td>C. INDIVIDUAL LEVEL CHARACTERISTICS</td>
<td></td>
</tr>
<tr>
<td>1. Gender</td>
<td>Number of Individuals</td>
</tr>
<tr>
<td>a. Male</td>
<td>1347</td>
</tr>
<tr>
<td>b. Female</td>
<td>2037</td>
</tr>
<tr>
<td>c. Other</td>
<td>0</td>
</tr>
<tr>
<td>d. Unknown/not reported</td>
<td>35</td>
</tr>
<tr>
<td>TOTAL</td>
<td>3,419</td>
</tr>
<tr>
<td>2. Age</td>
<td>Number of Individuals</td>
</tr>
<tr>
<td>a. 0 - 5</td>
<td>414</td>
</tr>
<tr>
<td>b. 6 - 13</td>
<td>702</td>
</tr>
<tr>
<td>c. 14 - 17</td>
<td>384</td>
</tr>
<tr>
<td>d. 18 - 24</td>
<td>303</td>
</tr>
<tr>
<td>e. 25 - 44</td>
<td>623</td>
</tr>
<tr>
<td>f. 45 - 54</td>
<td>331</td>
</tr>
<tr>
<td>g. 55 - 59</td>
<td>132</td>
</tr>
<tr>
<td>h. 60 - 64</td>
<td>132</td>
</tr>
<tr>
<td>i. 65 - 74</td>
<td>131</td>
</tr>
<tr>
<td>j. 75+</td>
<td>67</td>
</tr>
<tr>
<td>k. Unknown/not reported</td>
<td>0</td>
</tr>
<tr>
<td>TOTAL</td>
<td>3,419</td>
</tr>
<tr>
<td>3. Education Levels</td>
<td>Number of Individuals</td>
</tr>
<tr>
<td>a. Grades 9-12 Non-Graduate</td>
<td>244</td>
</tr>
<tr>
<td>b. High School Graduate/Equivalency Diploma</td>
<td>190</td>
</tr>
<tr>
<td>c. 12 grade + Some Post Secondary</td>
<td>33</td>
</tr>
<tr>
<td>d. 2 or 4 years College Graduate</td>
<td>2</td>
</tr>
<tr>
<td>e. Graduate of other post-secondary school</td>
<td>0</td>
</tr>
<tr>
<td>f. Unknown/not reported</td>
<td>137</td>
</tr>
<tr>
<td>TOTAL</td>
<td>687</td>
</tr>
<tr>
<td>4. Disconnected Youth</td>
<td>Number of Individuals</td>
</tr>
<tr>
<td>a. Youth ages 14-24 who are neither working or in school</td>
<td>0</td>
</tr>
<tr>
<td>5. Health</td>
<td>Number of Individuals</td>
</tr>
<tr>
<td>a. Disability Condition</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>287</td>
</tr>
<tr>
<td>b. Health Insurance*</td>
<td>2567</td>
</tr>
</tbody>
</table>

*If an individual reported that they had Health Insurance please identify the source of Health Insurance below:

<p>| i. Medicaid | 1898 |
| ii. Medicare | 225 |
| iii. State Children’s Health Insurance Program | 30 |
| iv. State Health Insurance for Adults | 0 |
| v. Military Health Care | 0 |
| vi. Direct Purchase | 37 |
| vii. Employment Based | 303 |
| viii. Unknown/not reported | 1004 |
| TOTAL | 3419 |</p>
<table>
<thead>
<tr>
<th>Module 4, Section C: All Characteristics Report - Data Entry Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal 1: Individuals and Families with low-incomes are stable and achieve economic security.</td>
</tr>
</tbody>
</table>

Name of CSBG Eligible Entity Reporting: Kendall Grundy Community Action

## 2. HOUSEHOLD LEVEL CHARACTERISTICS

### Number of Households

<table>
<thead>
<tr>
<th>Household Type</th>
<th>Number of Households</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single Person</td>
<td>348</td>
</tr>
<tr>
<td>Two Adults NO children</td>
<td>79</td>
</tr>
<tr>
<td>Single Parent Female</td>
<td>451</td>
</tr>
<tr>
<td>Single Parent Male</td>
<td>30</td>
</tr>
<tr>
<td>Two Parent Household</td>
<td>217</td>
</tr>
<tr>
<td>Non-related Adults with Children</td>
<td>6</td>
</tr>
<tr>
<td>Multigenerational Household</td>
<td>30</td>
</tr>
<tr>
<td>Other</td>
<td>21</td>
</tr>
<tr>
<td>Unknown/Not reported</td>
<td>13</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>1,190</strong></td>
</tr>
</tbody>
</table>

### 13. Sources of Household Income

<table>
<thead>
<tr>
<th>Income Source</th>
<th>Number of Households</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment Only</td>
<td>369</td>
</tr>
<tr>
<td>Employment &amp; Other Income Source</td>
<td>78</td>
</tr>
<tr>
<td>Income from Employ, Other Income, &amp; Non-Cash Benefits</td>
<td>39</td>
</tr>
<tr>
<td>Income from Employment &amp; Non-Cash Benefits</td>
<td>182</td>
</tr>
<tr>
<td>Other Income Source Only</td>
<td>0</td>
</tr>
<tr>
<td>Other Income Source &amp; Non-Cash Benefits</td>
<td>167</td>
</tr>
<tr>
<td>No Income</td>
<td>374</td>
</tr>
<tr>
<td>Non-Cash Benefits Only</td>
<td>122</td>
</tr>
<tr>
<td>Unknown/Not reported</td>
<td>-114</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>1,190</strong></td>
</tr>
</tbody>
</table>

Below please report the types of Other Income and/or Non-Cash Benefits received by the households who reported sources other than employment.

### 14. Other Income Source

<table>
<thead>
<tr>
<th>Income Source</th>
<th>Number of Households</th>
</tr>
</thead>
<tbody>
<tr>
<td>TANF</td>
<td>10</td>
</tr>
<tr>
<td>Supplemental Security Income (SSI)</td>
<td>196</td>
</tr>
<tr>
<td>SSI Disability (SSDI)</td>
<td>129</td>
</tr>
<tr>
<td>VA Service-Connected Disability Compensation</td>
<td>1</td>
</tr>
<tr>
<td>VA Non-Service Connected Disability Pension</td>
<td>0</td>
</tr>
<tr>
<td>Private Disability Insurance</td>
<td>3</td>
</tr>
<tr>
<td>Workers' Compensation</td>
<td>6</td>
</tr>
<tr>
<td>Retirement Income from Social Security</td>
<td>141</td>
</tr>
<tr>
<td>Pension</td>
<td>23</td>
</tr>
<tr>
<td>Child Support</td>
<td>64</td>
</tr>
<tr>
<td>Alimony or other Spousal Support</td>
<td>4</td>
</tr>
<tr>
<td>Unemployment Insurance</td>
<td>48</td>
</tr>
<tr>
<td>EITC</td>
<td>6</td>
</tr>
<tr>
<td>Other</td>
<td>16</td>
</tr>
<tr>
<td>Unknown/Not reported</td>
<td>0</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>1,190</strong></td>
</tr>
</tbody>
</table>

### 15. Non-Cash Benefits

<table>
<thead>
<tr>
<th>Benefits</th>
<th>Number of Households</th>
</tr>
</thead>
<tbody>
<tr>
<td>SNAP</td>
<td>471</td>
</tr>
<tr>
<td>WIC</td>
<td>0</td>
</tr>
<tr>
<td>LIHEAP</td>
<td>0</td>
</tr>
<tr>
<td>Housing Choice Voucher</td>
<td>0</td>
</tr>
<tr>
<td>Public Housing</td>
<td>0</td>
</tr>
<tr>
<td>Permanent Supportive Housing</td>
<td>0</td>
</tr>
<tr>
<td>HUD-VASH</td>
<td>0</td>
</tr>
<tr>
<td>Childcare Voucher</td>
<td>0</td>
</tr>
<tr>
<td>Affordable Care Act Subsidy</td>
<td>0</td>
</tr>
<tr>
<td>Other</td>
<td>1</td>
</tr>
<tr>
<td>Unknown/Not reported</td>
<td>0</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>1,190</strong></td>
</tr>
</tbody>
</table>

E. Number of Individuals Not Included in the Totals Above (due to data collection system integration barriers)

1. Please list the unduplicated number of INDIVIDUALS served in each program

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Number of Individuals</th>
</tr>
</thead>
<tbody>
<tr>
<td>CSBG</td>
<td></td>
</tr>
</tbody>
</table>

F. Number of Households Not Included in the Totals Above (due to data collection system integration barriers)

1. Please list the unduplicated number of HOUSEHOLDS served in each program

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Number of Households</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Kendall and Grundy counties are located in the northeastern quarter of the state, approximately 50 miles southwest of Chicago’s central business district. The location of both counties in relation to the Chicago standard metropolitan area (SMSA) has important implications for the general pattern and trend of development and strongly influences their socioeconomic profiles. One such effect is the rapid growth in suburban development, particularly in the North and East of the counties where commuting times to Chicago are at their lowest. In addition, the relative location to Aurora/ DuPage County’s Aurora and Will County’s Joliet-Shorewood growth areas further adds to commuting opportunities for county residents.
**Population Change**

**Total Population Change, 2010-2020**

According to the United States Census Bureau Decennial Census, between 2010 and 2020 the population in the report area grew by 19,597 persons, a change of 11.89%. A significant positive or negative shift in total population over time impacts healthcare providers and the utilization of community resources.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>164,805</td>
<td>184,402</td>
<td>19,597</td>
<td>11.89%</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>50,063</td>
<td>52,533</td>
<td>2,470</td>
<td>4.93%</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>114,742</td>
<td>131,869</td>
<td>17,127</td>
<td>14.93%</td>
</tr>
<tr>
<td>Illinois</td>
<td>12,830,633</td>
<td>12,812,508</td>
<td>-18,125</td>
<td>-0.14%</td>
</tr>
<tr>
<td>United States</td>
<td>312,471,161</td>
<td>334,735,155</td>
<td>22,263,994</td>
<td>7.13%</td>
</tr>
</tbody>
</table>

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, Decennial Census. 2020. Source geography: Tract | Show more details

Population Change, Percent by Tract, US Census 2010 - 2020

According to the US Census Bureau, Kendall County’s population increased by 123% from the year 2000-2016, and forecasts show continuing growth. From 2010-2020 Kendall County has grown by 14.93% while Grundy County’s population has increased by almost 5%.

Kendall County continues to see growth. Municipalities like Oswego, Montgomery, and Plano have all experienced continued growth since the last census. Etheridge, (2021) states, “The county’s four largest municipalities all gained in population over the past decade with Yorkville experiencing the largest percentage increase in population, 27%, from 16,921 in 2010 to 21,533 in 2020.” (p.4). Results of the census aid government officials at the state and federal level in making decisions in regard to how resources are allocated to local governments.

Furthermore, Yorkville is nearing home rule status. The state will automatically grant home rule status to communities with 25,0001 or more residents. With home rule status, village boards and city councils have greater taxing and regulatory authority. Home rule can provide greater flexibility over local finances, exercising authority over building, zoning, and sanitation. The municipality of Highwood used home rule to fill a budget hole related to the operations of their fire department and also to issue bonds for a historic $5 million capital project initiative to replace 100-year-old road infrastructure. (Kearney Coral, 2016, p.20). Examples like Highwood perfectly illustrate the ability to implement revenue policies that can lessen reliance on property taxes for eligible municipalities.

Shorewood, located just 25 minutes from Oswego, is seeking Home Rule status. Revenue generated from Home Rule taxes will allow the funding to bring water from Lake Michigan to their residents. Doing so will improve water quality and ensure the availability of water to meet the long term needs of the community. Residents of Shorewood would be looking at a 0.75% sales tax increase on items. (Village of Shorewood Illinois. n.d.). Increased funding for communities means improvements to both infrastructure and the quality of the community, which is a good thing.
and should ultimately be viewed as such. It should also be noted that voters can petition to revoke a community’s Home Rule status. Additionally, sales tax increases related to Home Rule status are typically below 1%. However, implementation of new taxes carries the possible propensity to increase one’s living expenses. With increased financial burden, comes a need for available assistance for renters and homeowners. Emphasizing programs geared toward rental and mortgage assistance will help lessen the possible financial hardships that may follow the implementation of Home Rule status.

Despite the fact that Kendall and Grundy are still growing, the growth of both counties has slowed down significantly since 2010, which may be a consequence of the recession’s aftermath. Many people may have moved to Kendall and Grundy county before the recession hoping for better lives, but when the recession became a reality, it hit many new residents hard. Kendall and Grundy county have experienced first-hand the impact of the “Great Recession” when construction of new homes and people coming to purchase them came to a screeching stop, effectively halting a community’s development and growth.

However, both Kendall and Grundy County have seen a change in momentum just in the past few years as the housing market strengthens and new industries develop. Subdivisions are being built in the area. Farmers are selling their land. Kendall County does not have a Farm Protection Act in place. Additionally, Kendall County has more land to build in comparison to Kane and DuPage County where land is running out. As the adage goes, “if you build it, they will come,” suggesting that building upon available land will inherently bring an increase to the population.

Likely to have even further impact on the growing populations of both counties is the approval of 25 affordable housing developments in 15 Illinois counties, one of which will be in Grundy County and one in Kendall County. Governor JB Pritzker and the Illinois Housing Development Authority Board announced conditional awards totaling nearly $34 million in federal Low-Income Housing Tax Credits. These Tax credits will fund 25 affordable housing developments. Once sold to investors, the tax credits will generate an estimated $296 million in private capital to finance the creation and/or preservation of 1,343 affordable units for low- to moderate-income families, seniors, veterans and persons with special needs. (Illinois.gov, 2022).

Avalon at Morris (Grundy) was one of the approved developments to receive 2023 Low-Income Housing Tax Credits and involves the construction of 55 units across 14 townhome-style residential buildings. Two- and three-bedroom units will be available for non-elderly households earning at or below 60% of the area median income. Deville Manor in Oswego (Kendall) will offer 42 apartments, 32 one bedroom and 10 two-bedroom units for seniors aged 55 and above. (Petesch, 2022)

Both counties continue to change, develop, and diversify with more growth potential happening annually. As the housing market evens itself out and more housing becomes available, Kendall and Grundy counties offer an up-and-coming community for families only an hour outside of Chicago. However, growth often comes with its own set of challenges and could potentially mean an influx of individuals and families in need of social and human services. Kendall Grundy Community Action remains dedicated to assisting those in socio-economic duress reach a higher level of self-sufficiency.
Looking at population by age and gender, Kendall and Grundy County have seen an increase in their senior population over the years. In 2019, the population of 64 years and older was at 9.69%, and the most current estimates have the senior population at 11.4%. There have been new senior housing developments built in the last five years. With recent news of senior housing developments in Oswego, more is likely to come in both counties.
Race and Ethnicity

Total Population by Race Alone, Total

This indicator reports the total population of the report area by race alone.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>White</th>
<th>Black</th>
<th>Asian</th>
<th>Native American / Alaska Native</th>
<th>Native Hawaiian / Pacific Islander</th>
<th>Some Other Race</th>
<th>Multiple Races</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>147,336</td>
<td>10,737</td>
<td>4,691</td>
<td>109</td>
<td>19</td>
<td>7,445</td>
<td>7,951</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>47,190</td>
<td>632</td>
<td>428</td>
<td>21</td>
<td>19</td>
<td>1,129</td>
<td>1,379</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>100,146</td>
<td>10,105</td>
<td>4,203</td>
<td>178</td>
<td>0</td>
<td>6,316</td>
<td>6,575</td>
</tr>
<tr>
<td>Illinois</td>
<td>8,674,667</td>
<td>1,794,660</td>
<td>709,567</td>
<td>33,072</td>
<td>5,196</td>
<td>757,150</td>
<td>530,552</td>
</tr>
<tr>
<td>United States</td>
<td>229,960,813</td>
<td>41,227,384</td>
<td>18,421,637</td>
<td>2,686,614</td>
<td>611,404</td>
<td>16,781,914</td>
<td>16,875,542</td>
</tr>
</tbody>
</table>

Hispanic Population

The estimated population that is of Hispanic, Latino, or Spanish origin in the report area is 29,915. This represents 16.77% of the total report area population, which is less than the national rate of 18.19%. Origin can be viewed as the heritage, nationality group, lineage, or country of birth of the person or the person’s parents or ancestors before their arrival in the United States. People who identify their origin as Hispanic, Latino, or Spanish may be of any race.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population</th>
<th>Non-Hispanic Population</th>
<th>Percent Population Non-Hispanic</th>
<th>Hispanic or Latino Population</th>
<th>Percent Population Hispanic or Latino</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>178,381</td>
<td>149,466</td>
<td>63.43%</td>
<td>29,915</td>
<td>16.77%</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>50,791</td>
<td>45,620</td>
<td>89.81%</td>
<td>5,176</td>
<td>10.19%</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>127,583</td>
<td>102,846</td>
<td>80.61%</td>
<td>24,737</td>
<td>19.39%</td>
</tr>
<tr>
<td>Illinois</td>
<td>12,716,164</td>
<td>10,525,468</td>
<td>82.77%</td>
<td>2,190,696</td>
<td>17.23%</td>
</tr>
<tr>
<td>United States</td>
<td>326,569,308</td>
<td>287,209,288</td>
<td>81.82%</td>
<td>59,361,020</td>
<td>18.18%</td>
</tr>
</tbody>
</table>


Population, Hispanic or Latino, Percent by Tract, ACS 2016-20

- Over 10.0%
- 5.1 - 10.0%
- 2.1 - 5.0%
- Under 2.1%
- No Hispanic Population Reported
- No Data or Data Suppressed
- Report Location
Demographic analysis for Kendall County

The U.S. Census Bureau bases its new population estimates, which use administrative data and estimates for birth, deaths, and net migration, on Census 2010 population counts updated to reflect any official census corrections. In the year 2020, the population division of the U.S. Census Bureau estimated the median age in Kendall County to be 35.5 years old, less than the median age for the State of Illinois at 38.43 years old. With 28.5% of the population made up of individuals less than 18 years old, Kendall County can be described as having a medium-high percentage of people under 18 compared to the state percentage of 22.5%. People 65 and older make up 10.4% of the total population in the area in 2020, compared to the state percentage of 15.7%. This represents a relatively low percent of the population base. However, it should be noted that the population over 65 continues to grow annually with an overall increase of almost 2% since 2016.

The overall population of Kendall County continues to grow, although at a slower rate since 2010. Key factors in continued growth may very likely be due to new housing opportunities that are coming to the county every year. Before the recession, Kendall County attracted many working families from Chicago and the collar counties due to all the new housing being constructed. Many families were willing to commute to work in order to live in a “nicer” area that had “good schools”. The recession however made those dreams harder to actualize. Even though there was a foreclosure crisis in Kendall County during the recession, the population remained on the rise, though not as significantly as before 2010. While further analysis needs to be done to check these possibilities, this data hints to KGCA that people may have foreclosed on their homes but either remained living in Kendall County or moved out and other people moved into the foreclosed homes.

Oswego has detailed many new plans for expansion. Ground has already broken on Avanterra, a new community of high-end rental properties. Oswego Village Senior Living Community is looking to expand availability for senior housing in Kendall County. Fox Ridge Stone, a 438-acre site, was also fully annexed into the Village of Oswego. New housing developments, senior living, and businesses coming to Oswego foreshadow the continued growth within the county for the next few years. (Petesch, 2022).

Kendall County has led all counties in growth of foreign-born immigrants since the 2010 Census. See chart below.

Kendall County continues to grow and diversify. In an article published by the Aurora Beacon News, white county residents decreased from 83.6% of the population in 2010 to 67.4% in 2020. Black residents stand at 8% of the population in 2020 in Kendall County compared to 5.7% in 2010. The Hispanic population in the county rose from 15.6% in 2010 to 20% in 2020. (Jones, 2021, p.16).
Chicagoland World Relief provided information regarding refugee settlement in Kendall County. At this time there is not an exact number of people that will resettle in Kendall County. However, it has been stated that it is very common for older people to move to Kendall County—especially to Oswego or Yorkville. If expansion of the normal resettlement comes to Kendall County, World Relief will be intentional to bring key stakeholders to the table (school districts, city/county officials, police/public safety, medical providers, churches, public aid, and social security). Larger families may be placed in Kendall County if full houses are found for rent. It is preferred to place new families near others from their community to ensure support. Funds provided to clients from World Relief will assist with many of these family’s needs to get reestablished. Additional assistance will be needed as funding does not typically cover security deposits and 3 months of rent. Fundraising is used to help pay the difference. World Relief is notified 1-2 weeks’ leading up to a case arriving at O’Hare international Airport. Once notice has been received World Relief works to find affordable housing and furniture for the new family. World Relief also assists the families in completing Social Security applications, transportation to initial medical appointments, furniture/household items, and hygiene items.

Demographic analysis for Grundy County

The Census Bureau estimated the median age in Grundy County to be 38.1 years old as of 2020. The median age in Grundy is equal to the median age for the State of Illinois at 38.3% and the United States at 38.2%. The area has seen a consistent pattern in the median age since 2000, when the median age was 36.4 years old.

With 25.2% of the population being comprised of individuals under the age of 18, Grundy County can be understood as having a medium-high percent of individuals under 18. In Illinois, the percentage of persons under 18 years is 22.5%. Persons 65 years and older make up 13.9% of the Grundy population. When compared to other counties throughout the U.S., this represents a medium-low proportion of the area population base. Grundy County has a much higher senior population in comparison to Kendall County, especially persons aged over 70.

Grundy County was ranked as the one of the fastest growing counties in Illinois. It is important to pay attention to this type of growth as it comes with likely future challenges; higher enrollment due to new subdivisions and an increased number of children requires the development of more schools, and road congestion due to population growth requires the widening and construction of more roads. With Morris being the largest city in terms of overall population in Grundy County, they are likely the hotbed for growth and development. With a larger senior population, public transportation is necessary to sustain the continued growth. State Sen. Linda Holmes stresses what a “huge” issue bringing a Metra commuter rail service to Oswego has been. On a smaller scale, businesses and community members of Grundy County have expressed concerns regarding the current state of transportation. Grundy County Comprehensive Plan illustrates the potential multimodal transportation opportunities for Grundy County due to its proximity to Interstate 80 and Chicago. Community members state that they would like to see an additional lane or added turn lanes on IL Route 47 to remediate traffic congestion in the area. (Grundy County Economic Development Council, 2014).
Kendall County had the highest percentage increase in Illinois with a growth of 14.93% since 2010, while Grundy saw an increase of 4.93%. On the map above, Kendall County is drastically leading the state in population growth. Grundy County comes in at second for population growth in the northern region and fourth overall. What can also be seen on this map is how much the rest of Illinois’ population has massively declined since 2010. The map below shows how Illinois is leading the nation in population decline, despite being home to one of the fastest growing counties in the nation.
Population loss has a deeper impact than some might even realize. Declining numbers have negatively impacted Illinois’ representation because the census is used to determine representation in the US House of Representatives along with determining Federal funding for state programs. Illinois previously had 18 seats in the House (13 Democrat, 5 Republican), with each of them representing approximately 745,000 people. So, with a population loss of just under 200,000 between 2010 and 2020, Illinois lost one seat. (Horta, 2020, p.3).

**Poverty**

The US Census Bureau estimates that in 2020, 27.15% of Americans were living with income at or below 185% of the federal poverty line. The annual income for a family of 4 at 185% of the federal poverty guideline is less than $52,000 annually. In Illinois, 3,095,502 live at or below 185% of the poverty line, making up for nearly 25% of the total population.

The COVID-19 pandemic caused significant hardship across the world. In the early months of the crisis, tens of millions of people lost their jobs. While employment began to rebound within a few months, unemployment remained high throughout 2020. Employment continued to improve, and relief measures were taken through the federal government in the form of Child Tax Credits and stimulus payments. Still, unmet needs remained near the end of 2021, with 20 million households reporting having too little to eat in the past seven days and 10 million households were behind on rent. Key hardship indicators showed strong improvement during early 2021, aided by job growth and government benefits. Hardship rates fell especially fast after the enactment of the American Rescue Plan Act on March 11, 2021, which included $1,400 payments for most Americans as well as other assistance to
struggling households. (Center on Budget and Policy, n.d.). The below chart illustrates the impact of relief for American families comparing the beginning of the pandemic and the following year.

![Hardship Fell After Relief Enacted But Persisted in 2021](chart)

While improvements can be seen, relief is only temporary. According to the Center on Budget and Policy Priorities (n.d.), “in October 2021, nearly 20 million adults lived in households that did not get enough to eat, 12 million adult renters were behind on rent, and some of the progress from late March appeared to have stalled as other troubles continued to affect the economy, including expiring unemployment benefits and supply chain problems that contributed to rising prices for many goods.” (p.3). It goes without saying that all Americans were impacted by COVID-19 and those already experiencing economic hardship prior to the pandemic were hit harder.

Overall, Poverty rates actually improved in both Kendall and Grundy counties from 2010-2020. Kendall county saw poverty rates decrease by .7% while Grundy County saw rates decrease by 2.1%. What this shows is that our counties and the whole United States is showing significant progress in fighting poverty. However, data for the 2020 Census was completed in October of 2020, very early on in the COVID-19 pandemic. Numbers likely do not reflect the impacts of COVID-19 to their fullest extent. Further analysis is needed to provide a better illustration of COVID-19’s impact on poverty.
Poverty Rate Change

Poverty rate change in the report area from 2010 to 2020 is shown below. According to the U.S. Census, the poverty rate for the area decreased by -1.16%, compared to a national change of -3.4%.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Persons in Poverty 2010</th>
<th>Poverty Rate 2010</th>
<th>Persons in Poverty 2020</th>
<th>Poverty Rate 2020</th>
<th>Change in Poverty Rate 2010-2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>9,333</td>
<td>5.62%</td>
<td>8,087</td>
<td>4.46%</td>
<td>-1.16%</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>3,992</td>
<td>8.0%</td>
<td>3,009</td>
<td>5.9%</td>
<td>-2.1%</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>5,341</td>
<td>4.6%</td>
<td>5,078</td>
<td>3.9%</td>
<td>-0.7%</td>
</tr>
<tr>
<td>Illinois</td>
<td>1,732,129</td>
<td>13.8%</td>
<td>1,351,150</td>
<td>11.0%</td>
<td>-2.8%</td>
</tr>
<tr>
<td>United States</td>
<td>46,215,956</td>
<td>15.3%</td>
<td>38,371,394</td>
<td>11.9%</td>
<td>-3.4%</td>
</tr>
</tbody>
</table>

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, Small Area Income and Poverty Estimates. 2020. Source geography: County

---

Poverty - Population Below 185% FPL

In the report area 14,58% or 25,860 individuals for whom poverty status is determined are living in households with income below 185% of the Federal Poverty Level (FPL). This indicator is relevant because poverty creates barriers to access including health services, healthy food, and other necessities that contribute to poor health status.

Note: The total population measurements for poverty reports are lower, as poverty data collection does not include people in group quarters. See Methodology for more details.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population</th>
<th>Population with Income at or Below 185% FPL</th>
<th>Percent Population with Income at or Below 185% FPL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>177,350</td>
<td>25,860</td>
<td>14.58%</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>50,158</td>
<td>9,318</td>
<td>18.58%</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>127,192</td>
<td>16,542</td>
<td>13.01%</td>
</tr>
<tr>
<td>Illinois</td>
<td>12,418,504</td>
<td>3,095,502</td>
<td>24.93%</td>
</tr>
<tr>
<td>United States</td>
<td>318,564,129</td>
<td>86,498,962</td>
<td>27.15%</td>
</tr>
</tbody>
</table>

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey. 2016-20. Source geography: Tract

---
Poverty - Population Below 100% FPL

Poverty is considered a key driver of health status.

Within the report area 5.12% or 9,073 individuals for whom poverty status is determined are living in households with income below the Federal Poverty Level (FPL). This indicator is relevant because poverty creates barriers to access including health services, healthy food, and other necessities that contribute to poor health status.

Note: The total population measurements for poverty reports are lower, as poverty data collection does not include people in group quarters. See Methodology for more details.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population</th>
<th>Population in Poverty</th>
<th>Population in Poverty, Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>177,350</td>
<td>9,073</td>
<td>5.12%</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>50,158</td>
<td>3,537</td>
<td>7.05%</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>127,192</td>
<td>5,536</td>
<td>4.35%</td>
</tr>
<tr>
<td>Illinois</td>
<td>12,486,504</td>
<td>1,488,670</td>
<td>11.99%</td>
</tr>
<tr>
<td>United States</td>
<td>318,564,128</td>
<td>40,910,326</td>
<td>12.84%</td>
</tr>
</tbody>
</table>

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: Tract. Show more details

Seniors in Poverty

Population and poverty estimates for persons age 65 and up are shown for the report area. According to the American Community Survey (ACS) 5 year data, an average of 5.8% of people lived in a state of poverty during the survey calendar year. The poverty rate for people living in the report area is less than the national average of 9.3%.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Ages 65 and Up Total Population</th>
<th>Ages 65 and Up in Poverty</th>
<th>Ages 65 and Up Poverty Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>19,911</td>
<td>1,156</td>
<td>5.8%</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>6,602</td>
<td>496</td>
<td>7.1%</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>13,109</td>
<td>670</td>
<td>5.1%</td>
</tr>
<tr>
<td>Illinois</td>
<td>1,925,764</td>
<td>169,022</td>
<td>8.8%</td>
</tr>
<tr>
<td>United States</td>
<td>51,072,143</td>
<td>4,756,707</td>
<td>9.3%</td>
</tr>
</tbody>
</table>

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: County. Show more details

Population Below the Poverty Level, Senior (Age 65+), Percent by Tract, ACS 2016-20

- Over 17.0%
- 12.1 - 17.0%
- 7.1 - 12.0%
- Under 7.1%
- No Population Age 65+ Reported
- No Data or Data Suppressed
- Report Location
Poverty - Children Below 100% FPL

In the report area, 6.65% or 3,245 children aged 0-17 are living in households with income below the Federal Poverty Level (FPL). This indicator is relevant because poverty creates barriers to access including health services, healthy food, and other necessities that contribute to poor health status.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>177,350</td>
<td>48,773</td>
<td>3,245</td>
<td>6.65%</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>50,158</td>
<td>12,519</td>
<td>1,234</td>
<td>9.86%</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>127,192</td>
<td>36,254</td>
<td>2,011</td>
<td>5.55%</td>
</tr>
<tr>
<td>Illinois</td>
<td>12,418,504</td>
<td>2,813,715</td>
<td>454,654</td>
<td>16.16%</td>
</tr>
<tr>
<td>United States</td>
<td>318,564,128</td>
<td>72,065,774</td>
<td>12,598,699</td>
<td>17.48%</td>
</tr>
</tbody>
</table>

Note: This indicator is compared to the state average.
Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: County. Show more details

Families in Poverty by Family Type

The number of families in poverty by type are shown in the report area. According to ACS 2016-2020 5 year estimates for the report area, there were 1,749 families living in poverty.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Families</th>
<th>Families in Poverty Total</th>
<th>Families in Poverty Married Couples</th>
<th>Families in Poverty Male Householder</th>
<th>Families in Poverty Female Householder</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>46,981</td>
<td>1,749</td>
<td>594</td>
<td>189</td>
<td>1,046</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>14,250</td>
<td>758</td>
<td>366</td>
<td>66</td>
<td>326</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>32,731</td>
<td>991</td>
<td>228</td>
<td>43</td>
<td>720</td>
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<tr>
<td>Illinois</td>
<td>3,116,415</td>
<td>263,204</td>
<td>88,315</td>
<td>28,514</td>
<td>146,375</td>
</tr>
<tr>
<td>United States</td>
<td>78,849,830</td>
<td>7,245,704</td>
<td>2,684,272</td>
<td>768,434</td>
<td>3,792,998</td>
</tr>
</tbody>
</table>

Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: County. Show more details

Married Family Households Living Below the Poverty Level, Percent by Tract, ACS 2016-20

- Over 9.0%
- 6.1 - 9.0%
- 3.1 - 6.0%
- Under 3.1%
- No Married Families Reported
- No Data or Data Suppressed
- Report Location

Families in Poverty by Family Type

- Married Couples: 34.0%
- Female Householder: 59.8%
- Male Householders: 6.2%
Demographically speaking, after analyzing the poverty data, female headed households are the family type at the highest rate of poverty in the area at 59.8%. This is overwhelmingly the case for Illinois, and across the United States. Additionally, the Kendall and Grundy County children poverty rates below 100% of the federal poverty guideline are higher than the all ages poverty rate (below 100% FPL) at 5.55% and 9.86%, respectively. Grundy County senior populations continue to see an increase in poverty at 7.1%, nearing closer to both the state and national averages at 8.8% and 9.3% respectively.

After assessment of the poverty data for the reporting area, KGCA is only assisting 41.6% of the poverty-stricken population. We may deduce that we are missing seniors and married couples in our outreach efforts. The senior population shows the significant need. At this time, KGCA is serving only 17% of the seniors in poverty within the service area. The goal for KGCA is to assist all persons suffering from poverty, but with limited funds and staff available, reaching this goal continues to be a challenge.

Throughout the year, KGCA conducts an annual needs assessment by having customers participate in taking surveys. KGCA also conducts a similar needs assessment that the community as a whole participates in. KGCA asked community members in the reporting area “Which of the following areas do you believe seniors in your community need assistance with in order to remain in their home?” The results are shown below.

<table>
<thead>
<tr>
<th>Area</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housework</td>
<td>12.0%</td>
</tr>
<tr>
<td>Managing Medications</td>
<td>10.6%</td>
</tr>
<tr>
<td>Financial Assistance</td>
<td>10.9%</td>
</tr>
<tr>
<td>Yard Work and/or Snow Removal</td>
<td>13.2%</td>
</tr>
<tr>
<td>Grocery Shopping</td>
<td>8.8%</td>
</tr>
<tr>
<td>Tax Preparation/Legal Issues</td>
<td>6.5%</td>
</tr>
<tr>
<td>Home Repairs</td>
<td>7.6%</td>
</tr>
<tr>
<td>Preparing Meals</td>
<td>6.7%</td>
</tr>
<tr>
<td>Access to Transportation</td>
<td>8.5%</td>
</tr>
<tr>
<td>Energy/Utility Costs</td>
<td>9.7%</td>
</tr>
<tr>
<td>Laundry</td>
<td>11.0%</td>
</tr>
</tbody>
</table>

13% of community members believe that Energy/Utility costs are seniors greatest need in order to remain in their homes. 12% reported home repairs, while 11% said that housework was the greatest need.

Utility prices have skyrocketed over the last year. Utility companies raised rates, increasing the service delivery costs per therm and kilowatt twice during the last LIHEAP program year. Therms are a measurement of gas and kilowatt (KWT) are a measurement of electricity used specifically when referring to service delivery. High prices have greatly impacted families across northern Illinois especially those on a fixed income.
Another question asked by KGCA to the community was, “What do you believe causes poverty?” The most frequent responses received included:

**What Do You Believe Causes Poverty?**

- Lack of access to mental health services
- Substance abuse
- Poor quality of education
- Jobs offering low wages
- Limited availability of full-time jobs

KGCA also asked the community “Which of the following issues do you believe low-income families and individuals need assistance with in order to achieve or maintain self-sufficiency?” The results are shown below.

**Which issues do you believe low-income families and individuals need assistance with in order to achieve or maintain self-sufficiency?**

Employment comes out on top with 12.3% of community members responding. Following employment is housing and job training. With the same responses from the last community needs assessment conducted in 2017, these needs continue to be a trend with community members. It seems that jobs are both the problem and solution. Taking a look at what the customers reported, as well as responses from community members, there are not enough full-time jobs around, nor an abundance of jobs that pay well enough to maintain self-sufficiency. If one is not working or cannot find a job paying a living wage, more job training or education needs to be obtained.
Crime

Both Kendall and Grundy County have low crime rates compared to the national average and offer residents an overall safe place to live. The rate of crime in Kendall County is 13.11 per 1,000 residents during a standard year. People who live in Kendall County generally consider the east part of the county to be the safest. The rate of violent crime in Grundy County is 1.94 per 1,000 residents during a standard year. People who live in Grundy County generally consider the northeast part of the county to be the safest area to reside. (crimegrade.org, n.d.).

### Violent Crime - Total

Violent crime includes homicide, rape, robbery, and aggravated assault.

Within the report area, the 2015-2017 three-year total of reported violent crimes was 484, which equates to an annual rate of 106.90 crimes per 100,000 people, lower than the statewide rate of 420.90.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population</th>
<th>Violent Crimes - 3-year Total</th>
<th>Violent Crimes - Annual Rate (Per 100,000 Pop.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>150,803</td>
<td>484</td>
<td>106.90</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>51,420</td>
<td>214</td>
<td>138.70</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>99,383</td>
<td>270</td>
<td>90.50</td>
</tr>
<tr>
<td>Illinois</td>
<td>12,875,915</td>
<td>162,592</td>
<td>420.90</td>
</tr>
<tr>
<td>United States</td>
<td>366,886,849</td>
<td>4,579,031</td>
<td>416.00</td>
</tr>
</tbody>
</table>

Note: This indicator is compared to the state average.

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### Property Crime - Total

This indicator reports the rate of property crime offenses reported by law enforcement per 100,000 residents. Property crimes include burglary, larceny-theft, motor vehicle theft, and arson. This indicator is relevant because it assesses community safety.

In the report area, 2,062 property crimes occurred in 2014 and 2016 (two years). The property crime rate of 1,236.8 per 100,000 residents is lower than the statewide rate of 2,022.6 per 100,000.

Note: Data are suppressed for counties if, for both years of available data, the population reported by agencies is less than 50% of the population reported in Census or less than 80% of agencies measuring crimes reported data.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population</th>
<th>Property Crimes - Annual Average</th>
<th>Property Crimes - Annual Rate (Per 100,000 Pop.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>166,754</td>
<td>2,062</td>
<td>1,236.8</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>49,619</td>
<td>684</td>
<td>1,398.4</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>116,935</td>
<td>1,378</td>
<td>1,126.2</td>
</tr>
<tr>
<td>Illinois</td>
<td>12,841,037</td>
<td>259,569</td>
<td>2,022.6</td>
</tr>
<tr>
<td>United States</td>
<td>321,015,117</td>
<td>7,915,583</td>
<td>2,466.1</td>
</tr>
</tbody>
</table>

Note: This indicator is compared to the state average.
Domestic Violence

Stay-at-home orders have had led to economic strain, feelings of isolation, substance abuse, and increased vulnerability for at risk populations. An alarming trend to emerge from the COVID-19 pandemic is the rise of domestic violence. According to Boserup et al., (2020), “DV [Domestic Violence] usually occurs in a domestic space when one individual holds power over another. DV is a broad term and typically includes intimate partner violence (IPV) (e.g., usually occurs between current or former intimate partners and includes stalking, psychological, sexual and physical violence) elder abuse (e.g., involves negligent or intentional acts which cause harm) and child abuse (e.g., includes neglect, physical harm, sexual violence, and emotional harm).” (p.3). Data was collected from police departments across the nation regarding domestic violence to determine the effect that COVID-19 might have had. Studies found that domestic violence cases increased by 25-33 percent globally in 2020. In cases of domestic violence COVID should not be looked at as a direct cause of domestic violence. Rather, COVID only exacerbated an already existing problem. Stay-at-home orders and quarantine measures create an abundance of opportunity for occurrence in a way that might not have existed previously.

Local law enforcement has seen an increase in domestic violent cases since the Stay-at-Home Order. Local community partners, Mutual Ground and Breaking Free provide free education, awareness, and services including emergency shelter to end the cycle of domestic and sexual violence serving Kendall County and areas of Kane County. They are currently providing virtual and tele-health counseling. The shelter is still operating with increased precautions. According to Mutual Ground’s 2021 annual report, they had 6,004 calls that year to their crisis line. 170 adults and children utilized their emergency shelter services and 1,292 adults and children participated in their counseling services (Mutual Ground, 2021).

To further address domestic violence, the Kendall County Domestic Violence Response Team (DVRT) was created in January of 2020. The team consists of the Kendall County States Attorney’s Office who presents the domestic violence case in criminal court, the Kendall County Sheriff’s Office who investigates complaints to inform the courts during case prosecution, the Kendall County Health Department who provides community resources to victims, and Mutual Ground who provides support to the victims.

The DVRT focuses on victim safety and abuser accountability by improving victim participation throughout the criminal case. Criminal cases can sometimes take over a year to be closed; it can be challenging for a victim to stay engaged throughout the entire process. (Nacht, 2021). In cases of domestic violence, victims are often critical witnesses. Other forms of evidence are collected by the DVRT detective in partnership with local law enforcement. Photographs and recorded statements are examples of evidence that is collected. Nacht, (2021), states, “Collecting other forms of evidence allows some of the burden to be taken off of the victim.” (p.4).

It was determined that the Kendall County Health Department’s involvement in such a team would be better handled by Community Action due to its capability of providing financial resources to the victims. Community Action joined the Domestic Violence Response Team in September of 2021. The goal of the team as a whole is to provide meaningful contact with the victims of domestic violence that will assist the victim in maintaining cooperation throughout the entire process of the courts. The team provides financial assistance to facilitate independence, legal advocates to attend court with the victim, a dedicated detective whose only priority are domestic violence cases, and the State’s Attorney’s office who will be trying these cases. Each individual contact is necessary for the success of the team.
Housing

The Customer Needs Assessment addressed the current conditions concerning housing in both counties. The survey question focusing on housing is below:

Which housing needs could you or family use help with?

Finding affordable housing that fits my family's needs
Getting financial assistance with a down payment or closing costs to buy a home
Qualifying for a loan to buy a home
Obtaining home ownership education
Obtaining renter/tenant rights and responsibilities education
Learning basic home repair and property maintenance skills
Getting financial assistance with rent payments
Getting financial assistance with rent deposits
Making my homes more energy efficient
Making changes to my home for a person with disabilities
Getting emergency shelter

Top four responses for Grundy County were:

- **26%**: Making my home more energy efficient
- **21%**: Getting financial assistance with rent payments and/or security deposits
- **15%**: Learning basic home repair and property maintenance skills
- **13%**: Getting financial assistance with a down payment or loan
Top five Kendall County responses were:
- 28%: Making my home more energy efficient
- 18%: Learning basic home repair and property maintenance skills
- 15%: Getting financial assistance with a down payment or closing costs to buy a home and Qualifying for a loan to buy a home
- 13%: Getting financial assistance with rent and/or security deposits
- 13%: Help qualifying for a loan to buy a home

Financial assistance continues to be a highly identified need by KGCA clients. According to the National Low Income Housing Coalition, 71% of extremely low-income renter households are severely cost burdened or spend more than half of their income on housing. This problem is aggravated due to a severe shortage of affordable units for extremely low-income families. Illinois will need to create and preserve over 288,000 housing units to close the gap and ensure these households are less burdened and have more security in making their rent payment. (Illinois.gov, 2022).

It is interesting to note that all of KGCA’s customers’ number one housing need was making my home more energy efficient. In 2022, customers are focused on energy efficient homes and home repair. COVID-19 impacted families in a new way. Homes have become more than a residence; they are offices, schools, and safe havens. KGCA’s weatherization program has always historically maintained a two-year waiting list for their services, and many customers express their frustrations on having to wait that long. KGCA’s Illinois Home Weatherization Assistance Program (IHWAP) grant only covers about 25 houses per year for both Kendall and Grundy, and as the population grows in the area, so does the need.

Overall, 26.6% of KGCA customers responded with Making my home more energy efficient. 16.5% answered that they needed financial assistance with rent and/or security deposits. Also, at 16.5% was learning basic home repair and property maintenance skills. 13.9% asked for financial assistance with a down payment or closing costs to buy a home. 11.4% would like assistance qualifying for a loan to buy a home. 6.3% of clients identified finding affordable housing that fits their family’s needs. Making changes to homes for a person with disabilities was also at 6.5%. Finally, at 2.5% was obtaining renter/tenant rights and responsibilities education.
Housing cost burden

The National Low Income Housing Coalition (NLIHC) put out a report in 2021 showing that both Kendall and Grundy Counties are among the most expensive areas in the state of Illinois to reside in.

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**FACTS ABOUT ILLINOIS:**

<table>
<thead>
<tr>
<th>STATE FACTS</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Minimum Wage</td>
<td>$11.00</td>
</tr>
<tr>
<td>Average Renter Wage</td>
<td>$18.23</td>
</tr>
<tr>
<td>2-Bedroom Housing Wage</td>
<td>$22.11</td>
</tr>
<tr>
<td>Number of Renter Households</td>
<td>1,643,419</td>
</tr>
<tr>
<td>Percent Renters</td>
<td>34%</td>
</tr>
</tbody>
</table>

**MOST EXPENSIVE AREAS**

| Housing Wage |
|---|---|
| Chicago-Joliet-Naperville MSA | $24.98 |
| Kendall County | $24.67 |
| Grundy County | $22.63 |
| DeKalb County | $19.81 |
| Kankakee County | $18.17 |

* MSA = Metropolitan Statistical Area; HMFA = HUD Metro FMR Area. ** Ranked from highest to lowest 2-bedroom housing wage. Includes District of Columbia and Puerto Rico.**
NLIHC broke down housing costs for each jurisdiction. Kendall County’s information is below.

<table>
<thead>
<tr>
<th>Number of Households</th>
<th>Illinois</th>
<th>Kendall County</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL</td>
<td>4,884,061</td>
<td>41,398</td>
</tr>
<tr>
<td>RENTER</td>
<td>1,646,283</td>
<td>6,835</td>
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<td>PERCENT RENTERS</td>
<td>34%</td>
<td>27%</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Housing Wage</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>ZERO-BEDROOM</td>
<td>$17.63</td>
<td>$19.00</td>
</tr>
<tr>
<td>ONE-BEDROOM</td>
<td>$19.35</td>
<td>$19.13</td>
</tr>
<tr>
<td>TWO-BEDROOM</td>
<td>$22.80</td>
<td>$25.06</td>
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<tr>
<td>THREE-BEDROOM</td>
<td>$29.17</td>
<td>$35.60</td>
</tr>
<tr>
<td>FOUR-BEDROOM</td>
<td>$34.13</td>
<td>$36.56</td>
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<table>
<thead>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>ZERO-BEDROOM</td>
<td>$917</td>
<td>$988</td>
</tr>
<tr>
<td>ONE-BEDROOM</td>
<td>$1,006</td>
<td>$995</td>
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<tr>
<td>TWO-BEDROOM</td>
<td>$1,186</td>
<td>$1,303</td>
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<td>$1,517</td>
<td>$1,851</td>
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<td>$1,775</td>
<td>$1,901</td>
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<table>
<thead>
<tr>
<th>Annual Income Needed to Afford</th>
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<th></th>
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</thead>
<tbody>
<tr>
<td>ZERO-BEDROOM</td>
<td>$36,663</td>
<td>$39,520</td>
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<tr>
<td>ONE-BEDROOM</td>
<td>$40,239</td>
<td>$39,800</td>
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<tr>
<td>TWO-BEDROOM</td>
<td>$47,434</td>
<td>$52,120</td>
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<tr>
<td>THREE-BEDROOM</td>
<td>$60,675</td>
<td>$74,040</td>
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<tr>
<td>FOUR-BEDROOM</td>
<td>$70,983</td>
<td>$76,040</td>
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<table>
<thead>
<tr>
<th>Minimum Wage</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>MINIMUM WAGE</td>
<td>$12.00</td>
<td>$12.00</td>
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<tr>
<td>RENT AFFORDABLE FOR A FULL-TIME WORKER AT MINIMUM WAGE</td>
<td>$624</td>
<td>$624</td>
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<thead>
<tr>
<th>Work Hours/Week at Minimum Wage</th>
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<td>63</td>
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<tr>
<td>ONE-BEDROOM</td>
<td>64</td>
<td>64</td>
</tr>
<tr>
<td>TWO-BEDROOM</td>
<td>76</td>
<td>84</td>
</tr>
<tr>
<td>THREE-BEDROOM</td>
<td>97</td>
<td>119</td>
</tr>
<tr>
<td>FOUR-BEDROOM</td>
<td>114</td>
<td>122</td>
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<table>
<thead>
<tr>
<th>Supplemental Security Income (SSI) Payment</th>
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<tr>
<td>SSI MONTHLY PAYMENT</td>
<td>$841</td>
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<td>RENT AFFORDABLE TO SSI RECIPIENT</td>
<td>$252</td>
<td>$252</td>
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<table>
<thead>
<tr>
<th>Income Levels</th>
<th></th>
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<tbody>
<tr>
<td>30% OF AREA MEDIAN INCOME (AMI)</td>
<td>$29,929</td>
<td>$40,560</td>
</tr>
<tr>
<td>50% OF AREA MEDIAN INCOME (AMI)</td>
<td>$49,881</td>
<td>$67,600</td>
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<tr>
<td>MEDIAN RENTER HOUSEHOLD INCOME</td>
<td>$48,776</td>
<td>$65,058</td>
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<table>
<thead>
<tr>
<th>Rent Affordable at Different Income Levels</th>
<th></th>
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<tbody>
<tr>
<td>30% OF AREA MEDIAN INCOME (AMI)</td>
<td>$748</td>
<td>$1,014</td>
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<tr>
<td>50% OF AREA MEDIAN INCOME (AMI)</td>
<td>$1,247</td>
<td>$1,690</td>
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<tr>
<td>MEDIAN RENTER HOUSEHOLD INCOME</td>
<td>$1,344</td>
<td>$1,626</td>
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</tbody>
</table>
NLIHC broke down housing costs for each jurisdiction. Grundy County’s information is below.

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<thead>
<tr>
<th>Housing Wage</th>
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<thead>
<tr>
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<td>$1,205</td>
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<td>$1,517</td>
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<table>
<thead>
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<tbody>
<tr>
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<thead>
<tr>
<th>Work Hours/Week at Minimum Wage</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>ZERO-BEDROOM</td>
<td>59</td>
<td>58</td>
</tr>
<tr>
<td>ONE-BEDROOM</td>
<td>64</td>
<td>69</td>
</tr>
<tr>
<td>TWO-BEDROOM</td>
<td>76</td>
<td>77</td>
</tr>
<tr>
<td>THREE-BEDROOM</td>
<td>97</td>
<td>97</td>
</tr>
<tr>
<td>FOUR-BEDROOM</td>
<td>114</td>
<td>106</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Supplemental Security Income (SSI) Payment</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>SSI MONTHLY PAYMENT</td>
<td>$841</td>
<td>$841</td>
</tr>
<tr>
<td>RENT AFFORDABLE TO SSI RECIPIENT</td>
<td>$262</td>
<td>$252</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Income Levels</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>30% OF AREA MEDIAN INCOME (AMI)</td>
<td>$29,929</td>
<td>$29,280</td>
</tr>
<tr>
<td>50% OF AREA MEDIAN INCOME (AMI)</td>
<td>$49,881</td>
<td>$48,800</td>
</tr>
<tr>
<td>MEDIAN RENTER HOUSEHOLD INCOME</td>
<td>$45,776</td>
<td>$56,765</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Rent Affordable at Different Income Levels</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>30% OF AREA MEDIAN INCOME (AMI)</td>
<td>$748</td>
<td>$732</td>
</tr>
<tr>
<td>50% OF AREA MEDIAN INCOME (AMI)</td>
<td>$1,247</td>
<td>$1,220</td>
</tr>
<tr>
<td>MEDIAN RENTER HOUSEHOLD INCOME</td>
<td>$1,144</td>
<td>$1,419</td>
</tr>
</tbody>
</table>
While minimum wage has increased significantly from 2018, the cost of living is still out of range for most working 40-hour weeks at $12 per hour. From the NLICH report, a person working a minimum wage job and living in Kendall County would have to work 84 hours per week to afford a two-bedroom apartment at the fair market rent of $1,303 a month. For Grundy County, a person working minimum wage would have to work 77 hours per week to afford a two-bedroom apartment at the fair market rent of $1,205 a month. It seems impossible for someone to work that many hours a week in order to afford a two-bedroom apartment. Similarly, the state of Illinois is not far from Kendall and Grundy county; a person working a minimum wage job and living in Illinois would have to work 76 hours per week to afford a two-bedroom apartment at the fair market rent of $1,186 a month. As already seen through the theme of this plan and the survey data collected from Kendall and Grundy county’s customers and community members, a living wage job is the key to achieving self-sufficiency and economic stability.

Eric Fisher, Director of We Care of Grundy County, provided some insight on housing disparities in Grundy County:

“There is just not a lot of housing here. I mean you literally have to go knock on the doors of the apartment complex to see if they have anything coming up because they go fast. If they are advertised, they're gone. Even those that received a Section 8 voucher only have 90 days to find a place and they cannot find a place right now. If they are able to find a place rent is continuing to rise in our area. We have been seeing that people are multiple months behind. We have been seeing that with mortgages also. The magic number, for some reason, is three months behind and coming up on the fourth month. People aren’t coming in until they get that five-day notice. By that time, it's almost too late to do anything.”

“I think the main culprit, the main thing that is up against low-income people, is they are struggling with housing. Housing seems to be the thing that sets them so far behind on everything else, it really is the greatest need. Just sustaining everyday life, you need the roof over your head. Food, of course, is also a necessity, but I just feel like having a safe place to stay is number one.”

**Housing Quality**

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Occupied Housing Units</th>
<th>Occupied Housing Units with One or More Substandard Conditions</th>
<th>Occupied Housing Units with One or More Substandard Conditions, Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>61,469</td>
<td>15,174</td>
<td>24.69%</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>20,071</td>
<td>4,403</td>
<td>21.94%</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>41,398</td>
<td>10,771</td>
<td>26.02%</td>
</tr>
<tr>
<td>Illinois</td>
<td>4,884,061</td>
<td>1,469,869</td>
<td>30.10%</td>
</tr>
<tr>
<td>United States</td>
<td>122,354,219</td>
<td>38,476,032</td>
<td>31.45%</td>
</tr>
</tbody>
</table>

Note: This indicator is compared to the state average.

Substandard Housing: Households Lacking Complete Plumbing Facilities

Complete plumbing facilities include: (a) hot and cold running water, (b) a flush toilet, and (c) a bathtub or shower. All three facilities must be located inside the house, apartment, or mobile home, but not necessarily in the same room. Housing units are classified as lacking complete plumbing facilities when any of the three facilities is not present.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Occupied Housing Units</th>
<th>Housing Units Lacking Complete Plumbing Facilities</th>
<th>Housing Units Lacking Complete Plumbing Facilities, Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>61,469</td>
<td>231</td>
<td>0.38%</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>20,071</td>
<td>74</td>
<td>0.37%</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>41,398</td>
<td>157</td>
<td>0.38%</td>
</tr>
<tr>
<td>Illinois</td>
<td>4,884,061</td>
<td>13,785</td>
<td>0.28%</td>
</tr>
<tr>
<td>United States</td>
<td>122,354,219</td>
<td>460,275</td>
<td>0.38%</td>
</tr>
</tbody>
</table>

Substandard Housing: Households Lacking Telephone Service

A telephone must be in working order and service available in the house, apartment, or mobile home that allows the respondent to both make and receive calls. Households that have cell-phones (no land-line) are counted as having telephone service available. Households whose service has been discontinued for nonpayment or other reasons are not counted as having telephone service available.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Housing Units Lacking Telephone Service</th>
<th>Housing Units Lacking Telephone Service</th>
<th>Owner-Occupied Units Lacking Telephone Service</th>
<th>Owner-Occupied Units Lacking Telephone Service</th>
<th>Renter-Occupied Units Lacking Telephone Service</th>
<th>Renter-Occupied Units Lacking Telephone Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>744</td>
<td>1.21%</td>
<td>559</td>
<td>1.14%</td>
<td>185</td>
<td>1.51%</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>111</td>
<td>0.55%</td>
<td>51</td>
<td>0.35%</td>
<td>60</td>
<td>1.10%</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>633</td>
<td>1.53%</td>
<td>508</td>
<td>1.47%</td>
<td>125</td>
<td>1.83%</td>
</tr>
<tr>
<td>Illinois</td>
<td>80,351</td>
<td>1.65%</td>
<td>33,812</td>
<td>1.04%</td>
<td>46,539</td>
<td>2.83%</td>
</tr>
<tr>
<td>United States</td>
<td>1,976,696</td>
<td>1.62%</td>
<td>848,369</td>
<td>1.08%</td>
<td>1,128,327</td>
<td>2.59%</td>
</tr>
</tbody>
</table>
Both Kendall and Grundy counties offer housing that is overall well inhabitable. Both counties offer housing with very few substandard conditions compared to state and national averages. Other factors to consider include the availability of complete plumbing. Complete plumbing includes: running hot and cold water, a flush toilet, and a shower and/or bathtub. Both counties are on par with the national average. Plumbing needs can often carry potentially high costs for both installation and repair.

With stay-at-home mandates, residents realized the importance of available telephone service. These services include land lines and cellular devices. Kendall and Grundy counties are shown to have more than adequate telephone service in both renter-occupied and owner-occupied units. The lack of telephone and mobile service can come at potentially unaffordable costs as does internet access.

Even in 2022, low-income families and individuals may still not have access to internet services due to high expenses. Even those that do have access may not be able to afford high-speed plans. High speed internet access is a growing priority as evidenced by remote learning requirements for students throughout the 2020 and 2021 school years. Those seeking internet services should be offered affordable options as internet evolves from luxury to necessity. High school students from the Oswego, Yorkville, Plano, Sandwich, Newark, Minooka, and Plainfield school districts were eligible to participate in helping people answer a short questionnaire to identify which locations throughout Kendall County might have poor broadband service. The data collected for Kendall County will be utilized to provide supporting evidence when applying for federal grant money to improve broadband infrastructure county-wide. (Foster, 2022).

**Evictions**

**Evictions**

This indicator reports information about formal evictions based on court records from 48 states and the District of Columbia, compiled by the Eviction Lab. The number evictions and eviction filings within the report area is shown in below. The "filing rate" is the ratio of the number of evictions filed in an area over the number of renter-occupied homes in that area. An "eviction rate" is the subset of those homes that received an eviction judgment in which renters were ordered to leave. For the year 2016, the Eviction Lab reports that, of 11,587 homes in the report area, there were 549 eviction filings, for an eviction filing rate of 4.74%. 257 of the eviction filings ended in an eviction, for an eviction rate of 2.22%.

Note: Not all counties have data that has been provided. Indicator data do not include information about "informal evictions", or those that happen outside of the courtroom.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Renter Occupied Households</th>
<th>Eviction Filings</th>
<th>Evictions</th>
<th>Eviction Filing Rate</th>
<th>Eviction Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>11,587</td>
<td>549</td>
<td>257</td>
<td>4.74%</td>
<td>2.22%</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>5,058</td>
<td>174</td>
<td>86</td>
<td>3.44%</td>
<td>1.7%</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>6,529</td>
<td>375</td>
<td>171</td>
<td>5.74%</td>
<td>2.62%</td>
</tr>
<tr>
<td>Illinois</td>
<td>1,671,051</td>
<td>56,948</td>
<td>26,453</td>
<td>3.41%</td>
<td>1.58%</td>
</tr>
<tr>
<td>United States</td>
<td>38,372,860</td>
<td>2,350,042</td>
<td>898,479</td>
<td>6.12%</td>
<td>2.34%</td>
</tr>
</tbody>
</table>

Note: This indicator is compared to the state average.

Data Source: Eviction Lab, 2020; Source geography: Census Tract
Kendall County shows to have a higher eviction rate than the state and national percentage. Grundy County has an eviction rate that is higher than the state but lower than the national percentage.

As a response to the COVID-19 pandemic, Governor J.B. Pritzker announced that an eviction moratorium would be enacted to ensure that families would not be displaced due to other hardships related to stay-at-home mandates. With employment rates rising, renters were offered an opportunity to avoid potential eviction. The moratorium lasted 17 months. Those that struggled to pay rent had temporary relief during the first phase of the pandemic. However, those that remained unable to pay rent throughout the moratorium were faced with possible eviction once the mandate was lifted. Assistance with rent was identified as a top housing need for both Kendall and Grundy counties. Most local agencies, including KGCA, have limited funding to assist clients with rental assistance.

New variants of COVID-19 and raising numbers of both positive cases and hospitalizations pushed Governor Pritzker to extend the moratorium, which was originally set to expire in July and then again on August 31, 2021. The Eviction Moratorium was extended once more and officially ended on October 3, 2021. The ending of the Eviction Moratorium impacted communities throughout Illinois, Grundy county included. The disruption of normal operations to Grundy Area PADS by COVID-19 is ongoing. The impact of the eviction moratorium ending led to an estimated 282 household eviction cases in Grundy County, and an all-time high of over 150 emergency shelter requests this past season. (Grundy Area PADS, n.d.).

In Chicago, 1,278 households were evicted from their homes in October 2021. 42 businesses were also evicted during the same time frame. In suburban Cook County, an additional 566 households were evicted, along with 22 businesses. (Cherone, 2021).

During a press release on May 17, 2021 a second round of rental assistance became available for eligible renters in Illinois. Applications for the second round of rental assistance funding were made available to help Illinois residents who have experienced economic hardship due to the pandemic. The Illinois Rental Payment Program (ILRPP) deployed multiple rounds of funding totaling $1.1 billion dollars to Illinois renters and landlords in an effort to prevent evictions. An additional $400 million in rental assistance was provided by larger municipalities. The state will also set up a separate program to support homeowners with $400 million in mortgage assistance. (Illinois.gov, 2021).
Evictions are likely to continue well into 2023 with the need for rental assistance growing at a rapid pace. KGCA has received many calls from clients needing assistance in paying for rent. Limited funding split between two counties will be able to aid some families, however the impact on the need will likely be unmet. Renters should possibly seek further opportunities for assistance in other areas that may provide some financial relief to make up the deficit.

**Foreclosure Rates**

**Illinois leads the nation in foreclosures in 2022**

Foreclosure rate January 2022-June 2022 by state, ranked.

Foreclosures have been affecting Illinois over the last decade. While data shows improvement from 2010, Illinois is still experiencing foreclosure rates that are the highest in the nation. Illinois has seen over 14,000 foreclosures in the first half of 2022. According to Badali & Hill (2022), “One in every 385 housing units – or about 0.26% of homes – either received a default notice, had an auction scheduled or was repossessed by the bank. Instances of foreclosures in Illinois have nearly tripled from last year and are up 12% from two years ago.” (p.1.)

Illinois has the highest likelihood of foreclosure when compared to neighboring states. In Indiana, the neighboring state with the next highest foreclosure rate, Illinoisans are 63% more likely to be in foreclosure. Compared to Michigan and Iowa, Illinois homeowners are twice as likely to be in foreclosure. Illinois homeowners are nearly 3 times more likely to be in foreclosure than Missouri homeowners. Even when compared to our closest northern neighbors Wisconsin, Illinois homeowners are 3.7 times more likely to be in foreclosure and 6.5 times more likely to be in foreclosure than our southern neighbors in Kentucky. (Badali & Hill, 2022, p.4).
Recently, Kendall County was the fastest growing county in the nation, but because of the downturn of the economy, Kendall County had one of the highest foreclosure rates in Illinois in 2010. Over ten years later and Kendall County is still considered one of the fastest growing counties with some of the highest foreclosure rates in the nation. According to Stebbins, (2022), “a total of 155 housing units were in foreclosure in the first half of 2022, up 330.6% from the first half of last year. The foreclosure rate in Kendall County shows that one in every 290 homes ranks as the 12th highest of the more than 1,700 counties and county equivalents reviewed.” (p.4).

Foreclosure filings in the first two quarters of the year are still lower than 2020 around the same time. However, compared to the same time last year foreclosure filings are up 153%.

KGCA contacted the Kendall County Housing Authority to evaluate the availability and status of low-income housing stock. The agency provided the following information:

The Kendall County Housing Authority does have a waitlist. The waitlist for Housing Choice Vouchers was opened briefly at the end of 2021. In May of 2022 Kendall Housing Authority had 160 Housing Choice Vouchers and 33 Mainstream Vouchers. The waitlist for Housing Choice Vouchers (HCV) are scheduled to open again on October 11, 2022. Applications will be accepted between 10am-4:30pm. The waitlist will close once 300 pre-applications have been completed and successfully submitted.

KGCA also contacted the housing authority for Grundy County. They told KGCA that they have three developments that house only seniors and the disabled. There is currently no wait list for the developments. However, there is a typical wait time of six months after applying for those housing developments. Housing Choice Vouchers and Section 8 programs are handled through LaSalle County Housing Authority.
Homelessness

The Regional Office of Education #24 Mckinney-Vento Liaison Rhonda Redgate-Offhaus provided the following report on our area’s homeless families:

<table>
<thead>
<tr>
<th>RCDT</th>
<th>LEA</th>
<th>End of FY 20 McK-V #</th>
<th>End of FY 21 McK-V #</th>
</tr>
</thead>
<tbody>
<tr>
<td>24032001026</td>
<td>Coal City CUSD 1</td>
<td>16</td>
<td>9</td>
</tr>
<tr>
<td>24032054002</td>
<td>Morris SD 54</td>
<td>15</td>
<td>12</td>
</tr>
<tr>
<td>24032073017</td>
<td>Gardner S Wilmington Twp HSD 73</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>24032074003</td>
<td>South Wilmington CCSD 74</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>24032075002</td>
<td>Braceville SD 75</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>24032101016</td>
<td>Morris CHSD 101</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>24032111016</td>
<td>Minooka CHSD 111</td>
<td>24</td>
<td>7</td>
</tr>
<tr>
<td>24032201004</td>
<td>Minooka CCSD 201</td>
<td>15</td>
<td>10</td>
</tr>
<tr>
<td>24047018016</td>
<td>Newark CHSD 18</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>24047066004</td>
<td>Newark CCSD 66</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>24047088026</td>
<td>Plano CUSD 88</td>
<td>30</td>
<td>21</td>
</tr>
<tr>
<td>24047090004</td>
<td>Lisbon CCSD 90</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>24047115026</td>
<td>Yorkville CUSD 115</td>
<td>51</td>
<td>31</td>
</tr>
<tr>
<td>24047308026</td>
<td>CUSD 308</td>
<td>133</td>
<td>122</td>
</tr>
<tr>
<td>24032002C02</td>
<td>Mazon-Verona-Kinsman ESD 2C</td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td>24032024C04</td>
<td>Nettle Creek CCSD 24C</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>24032060C04</td>
<td>Saratoga CCSD 60C</td>
<td>17</td>
<td>13</td>
</tr>
<tr>
<td>24032072C04</td>
<td>Gardner CCSD 72C</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

|     |     |     |     |
|     |     |     | 325 |
|     |     |     | 249 |

In the above chart, FY20 and FY21 show a decrease due to the usual reasons of moving, establishing a household, graduation etc... The biggest reason for the decrease is a perceived need due to COVID. With technology and food provided to all, if the families were doubled up, they didn't think as much of themselves being homeless. Numbers went up as students returned to in-person learning. During 2020, 325 homeless children were identified in Kendall and Grundy County schools. During 2021, 249 were identified. As stated above, numbers are once again on the rise as schools have fully returned to in person learning. During the 2022, 331 students were identified as experiencing homelessness. This number is not only up from 2020 but is also up roughly 25% from the 2021 school year.
The chart above shows the number of homeless families throughout the years in our service area. As Ms. Redgate-Offhaus stated above, 2021 shows a decline in the number of homeless families enrolled in school for that year. There were also moratoriums put in place on evictions and foreclosures throughout the 2021 school year. At the time of this writing, Community Action Services has seen an influx of homeless persons coming in looking for shelter resources since the pandemic began. According to Community Services Single Tracking and Reporting System (STARS), in 2019 there were 273 case management services received to assist homeless individuals. For 2021 there have been 345 case management services received to assist homeless individuals. That is a 78% increase since before the pandemic. Community Action Services is anticipating a greater increase once the eviction and foreclosure filings become routine within the courts due to the suspension of the housing moratoriums in October 2021. The above information was presented at a Community Action Services Advisory Board meeting. The Community Action Advisory Board (CAAB) members advised that the families with children that are being reported to the Regional Office of Education as homeless must become a priority for services. Discussion on increased case management and caseworkers being directed towards those families occurred so that they have someone to assist them with navigating all possible services and opportunities. (Kendall County Health Department Community Action Advisory Board, 2021. pg. 4).

Kendall and Grundy Counties are covered by the United Way of Will County Continuum of Care, formerly led by the Will County Center for Community Concerns. Continuums of Care are the local planning bodies that organize and coordinate housing and related services funding for families and individuals experiencing homelessness. Illinois currently has 19 Continuums of Care or COCs. The map below shows the service locations of those 19 COCs.
Emergency Solutions Grant Special COVID Grant (ESG-CV) funds were administered to Kendall and Grundy Counties through the Will County Continuum of Care. These funds allowed KCGA to administer emergency shelter and homeless prevention.

In partnership with Kendall County PADS, during the COVID-19 lockdowns, KGCA located all of the PADS guests that were displaced due to the closing of the PADS shelter and gave them temporary shelter at a local hotel with the funding from their Community Service Block Grant. The goal was to help each PADS guests find permanent housing.

In all, about 13 families including 5 kids stayed at local hotels. During their stay, additional assistance was provided with case management, gas cards, food vouchers, and supportive services. Utilization of local partnerships including
the Continuum of Care and the Kendall County Housing Authority allowed KGCA to better serve those in hotels. By the time Illinois went into Phase 3 of the Stay-At-Home order, 12 of those families being served were no longer staying hotels. Those 12 families were able to obtain permanent housing. Some families were able to get jobs and save money for their own place while others were able to participate in the Move-On-Up project and use a housing voucher provided by the Kendall Housing Authority. These families received assistance with security deposits and relocation/stabilization services to ensure easier transition into their new homes.

KGCA assisted 17 families that were living in a local campground find permanent housing. Due to our partnership with the Kendall Housing Authority, the 17 families that were living in the local campground received Mainstream Vouchers for housing in Kendall County as did other families experiencing homelessness in the community. Historically, Kendall County Housing Authority has had a long wait list for anyone in the community looking to receive housing vouchers. Having these vouchers become available during the Covid-19 epidemic was an amazing phenomenon. Out of the 17 families from the campground, 16 have found permanent housing. KGCA staff has worked diligently, with other partnerships, to pursue the goal of helping those in need find housing and maintain stability.

The Kendall County PADS board voted to shut down during the 2021/2022 winter season. Community Action Services has taken on the responsibility to provide emergency shelter and case management for those experiencing homelessness in our community. For the 2022 season, 9 families were residing in hotels. Four of those families have obtained permanent housing. The Kendall County Housing Authority opened their waitlist again in February 2022. Our goal was to assist these families and any other families that were in shelter in hotels to apply for a spot on the waitlist. At this time, Kendall County PADS has officially disbanded. KGCA will continue to provide emergency shelter and case management for those experiencing homelessness for the 2022-2023 season.

Grundy Area PADS reported that their Rising Phoenix rapid rehousing program, served 16 clients, 14 adults and two children. They were only able to serve 6 to 7 clients at a time. Of those clients 9 were male, 7 were females. Overall, 5 had criminal a history, 3 were fleeing domestic violence, 9 had disabilities, 9 were diagnosed with a mental illness, 2 had chronic health conditions, 2 were developmentally disabled, and 3 had substance abuse or use disorders. Some clients are still receiving services, while others have graduated on. For those that have graduated, the average length of stay was 360 days. Those that are remaining are currently at 209 days.

Grundy Area PADS also offers Emergency Shelter. Grundy Area PADS provides emergency shelter during the coldest months of the year from mid-October to mid-April. (Grundy Area PADS, n.d.). Last season Grundy Area PADS had 49 clients total for the season, 46 adults and 3 kids. 27 were male 21 were female, and 1 identified as transgender. 11 those clients had a criminal history and 1 was a veteran. More than 50% of those clients also received no additional benefits like SNAP or TANF despite many being eligible for additional benefits.

**Home Energy Efficiency**

Clients are more focused than ever on making their homes more energy efficient. This need came out overwhelmingly on top with 40% of the customers surveyed expressing this as a most needed service. Growing interest in energy efficiency is likely due to the continually growing costs of home energy service delivery. According to the U.S. Bureau of Labor Statistics, (2022), “Chicago area households paid an average of 18.4 cents per kilowatt-hour (kWh) of electricity in June 2022, more than the 14.3 cents per kilowatt-hour paid in June 2021. In June, the average cost of utility (piped) gas was $1.772 per therm, up from its average price of $1.111 cents per therm a year earlier.” (p.1). The Charts below show the increase in service delivery for both piped gas and electricity over the past four years. Chicagoland area electricity prices have increased exponentially from 2021 and are higher than the national average.
Expansion of Weatherization programs in 2022 are focused specifically on addressing this need by utilizing federal and state dollars to make energy efficient and healthy homes. Safety is also a key component of these programs. Assessors thoroughly ensure that sealing a home will not impact the home negatively. If a home has a mold problem, the mold needs to be removed before any windows can be sealed or insulation is added.

Equally important, especially for seniors, is ensuring that heating and cooling systems are working properly. Climate change continues to bring more frequent, hotter and longer heat waves. These heat waves can have serious health risks for seniors if they do not have proper cooling in their homes. However, access to air conditioning is limited in some parts of the county, especially in the more rural pockets.

According to Macaraeg, (2022), “In Chicago, building owners must ensure that occupants don’t freeze at home in winter, but city ordinances don’t similarly protect residents from unsafe temperatures during the summer. The City Council amended Chicago’s heating and cooling ordinance in June after three deaths in an overheated building, but even the alderman who sponsored that effort acknowledged that the changes were only a first step.” (p.8).

Chicago does offer cooling centers operated by the Department of Family and Support Services. Data obtained from the agency through a public records request shows that during heat advisories in 2020 and 2021, no more than 10 people were recorded as using the cooling centers in any given hour. Research indicates that cooling centers alone aren’t an effective way to save lives, noting that data from multiple cities show few people use them. (An exception, he said, was Seattle.) Possible obstacles include transportation, work, lack of mobility and discomfort in cooling center settings, sometimes located in police stations. Family and Support Services also runs six senior centers and 15 satellite locations where seniors can go during the day. (Macareg, 2022).
While the inclusion of this information is anecdotal, the same standards should be applied to all regions of Illinois especially those areas where services may be out of reach. In the suburbs, residents have limited resources when it comes to cooling centers, especially in Grundy County. Kendall County has made great strides over the last few years and currently offers 17 cooling centers, including the Kendall County Health Department and both Oswego Public Libraries. The availability of cooling centers is less equitable in Grundy County. Grundy County offers very few cooling centers, one of which being the Grundy County Administration building. Grundy Transit Service (GTS) does offer free transportation to the administration building.

The Low Income Home Energy Assistance Program accepts applications between September and May but does not typically provide assistance during the hotter months. In the program’s inception, the intention was to assist low-income individuals during the colder months. Heat is undoubtedly a necessity. With current trends and temperatures rising earlier each year, the recognition of cooling as a necessity is imperative. Summer cooling programs have been offered in the past, but funding is only supplemental and offers the most assistance to those that already have cooling systems installed in their homes. Home weatherization programs offer the greatest opportunity for low-income individuals to have cooling units installed in their homes at no expense to homeowners.

Matt Fritz, Coal City Village Administrator, shared some insights concerning energy efficiency in Grundy County:

“Our have found people that need assistance with making their homes more energy efficient. Here in Coal City we are hearing it a lot from the aging population, attempting to age in place within our populace. They don’t want to go anywhere. I think that’s one of the lead causes for the increased interest in having healthy homes and energy efficiency.”

Coal City in Grundy County has received funding through the Community Development Block Grant (CDBG) and the Department of Commerce and Economic Opportunities (DCEO), with the aid of its grant administrators at the North Central Illinois Council of Governments (NCICG) successfully helped low income and disabled persons to renovate their homes utilizing a program administered by DCEO which federal rehabilitation resources were utilized to renovate 10 homes within a specified housing rehabilitation program area. The design of the DCEO program ensured this federal investment assisted disadvantaged communities within the State of Illinois. One of the factors separating this CDBG grant from Illinois Home Weatherization Assistance Programming (IHWAP) is the ability to seek out and identify individual homeowners up to 80% of the local area median income, meaning that the city, village, or township identifies an area to restore or renovate rather than homeowners individually seeking assistance. To stretch dollars even further programs like this can assist in supplementing CDBG dollars in order to maximize home efficiency. Things that are not covered by IHWAP like window replacements can be funded by CDBG dollars. So far 10 homes have been completed. A second group of homes is still awaiting approval for funding. When working on these homes the main things to be addressed are first floor bathrooms, the entrance to the homes, replacing exterior siding and roofing.
Employment

The Customer Needs Assessment addressed the current conditions concerning employment in both counties. The survey question, which focused on employment issues, was given to KGCA’s reporting area customers and is reported below:

Which employment needs could you use help with?

Getting training for the job that I want  
Getting an education for the job that I want  
Finding a permanent full-time job that will support me or my family  
Knowing what jobs are available  
Learning how to interview for a job

Learning how to write a resume  
Learning how to fill out job applications  
Learning computer skills to apply for jobs  
Obtaining appropriate clothing for my job  
Obtaining equipment (e.g. tools) for my job

Top four responses were:

- 30%: Finding a permanent full-time job that will support me or my family
- 22%: Learning how to write a resume
- 15%: Knowing what jobs are available
- 11%: Learning how to interview for a job

Also noted were the following:

7% of KGCA Grundy customers reported getting an education for the job I want as an employment need. Also at 7% was learning computer skills to apply for jobs and getting training for the job I want. 4% sited obtaining appropriate clothing for my job, and 4% was learning how to fill out job applications.
Top four responses were:
- 30%: Getting an education for the job that I want
- 15%: Finding a permanent full-time job that will support me or my family
- 10%: Learning how to write a resume
- 10%: Obtaining appropriate clothing for my job
- 10%: Getting training for the job that I want

Also noted were the following:

5% of KGCA Kendall customers reported that knowing what jobs are available was most needed. 5% was learning how to interview for a job. 5% was learning computer skills to apply for jobs. 5% was obtaining appropriate clothing and/or equipment (e.g. tools) for my job. 5% was learning how to fill out job applications.

KGCA staff also asked questions community wide in our Community Wide Needs Assessment regarding the employment climate in our service area. Survey participants included board members, community partners, members of the community, and anyone who may not have an opportunity to visit our agency but still resides in the reporting area. Two of the questions concerning employment issues in the community is shown below.

Are there full-time living wage employment ($15 per hour or higher) opportunities available in your community?

Possible answers include:
- There are insufficient number of opportunities
- There are sufficient number of opportunities
- There are excessive number of opportunities
- There are not any opportunities
- Unsure
The five responses were:

- **43%**: There are a sufficient number of opportunities
- **24%**: There are an insufficient number of opportunities
- **20%**: Unsure
- **13%**: There are an excessive amount of opportunities
- **0%**: There are not any opportunities

Why do you believe people have problems getting or keeping a full-time living wage job? (Select all that apply)

- Jobs are not available
- Language Barriers
- Lack of Education
- Physical or Mental Disabilities
- Need better technical job skills
- Transportation
- Need better communication, people/customer job skills
- Health issues
- Substance abuse issues
- Need Child Care
- Other
Top four responses were:

- 17%: Need Child Care
- 13%: Transportation
- 11%: Substance Abuse Issues
- 10%: Need better technical job skills and Need better communication, people/customer job skills

Also noted were the following:

9% of the community members surveyed felt that jobs are not available. 8% reported health issues. 6% of community members responded with lack of education and language barriers. 5% reported physical or mental disabilities. Also, 6% reported “other”. One participant that marked “other” stated, “Unemployment benefits offer a livable income for the time being.”

Looking at this data, KGCA customers want to work and need to know what and where living wage jobs are available. If they already are working, they either want to work more hours or have an increase in pay. One of the barriers customers have expressed is that too many people are competing for the good-paying remote jobs where transportation and childcare would be less of a burden.

One community member wrote:

“I think that people are starting to find more remote jobs. The job market is changing. People are starting to find jobs with less experience or a degree. Who wouldn’t want to work from home? The little things like commuting and finding good childcare are one less thing to worry about.”

Unemployment

In examination of the unemployment rates by county, Grundy County is at 4.3%. This is above the national and state rates. Kendall County’s unemployment rate is 3.7%. This is slightly lower than the national rates and well below the state rate.
Unemployment Change

Unemployment change within the report area from June 2021 to June 2022 is shown in the chart below. According to the U.S. Department of Labor, unemployment for this one year period fell from 6.2% to 3.9%.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Unemployment June 2021</th>
<th>Unemployment June 2022</th>
<th>Unemployment Rate June 2021</th>
<th>Unemployment Rate June 2022</th>
<th>Rate Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>5,965</td>
<td>3,826</td>
<td>6.2%</td>
<td>3.9%</td>
<td>-2.4%</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>1,701</td>
<td>1,127</td>
<td>6.7%</td>
<td>4.3%</td>
<td>-2.4%</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>4,264</td>
<td>2,699</td>
<td>6.1%</td>
<td>3.7%</td>
<td>-2.3%</td>
</tr>
<tr>
<td>Illinois</td>
<td>461,265</td>
<td>307,736</td>
<td>7.2%</td>
<td>4.7%</td>
<td>-2.5%</td>
</tr>
<tr>
<td>United States</td>
<td>10,015,832</td>
<td>6,402,715</td>
<td>6.1%</td>
<td>3.9%</td>
<td>-2.3%</td>
</tr>
</tbody>
</table>

Note: This indicator is compared to the state average.

Looking at the data above, the five-year unemployment rate for the area has lowered substantially from 2020 where the unemployment rate was up to 10.9%. Unemployment rates are now slightly lower than pre-pandemic numbers. When looking at the unemployment rate change from June 2020 to June 2022 the rate of unemployment dropped by a whopping 7%. It is interesting to see the rise in unemployment rates and how quickly they tapered off. While 2021 numbers did not quite fall back down to 2019 numbers, the quick economic upturn is a sign of healthy recovery. In the past recessions have happened slowly. Illinois has historically lagged when it comes to feeling the impacts of a recession. With the Great Recession, Illinois’ employment did not start to decline until more than five months in. (Powell, 2020, p.5). During the Covid-19 Pandemic, the impact was felt immediately due to the nature of the virus.

At the end of April 2020, the national unemployment rate rose to 14.7 percent, the highest since the Great Depression. Non-farm payroll dropped nationally by 20.5 million during the same period. As of the week ending on May 2, 2020, over 696,000 workers in Illinois had filed for and were receiving unemployment benefits.

At the height of the pandemic, it seemed as though everywhere you looked establishments were displaying “Now Hiring” signs. Business owners expressed having a hard time attracting applicants. Business owners’ explanation for why they were having a difficult time getting applicants for jobs is due to enhanced unemployment benefits, a response to combat the pandemic shutdowns. These enhanced benefits may have been keeping people at home rather than applying for jobs. At the time these benefits paid more than what those would make in the service industry. Illinois’ extra $300 in enhanced unemployment benefits ended in September 2021. (Robinson, 2021).
The above chart shows labor force statistics for Grundy County over the last 13 years. Unemployment rates have dropped significantly across Illinois. Grundy County has shown an improvement of over 4% between 2020 and 2022.

The downturn in unemployment is likely a culmination of contributing factors. Workers that were laid off during the start of the pandemic have now had the opportunity to re-enter the workplace after stay-at-home mandates have been lifted and companies figured out how to safely return employees to normal operations. Something to also consider is how remote work has impacted the ability for those seeking employment to find new work.
Remote Work

Working at home was mostly considered an occasional perk before 2020. COVID-19 brought about new challenges, many companies and organizations had no choice but to work remotely. Technology has revolutionized the way we interact with the world around us, and no exception can be found in the workplace. The impact of COVID-19 assisted in cementing the viability of remote operations for companies and organizations. During the pandemic, over half of the American population was working remotely at least in some part. 41% of those workers are fully remote up from 17% of U.S. employees that work from home 5 days or more per week before the pandemic. (Anderson, 2022, p.3)

COVID-19 showed employers the importance of paid leave policies, essential workers, and support. Those listed factors ensure workers are protected and has been a key focus during the start of the pandemic. In a report published by the Illinois Future Work Task Force, it was found that in 2019, fewer than 4 percent of high-paying jobs offered remote work opportunities; that number has increased during the pandemic and 25 percent of high-paying jobs are expected to offer remote work opportunities by the end of 2022. Remote work also changed travel patterns of Illinois households, public transportation was largely empty, and the gas tax revenue was so low that public works projects were paused. (Illinois Future of Work Task Force, 2022).

The above map illustrates the states offering remote jobs. Between 2020 and 2021, the number of remote job postings increased 12%. (Pelta, 2022, p.5). Illinois ranks high compared to the rest of the nation. Although there is universal agreement that companies are making long-term plans to continue embracing remote work in larger numbers than before the pandemic, there is still debate around the full extent to which workplaces will remain remote. Specifically, will firms mostly utilize a fully remote model, or will they adopt a hybrid approach that requires workers to come into the office a few days a week?

Hybrid style approaches offer a compromise that would only require employees to return to the office a few days per week, with the other workdays conducted remotely. On a smaller scale, organizations will likely continue to utilize platforms such as Zoom to optimize meeting attendance in a number of ways that are viable to both the employer and employee. A study conducted by Upwork, suggests that fully remote workplaces will continue to comprise a larger share of businesses that have adopted remote work models. Results of the study predict that fully remote workers will represent 27.7% of the workforce, compared to 20.4% who will be partially remote. Both numbers have increased from when they last ran this survey in November 2020. (Ozimek, 2021, p.3).
Kendall and Grundy customers identified lack of living wage jobs and lack of transportation as a top priority for their communities. The emergence of remote work has exploded since the beginning of the pandemic. Those seeking employment now have more opportunities when applying for jobs. Those that are lacking transportation or need flexibility due to child care have the opportunity to work from home. Expenses related to commuting are non-existent and those seeking employment are no longer limited to their immediate communities for employment opportunities. Ultimately, remote work has the propensity to address top needs identified for Kendall and Grundy County customers related to both employment and transportation.

**Income**

**Income Levels**

Two common measures of income are Median Household Income and Per Capita Income based on American Community Survey 5 year estimates. Both measures are shown for the report area below.

<table>
<thead>
<tr>
<th>Report Location</th>
<th>Median Household Income</th>
<th>Per Capita Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grundy County, IL</td>
<td>$75,767</td>
<td>$35,483</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>$96,854</td>
<td>$36,504</td>
</tr>
<tr>
<td>Illinois</td>
<td>$68,428</td>
<td>$37,306</td>
</tr>
<tr>
<td>United States</td>
<td>$64,994</td>
<td>$35,384</td>
</tr>
</tbody>
</table>

Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: County  

**Income - Median Household Income**

This indicator reports median household income based on the latest 5-year American Community Survey estimates. This includes the income of the householder and all other individuals 15 years old and over in the household, whether they are related to the householder or not. Because many households consist of only one person, average household income is usually less than average family income.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Households</th>
<th>Average Household Income</th>
<th>Median Household Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>61,469</td>
<td>$103,965</td>
<td>No data</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>20,071</td>
<td>$90,357</td>
<td>$75,767</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>41,398</td>
<td>$110,564</td>
<td>$96,854</td>
</tr>
<tr>
<td>Illinois</td>
<td>4,884,061</td>
<td>$95,115</td>
<td>$68,428</td>
</tr>
<tr>
<td>United States</td>
<td>122,354,219</td>
<td>$91,547</td>
<td>$64,994</td>
</tr>
</tbody>
</table>

Note: This indicator is compared to the state average.  
Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: Tract  

There is not a remarkable difference in the average wage per job between the two counties. Kendall’s average salary per job is $39,071 annually while Grundy’s salary is $49,596 for 2021. (IDES, 2021). It should be noted that this number reflects jobs offered in their respective county, whereas the average median income for Kendall residents is $110,564 and Grundy County’s median income for residents is $90,357.

Kendall County is among the highest median income counties in the state of Illinois, yet the wages available in Kendall County are less than half of the median income. KGCA and data collected by the U.S. Census Bureau suggest that those living in Kendall County and are the highest wage earners may not work in Kendall County, but rather in surrounding counties. Kendall County also is home to over a dozen retired professional sports players, politicians, farmers, and philanthropists, as well as some newly retired people who are collecting pensions well over $100,000 per year.
The Customer Needs Assessment addressed the current conditions concerning education in both counties. The survey question focusing on education given to KGCA’s reporting area customers is below, as well as the results:

Which Education needs could you or a family member use help with: (Please check all that you feel apply)

- Obtaining a high school diploma or GED/HSED
- Obtaining a two-year college degree
- Obtaining a four-year college or university degree
- Choosing a career
- Choosing a technical school program
- Learning how to use a computer
- Learning or improving communications or language skills
- Learning English (as a second language)
- Getting financial assistance to complete my education
- Completing college aid forms (including FAFSA)

Top four responses were:
- **26%**: Choosing a career
- **18%**: Obtaining a two-year college degree
- **16%**: Getting financial assistance to complete my education
- **13%**: Choosing a technical program

10% Obtaining a four-year college or university degree. 8% of Grundy County customers surveyed felt obtaining a high school GED/HSED was an educational need they could use. 5% completing college aid forms (including FAFSA). 3% reported learning English as a second language. 0% responded with learning how to use a computer and Learning or improving communications or language skills.
Top four responses were:

- **31%**: Obtaining a four-year college or university degree
- **23%**: Obtaining a two-year college degree
- **19%**: Choosing a career
- **12%**: Getting financial assistance to complete my education

Also noted were the following:

7% of Kendall County customers reported that choosing a technical program is an education need for the area. 4% reported obtaining a high school GED/HSED and completing college aid forms (including FAFSA forms). 0% reported learning or improving communication or language skills, learning English as a second language, and learning how to use a computer

KGCA found that the responses in regard to educational needs in the community have a direct correlation to the current climate of employment in Illinois. Responses from both counties were mostly centered around continuing education, likely to pursue higher-wage salaries. Getting financial assistance to complete education was high for both counties, as was choosing a career. One of the top concerns reported at the beginning of this needs assessment was the lack of living wage jobs in the reporting area. The emphasis on needing jobs to alleviate themselves from poverty was a prevalent theme throughout the needs assessment. Also, looking at statistics regarding income, average salaries available within both counties are well below national averages. The lack of living wage jobs in both communities creates a barrier for low-income individuals. Those looking to exceed those barriers are likely seeking higher education on the basis that most living wage jobs require a college education. However, the pursuit of higher education creates a second barrier, finances. Those looking to earn more will likely have to spend more up front.
A college education is becoming much more of a requirement than it was in 1970. In 1973, 72% of jobs available for workers in the United States required only a high school diploma or less. In 2010, that number dropped to 41%. Future projections show it dropping further to 36%. (Carnevale, Smith, & Strohl, 2018).

The numbers and graph below show the educational attainment for both counties.

### Attainment - Overview

Educational Attainment shows the distribution of the highest level of education achieved in the report area, and helps schools and businesses to understand the needs of adults, whether it be workforce training or the ability to develop science, technology, engineering, and mathematics opportunities. Educational attainment is calculated for persons over 25, and is an estimated average for the period from 2016 to 2020. For the selected area, 21.2% have at least a college bachelor’s degree, while 25.8% stopped their formal educational attainment after high school.
Both Kendall and Grundy County display solid high school graduation rates especially in Grundy County which is above both the state and national average. Kendall County and Grundy County differ greatly when it comes to higher education. Kendall County shows that 23.1% population have at least a bachelor’s degree and 12.8% with at least a master’s degree. Grundy’s population with at least a bachelor’s degree is low compared to Kendall, the state, and the nation (16.7%). However, recent estimates show there has been gradual improvement in the area’s higher education rate through the years. This is in line with both the general increase in education nationwide and Grundy County’s increasing participation in the more urban Chicago-area economy. However, Grundy’s educational profile still largely fits that of a rural area, but changes can be anticipated as the growth of the Chicago market continues to make the population centers of the county more accessible to the expanding job centers in the region.

The below graph shows the estimate of educational attainment for population 18 years old and over whose highest degree was a bachelor’s, master’s, or professional or doctorate degree. This graph is informed by data collected from the U.S. Census Bureau.

![Graph showing educational attainment in Kendall and Grundy County](https://fred.stlouisfed.org/series/HC01ESTVC1717093#)

Numbers indicate that the population over 18 who hold a bachelor’s degree or higher has increased significantly since 2011. Both counties show exponential growth. Grundy County continues to rise into 2020, while Kendall County tapers off slightly. While higher education is showing an upward trend in Grundy County, the overall population that holds a bachelor’s degree or higher is still lower than Kendall County. However, the purpose of this graph is to illustrate the upward trend in obtaining higher education. KGCA estimates that numbers will show a continued rise in both counties on the next U.S. Census.

Grundy’s educational profile indicates that there is a significant demand for more educational opportunities in the region. This is especially apparent considering the unusually high number of people in Grundy County with either some college and no degree or an associate degree. Data collected by KGCA further illustrates this demand with 16% of customers identifying a need for assistance with college tuition. This could also indicate that other barriers might be playing a role in the completion of a four-year degree. Factors to be considered include high tuition costs, current climate of employment requirements within the community and the overall proximity to 4-year institutions. Of those jobs that do require degrees beyond high school, many are well served by a two-year degree, including advanced manufacturing, nursing, and energy. Grundy County lies within Illinois Community College District 525, serviced by Joliet Junior College, which maintains a physical presence at their Morris Education Center in Grundy County. However, the lack of proximity of a public four-year institution likely creates a barrier to continuing education without a significant commitment of either finances or time. Currently, the nearest 4-year institution
options include private universities in Joliet and Romeoville in Will County. The nearest public universities are Governor’s State in University Park and Northern Illinois University in DeKalb, both of which are in excess of an hour’s drive from most of the county. Kendall County is less than an hour away from Northern Illinois University, Aurora University, and North Central University.

The above table shows the current undergraduate tuition rates for Northern Illinois University, one of the closest 4-year institutions to both Kendall and Grundy counties. The average cost of a year for a full-time student is $9,790.12. These numbers are also representative of an online student, so room and board, and transportation are not considerations in this cost. Those seeking a Graduate level degree are looking anywhere between $445-$903.60 per credit hour, depending on the field of study. This means that those wanting to pursue a graduate level degree attending at full-time (12hrs or more), would be looking at a total of $21,684 on the high-end per semester. (Northern Illinois University, 2022).

When considering the average salaries of available employment in Kendall and Grundy counties the cost of education weighs heavily. Kendall’s average salary per job is $39,071 annually while Grundy’s salary is $49,596 for 2021. A year of online classes at $9,790.12 would take up a large portion of those salaries. A graduate level degree costs almost half of the median salaries available in both counties. Tuition rates are a large barrier for those looking to work toward a higher education. Of course, financial aid is available and provides an opportunity for students to better afford an education. However, once a degree is completed and those loans come due, individuals are entering the workforce already in significant debt. With no guarantee of a higher paying job, a risk and reward scenario is created. Those looking to earn more have to consider their options and decide on a career that best suits them. In some cases, college may not be a direct pipeline to a higher earning position. This is likely why assistance in choosing a career was represented among the top needs identified by KGCA customers in both counties. Assistance with choosing a career was identified as Grundy County’s top education need. To further understand this, taking a deeper look at the community reveals factors that likely come in to play when individuals are deciding to further their education.

Many of the jobs available in Grundy County do not require an advanced education. The recent history of the area has seen burgeoning employment opportunities in the trades, manufacturing and production, and the chemical and utility sectors. This type of employment is typically well-compensated. Each of these industries has traditionally required formal education through high school, in addition to highly specialized on-the-job training with minimal need for formal higher education. Without doubt, Grundy County employs a very skilled workforce within their particular fields, though this fact is difficult to quantify through educational attainment figures.
Health

The Customer Needs Assessment addressed the current conditions concerning health care in both counties. The survey question focusing on health care issues given to KGCA’s reporting area customers is below, as well as the results:

Which health needs could you or a family member use help with: (Please check all that you feel apply)

- Having affordable health insurance
- Having affordable dental insurance
- Having health care available in my community
- Having dental care available in my community
- Getting my health insurance questions answered
- Finding a doctor willing to accept Medicaid (Title XIX)
- Finding a dentist willing to accept Medicaid (Title XIX)
- Getting financial assistance for regular medical checkups
- Getting financial assistance for regular dental checkups
- Getting financial assistance for medicine and prescriptions
- Getting financial assistance for long-term care
- Getting good medical care before my baby is born
- Getting regular check-ups, developmental screens, or physicals for my children
- Getting immunizations for my children
- Getting treatment for a drug or alcohol problem
- Getting treatment and services for mental health
- Dealing with stress, depression, or anxiety
- Dealing with problems related to physical, emotional, or sexual abuse
- Obtaining family planning or birth control education and assistance

Top four responses were:

17%: Dealing with stress, depression or anxiety
13%: Having affordable health insurance
12%: Getting treatment for mental health
10%: Having affordable dental insurance
Also noted were the following:

8% of Grundy County customers reported finding a doctor willing to accept Medicaid (Title XIX) as a health need that they need help with.  6% reported having dental care available in my community and getting treatment for a drug or alcohol problem. 5% reported getting financial assistance for medicine and prescriptions and finding a dentist willing to accept Medicaid (Title XIX). 4% reported having healthcare available in my community. 3% reported dealing with problems related to physical, emotional, or sexual abuse. 2% reported getting my health insurance questions answered, getting good medical care before my baby is born, getting financial assistance for regular medical checkups, getting financial assistance for long-term healthcare, and getting regular checkups, developmental screens, or physicals for my children. 1% reported getting immunizations for my children, getting financial assistance with dental checkups and obtaining family planning or birth control education assistance.

Top four responses were:
15%: Getting treatment and services for mental health
13%: Dealing with stress, depression, anxiety
12%: Having affordable dental insurance
9%: Having affordable health insurance

9% of Kendall County customers believe that finding a doctor willing to accept Medicaid (Title XIX) is a health need for the area, while 7% expressed having dental care available in their community. 6% reported finding a dentist willing to accept Medicaid (Title XIX). 5% said that getting treatment for a drug or alcohol problem, getting financial assistance for medicine and prescriptions, and getting financial assistance for regular medical checkups are needs in the community. 4% reported having affordable health care in my community. 2% reported dealing with problems related to physical, emotional, or sexual abuse, getting immunizations for my children, obtaining family planning or birth control education and assistance, getting my health insurance questions answered, and dealing with problems related to physical, emotional, or sexual abuse. 1% reported getting financial assistance for long term
health care and getting regular checkups, developmental screens, or physicals for my children. 0% reported on getting good medical care before my baby is born.

Lisa Holch, Director of Mental Health Services at the Kendall County Health Department, reflected on why dealing with stress, depression, and anxiety and getting treatment and service for mental health were chosen as the top responses in both counties:

“Access to mental health services has always been a barrier. Not a lot of individuals can afford private practice, especially those that are on Medicaid. Up until 2018, the Kendall County Health Department was not accepting Medicaid. So, access was very limited to those that were seeking mental health treatment. They had to either self-pay or have private insurance. Many agencies do not accept Medicaid because Medicaid comes with a lot of paperwork requirements, and a lot of reporting requirements. And that’s okay. But the benefit of doing community mental health work is that we know we are reaching those people who are underserved.”

**Mental Health**

Mental health resources continue to become available in new and more accessible ways to deal with the many different stressors/traumas caused by the pandemic, especially its impact over an extended time period. There was an expectation that depression and suicide rates would increase due to the pandemic. In July 2020, 53% of adults’ mental health were negatively impacted compared to 32% in March of 2020 (Kaiser Family Foundation Tracking Poll, 2020)

The below chart shows the percentage of adults age 18 and older who report 14 or more days during a 30-day period during which their mental health was considered not good. This data was collected before the impacts of COVID-19. 14% of the Grundy County’s population reported poor mental health. 12% of Kendall County’s population also reported poor mental health. While new data needs to be collected to determine the ongoing impacts of COVID-19, the desire for mental health services can be seen in our Customer Needs Assessments with mental health services being observed among the top priority of needs for both counties.

**Poor Mental Health**

This indicator reports the percentage of adults age 18 and older who report 14 or more days during the past 30 days during which their mental health was considered not good. Data were from the 2019 Behavioral Risk Factor Surveillance System (BRFSS) annual survey.

Within the report area, there were 12.6% of adults 18 and older who reported poor mental health in the past month of the total population.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population (2019)</th>
<th>Adults with Poor Mental Health (Crude)</th>
<th>Adults with Poor Mental Health (Age-Adjusted)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>180,044</td>
<td>12.6%</td>
<td>12.5%</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>51,054</td>
<td>13.50%</td>
<td>13.70%</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>128,990</td>
<td>12.20%</td>
<td>12.00%</td>
</tr>
<tr>
<td>Illinois</td>
<td>12,671,821</td>
<td>13.13%</td>
<td>13.37%</td>
</tr>
<tr>
<td>United States</td>
<td>328,239,523</td>
<td>13.60%</td>
<td>13.90%</td>
</tr>
</tbody>
</table>

Note: This indicator is compared to the state average.

The Behavioral Health Unit of the Kendall County Health Department has requested additional 708 funding from the Association of Mental Health Authorities in anticipation of an increase in need due to the COVID 19 pandemic. According to the Kendall County Health Department’s 2020 annual report, from March 2020 to September 2020, 2,689 individual and family counseling sessions were completed, and 91 new clients were added. The Kendall County Health Department has also increased the number of offerings of their Mental Health First Aid courses through the last few years. The Kendall County Health Department’s 2021 annual report states that Mental Health Services continue to utilize telehealth (video) and telephonic (telephone) services, in addition to being able to resume seeing established and new clients in the building for services.

During the height of the pandemic, the Grundy County Health Department’s Behavioral Health unit transitioned almost exclusively to the use of tele-health for the delivery of individual and group counseling sessions. The Grundy County Health Department continues to offer a tele-health option going forward, especially for those most vulnerable or who prefer it. At this time in person services are once again available as well. They are very close to securing additional 19 psychiatric hours since they are the only Medicaid mental health provider for complex diagnosis in Grundy County. One of the key findings in the Morris Hospital’s 2019 Community Needs Assessment concerned mental health. Between 18.7% and 25.9% adults in the Morris Hospital service area rated their mental health as “not good” in the past month. The Behavioral Health Alliance of Grundy County was formed in 2009 with the goals of helping organize the community to provide education and training in behavioral health. According to their website, there are no inpatient beds for mental illness or substance abuse and mental health services are difficult to access in Grundy County (Behavioral Health Alliance of Grundy County, n.d.).

Matt Fritz, Coal City Village Administrator, shared some insights on mental health in Grundy County:

“There is not good public access, especially for low to moderate income people. We find that a lot of people just don’t know where they can get it. It is something that we have been finding as we work with the schools. Case management is one of those mental health components that helps people manage and allows them to get on top of their life, but it is hard to find good resources that can be utilized.”

<table>
<thead>
<tr>
<th>Access to Care - Mental Health Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>This indicator reports the number of providers with a CMS National Provider Identifier (NPI) that specialize in mental health. Mental health providers include licensed clinical social workers and other credentialed professionals specializing in psychiatry, psychology, counselling, or child, adolescent, or adult mental health. The number of facilities that specialize in mental health are also listed (but are not included in the calculated rate). Data are from the latest Centers for Medicare and Medicaid Services (CMS) National Provider Identifier (NPI) downloadable file.</td>
</tr>
</tbody>
</table>

Within the report area there are 95 mental health providers with a CMS National Provider Identifier (NPI). This represents 51.52 providers per 100,000 total population.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population (2020)</th>
<th>Number of Facilities</th>
<th>Number of Providers</th>
<th>Providers, Rate per 100,000 Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>184,402</td>
<td>20</td>
<td>95</td>
<td>51.52</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>52,533</td>
<td>3</td>
<td>31</td>
<td>59.01</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>131,869</td>
<td>17</td>
<td>64</td>
<td>48.53</td>
</tr>
<tr>
<td>Illinois</td>
<td>12,812,508</td>
<td>2,888</td>
<td>14,457</td>
<td>112.84</td>
</tr>
<tr>
<td>United States</td>
<td>334,735,156</td>
<td>57,750</td>
<td>454,109</td>
<td>135.66</td>
</tr>
</tbody>
</table>

Note: This indicator is compared to the state average.
Data Source: Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPPES). August 2022. Source geography: Address → Show more details
Access to mental health services was a top priority need for both Kendall and Grundy Counties. It is estimated that around 18% of the United States’ population live with some form of mental illness in any given year. Across the nation, there are only enough mental health care professionals to meet 26% of the need for services. Projections show that by 2025 the shortage will be astronomically worse, as six vital mental health provider types will have shortages of approximately 250,510 fulltime equivalents. (Behavioral Health and Economics Network, n.d.).

When looking at the combined population of Kendall and Grundy County, there is an identifiable need for increased availability for mental health services. With a population of 52,533, Grundy county only has 3 mental health related facilities and 31 providers. Kendall County with a population of 131,869, has 17 facilities and 64 providers. According to the Illinois Department of Human Services (IDHS), (2022), “Illinois has only 13.8 behavioral health care professionals for every 10,000 residents which translates to over 4.8 million Illinois residents living in a Mental Health Professional Shortage Area.” (p.1).

In order to meet the current need for Illinois residents to have accessible mental health services the state would need to increase the current workforce over 3.5 times. Referencing the map shown, Illinois has seen a 215% increase in their behavioral health workforce shortage in the past years, especially when compared to bordering states. (Behavioral Health and Economics Network, n.d.).

The growing need for mental health services carries many implications regarding the changing perspectives on mental health. In previous years, access to mental health typically ranked lower with KGCA customers. Seeing this need rise to a top concern for both communities being served by KGCA is indicative of the changing attitudes toward mental health and the overall need for a holistic approach to wellness. Customers are needing assistance in all areas including mental health, physical health, and socio-economic sustainability. At this point in time long waiting lists, limited services, and a lack of mental health professionals are inhibiting the ability to address these needs. IDHS is looking to incentivize those looking to enter the community mental health field. IDHS, (2022), states that they will be implementing a student loan repayment program targeting bachelor and master degree level providers. Additionally, IDHS is looking to establish a new Mental Health Professional (MPH) credential to address equity in the workforce and add over 500 new professionals over the next five years. (Illinois Department of Human Services, 2022).
COVID-19

The following information has been recognized in the Kendall County Health Department’s COVID-19 Community Needs Assessment:

In December 2019, the novel coronavirus disease of 2019 (COVID-19) was discovered to be the causative agent for acute respiratory and flu-like symptoms and began infecting increasing numbers of people in the Wuhan Province of China. The first case in the United States was confirmed by the Centers for Disease Control and Prevention on January 22, 2020. Despite efforts to contain the virus, by March 11, 2020, the World Health Organization declared COVID-19 a global pandemic. By March 17, 2020, all 50 US States had confirmed cases of the virus.

Because of the highly contagious nature of COVID-19, the alarmingly high rate of fatalities associated with it, and the lack of a vaccine or treatment at that time, the only effective way to prevent mass illness was through restricted travel, physical distancing, frequent hand washing, coughing in elbows or clothes, not touching the face, and staying at home. By mid-March 2020, with the virus clearly past the stage of effective isolation and contact tracing, local, state, and federal public health officials recommended extreme measures to minimize a public health catastrophe: mass quarantine, masking, physical distancing, and a virtual lockdown of all public gatherings and economic activity.

While all types of people are infected by the virus, older adults and people of any age who experience serious underlying medical conditions, many of which are more prevalent in African American communities, and, to some extent, Latinx and Native American communities, are at increased risk for severe symptoms from COVID-19. Persons of color, immigrants, and women are also impacted by underlying health conditions linked to poverty, face discrimination in medical care, and are more likely to work jobs that require them to leave their homes. Also, persons with disabilities or chronic conditions are more vulnerable to COVID-19 due to their inability to thoroughly isolate themselves (need for hands-on care), physical impairments, environmental barriers, or interrupted services.

The following additional populations experience differential exposure and extensive corresponding implications as a result of the pandemic: frontline workers, persons experiencing homelessness, gig-economy workers, low-income communities under quarantine, especially in urban settings, rural communities, tribal communities, incarcerated persons, and returning citizens. Children, families, individuals, and Community Action Agency staff may experience heightened stress, anxiety, depression and trauma as a result of the COVID-19 crisis. Loss of income, growing childcare needs, heightened food insecurity, housing and energy instability, lack of access to transportation, lack of basic supplies, and increased domestic violence are growing factors as this crisis continues to unfold and evolve.
As of 8/26/2022 Kendall County has reported 37,602 confirmed COVID-19 cases. Grundy County has reported 14,537 confirmed cases, a significantly lower number. Grundy County has a 69% rate of fully vaccinated adults as of 8/17/2022. Kendall County has reported that nearly 81% of adults in the area are fully vaccinated. High vaccination numbers in Kendall County were likely due to vaccination efforts set into motion by Kendall County Health Department and the City of Yorkville. The City of Yorkville donated a large vacant office building to serve as the primary community vaccination site for daily vaccination clinics. This site was utilized from January through June of 2021. Volunteer coordination was key to the success of vaccination clinics with over 300 medical and non-medical volunteers staffed to clinics. Kendall County’s leadership, alongside local school district leadership, partnered to create weekend mass vaccination clinics in both Yorkville and Oswego. Each weekend “mass vax” clinic served over 2,000 residents a day. All clinics received invaluable local volunteers from all areas such as: civic organizations, municipalities, higher education, elected officials, local board members, schools, faith-based sites, those enjoying retirement, law enforcement, fire protection districts, and pharmacies, all from within the community. (Kendall County Health Department, 2021).

In Grundy County, the Grundy County Health Department held vaccination clinics as well. They had nearly 100 volunteers (medical and non-medical) join the health department staff in the largest public health response they ever experienced. Partner agencies provided facilities, supplies, security, emergency response support, and food for the volunteers. Illinois Governor JB Pritzker joined the Grundy County Health Department during their inaugural day of the IL National Guard supported clinic. (Grundy County Health Department 2021 Annual Report).
Medicaid and Medicare

Insurance - Uninsured Adults

The lack of health insurance is considered a key driver of health status.

This indicator reports the percentage of adults age 18 to 64 without health insurance coverage. This indicator is relevant because lack of insurance is a primary barrier to healthcare access including regular primary care, specialty care, and other health services that contributes to poor health status.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>110,041</td>
<td>101,938</td>
<td>92.64%</td>
<td>8,103</td>
<td>7.36%</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>30,901</td>
<td>28,896</td>
<td>93.51%</td>
<td>2,005</td>
<td>6.49%</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>79,140</td>
<td>73,042</td>
<td>92.29%</td>
<td>6,098</td>
<td>7.71%</td>
</tr>
<tr>
<td>Illinois</td>
<td>7,623,675</td>
<td>6,819,711</td>
<td>89.45%</td>
<td>803,964</td>
<td>10.55%</td>
</tr>
<tr>
<td>United States</td>
<td>195,703,724</td>
<td>170,567,452</td>
<td>87.16%</td>
<td>25,136,272</td>
<td>12.84%</td>
</tr>
</tbody>
</table>

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, Small Area Health Insurance Estimates, 2019. Source geography: County. Show more details

Medicare and Medicaid Providers

Total institutional Medicare and Medicaid providers, including hospitals, nursing facilities, Federally qualified health centers, rural health clinics and community mental health centers for the report area are shown. According to the U.S. Department of Health and Human Services, there were 16 active Medicare and Medicaid institutional service providers in the report area in the third quarter of 2020.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Institutional Providers</th>
<th>Hospitals</th>
<th>Nursing Facilities</th>
<th>Federally Qualified Health Centers</th>
<th>Rural Health Clinics</th>
<th>Community Mental Health Centers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>16</td>
<td>1</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>9</td>
<td>1</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>7</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Illinois</td>
<td>3,086</td>
<td>236</td>
<td>704</td>
<td>402</td>
<td>249</td>
<td>2</td>
</tr>
<tr>
<td>United States</td>
<td>77,398</td>
<td>7,292</td>
<td>15,269</td>
<td>10,382</td>
<td>4,994</td>
<td>129</td>
</tr>
</tbody>
</table>

Data Source: US Department of Health & Human Services, Center for Medicare & Medicaid Services, Provider of Services File: September 2020. Source geography: County. Show more details

All Providers of Service, POS September 2020
- All Providers of Service, POS September 2020
- Report Location
Dental Care

Dental Care Utilization

This indicator reports the percentage of adults age 18 and older who report having been to the dentist or dental clinic in the previous year.

Within the report area there are 71.2% adults who went to the dentist in the past year of the total population.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population (2018)</th>
<th>Adults with Recent Dental Visit (Crude)</th>
<th>Adults with Recent Dental Visit (Age-Adjusted)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>178,887</td>
<td>71.2%</td>
<td>71.2%</td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>50,972</td>
<td>68.70%</td>
<td>68.50%</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>127,915</td>
<td>72.20%</td>
<td>72.30%</td>
</tr>
<tr>
<td>Illinois</td>
<td>12,741,080</td>
<td>65.7%</td>
<td>65.5%</td>
</tr>
<tr>
<td>United States</td>
<td>163,583,717</td>
<td>66.5%</td>
<td>66.2%</td>
</tr>
</tbody>
</table>

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2018. Show more details

KGCA customers have reported that lack of dental care is an issue in the area over the past few needs assessments. Data collected by KGCA suggests that COVID-19 and issues related have likely diverted some interest in dental care compared to previous years. In addition, the Kendall County Health Department sought to improve accessibility to oral health care. The Kendall County Health Department’s 2016-2021 IPLAN previously recognized lack of access to dental care in the area as a priority. A summary of the priority is below.

Under the 2016-2021 IPLAN, Community Health Services (CHS) endeavored to increase our community’s opportunities to access oral health care. CHS collaborated with Kendall County’s dental offices, health centers and other local public health system partners to promote engagement in increasing access to oral health care for Kendall County’s uninsured adult population and/or co-create participatory access to good oral health for the county’s population. Our nursing staff in partnership with the Illinois Department of Public Health (IDPH) provided a Certified Fluoride Varnishing Program made accessible to all Kendall County children aged 6 months to 6 years requiring treatment. We proudly served 96 children with fluoride treatments. Additionally, and with support from community partners IDPH and Fox Valley United Way, we provided dental health education and support to multiple daycares, preschools and school age children through our Tooth Keepers Plus Program. Over 450 preschoolers enjoyed this fun hands-on participatory program, supporting good oral health practices and the complementary role and importance of sound nutrition.

Medicaid continues to be very limited as to what it covers as regarding dental care and this is expressed as a need. Oral healthcare is a foreseeable need in the community that will likely continue to be so. Increased access to programs are still necessary, especially for those living below federal poverty guidelines.
Nutrition

The Customer Needs Assessment addressed the current conditions concerning food and nutrition needs in both counties. The results are as followed:

Which food and nutrition needs could you or your family use help with: (Please check all that you feel apply)

- Getting food from food pantries, food banks, or food shelves
- Enrolling in the Food Assistance Program
- Having enough food at home
- Getting nutritious food during pregnancy
- Learning how to shop and cook for healthy eating
- Getting emergency food assistance
- Getting meals delivered to my home
- Learning how to model healthy eating for my children
- Obtaining breastfeeding education and assistance

Top four responses were:
- 35%: Getting food from food pantries, food banks, or food shelves
- 25%: Enrolling in the Food Assistance Program
- 15%: Having enough food at home
- 10%: Getting meals delivered to my home

Also noted were the following:
- 5% said that getting emergency food assistance, learning how to stretch my food dollar, and learning how to shop and cook for healthy eating were nutritional needs that Grundy customers needed help with.
- 0% reported getting nutritious foods during pregnancy, learning how to model healthy eating for my children, and obtaining breastfeeding education and assistance.
Top four responses were:

- **27%**: Getting food from food pantries, food banks, or food shelves
- **20%**: Having enough food at home
- **17%**: Getting emergency food assistance
- **13%**: Enrolling in the Food Assistance Program

Also noted were the following:

10% of Kendall County customers reported that they needed help getting meals delivered to their homes. 7% reported that they needed help with learning how to shop and cook for healthy eating and learning how to stretch my food dollar. 0% reported getting nutritious foods during pregnancy, learning how to model healthy eating for my children, and obtaining breastfeeding education and assistance.
The number of Supplemental Nutrition Assistance Program (SNAP)-authorized retailers available in Kendall County is lower than both the state and national averages. While Grundy County has half as many available SNAP-authorized retailers, when considering the populations, Grundy is on par with both state and national numbers. Kendall County has three local food pantries. The Kendall County Community Food Pantry distributes food once a week from 12pm to 6pm. The Catholic Church in Plano was funding a mobile food pantry but funding recently ceased. Coordination with the Plano School District, St. Mary’s Catholic Church, and the Kendall County Community Food Pantry resulted in a satellite food pantry in the P. H. Miller School located in Plano. In only five short months, the Plano location served 1446 customers. The demographics were mainly Hispanic Plano residents who were unable to get to the Yorkville location due to work schedules or lack of transportation. The Helmar Food Pantry, located in Newark Illinois, distributes food once a month to whomever needs it. The Harvest Baptist Food Pantry in Oswego distributes food once a month as well. Not all of our community’s residents in need of food qualify for food stamps, and if they do, many customers still express that what they receive is not enough to feed their families. This tells KGCA that looking at all the numbers and data sets are important. Kendall still, despite other pieces of data, has a population in poverty that is in need of help accessing affordable, nutritious foods.

Grundy County has six stationary and 2 mobile food pantries. They are the Channahon Living Manna Food Ministry in Channahon, Coal City Food Pantry in Coal City, Community Care Center in Braidwood, Gardner Food pantry in Gardner, Mazon Food Pantry in Mazon, Minooka Food Pantry in Minooka, and Morris Food Pantry, who also facilitates one of the mobile food pantries, in Morris located at the We Care building. The Northern Illinois Food Bank also has a distribution center available.

Households Receiving SNAP by Poverty Status (ACS)

The below table shows that according to the American Community Survey (ACS), 5,181 households (or 8.4%) received SNAP payments during 2020. During this same period there were 1,949 households with income levels below the poverty level that were not receiving SNAP payments.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Households Receiving SNAP Total</th>
<th>Households Receiving SNAP Percent</th>
<th>Households Receiving SNAP Income Below Poverty</th>
<th>Households Receiving SNAP Income Above Poverty</th>
<th>Households Not Receiving SNAP Total</th>
<th>Households Not Receiving SNAP Percent</th>
<th>Households Not Receiving SNAP Income Below Poverty</th>
<th>Households Not Receiving SNAP Income Above Poverty</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grundy County, IL</td>
<td>1,844</td>
<td>9.19%</td>
<td>605</td>
<td>1,239</td>
<td>18,227</td>
<td>90.81%</td>
<td>733</td>
<td>17,494</td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>3,337</td>
<td>8.06%</td>
<td>750</td>
<td>2,587</td>
<td>38,061</td>
<td>91.94%</td>
<td>1,216</td>
<td>36,845</td>
</tr>
<tr>
<td>Illinois</td>
<td>605,910</td>
<td>12.41%</td>
<td>267,748</td>
<td>338,162</td>
<td>4,278,151</td>
<td>87.59%</td>
<td>317,871</td>
<td>3,960,280</td>
</tr>
<tr>
<td>United States</td>
<td>13,892,407</td>
<td>11.35%</td>
<td>6,370,420</td>
<td>7,521,987</td>
<td>108,461,812</td>
<td>88.65%</td>
<td>8,942,077</td>
<td>99,519,735</td>
</tr>
</tbody>
</table>

Data Source: U.S. Census Bureau, American Community Survey 2018-20. Source geography: County. Show more details

Last season Grundy Area PADS served a total 49 individuals consisting of 46 adults and 3 children. More than 50% of those clients received no additional benefits like SNAP or TANF (Temporary Assistance for Needy Families) despite many being eligible for additional benefits.

Grundy Area PADS Director, Janice Grant stated:

“The lack of individuals receiving SNAP or TANF is a trend across both of our programs. It’s very interesting, even though these programs are widely known. Everyone that we serve are in survival mode. Many living paycheck to paycheck. For those that served long jail sentences and are now out and experiencing homelessness, they likely don’t know how or have limited experience using a smartphone.
There is a knowledge and skill gap. There is no reentry program that is teaching those returning to society how to live in this world, the technology is moving so fast. So yeah, there are definitely barriers.”

**Obesity**

32.4% of adults aged 20 and older self-report that they have a Body Mass Index (BMI) greater than 30.0 (obese) in the report area. Excess weight may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population Age 20+</th>
<th>Adults with BMI &gt; 30.0 (Obese)</th>
<th>Percent Adults with BMI &gt; 30.0 (Obese)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Area</td>
<td>116,546</td>
<td>38,092</td>
<td><strong>32.4%</strong></td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>35,872</td>
<td>10,905</td>
<td><strong>29.9%</strong></td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>80,674</td>
<td>27,187</td>
<td><strong>33.5%</strong></td>
</tr>
<tr>
<td>Illinois</td>
<td>9,511,847</td>
<td>2,600,939</td>
<td>27%</td>
</tr>
<tr>
<td>United States</td>
<td>234,188,203</td>
<td>64,884,915</td>
<td>27.5%</td>
</tr>
</tbody>
</table>

*Note: This indicator is compared with the state average.*

*Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 2013. Source geography: County*

Above are the obesity rates shown from the previous version of the KGCA Community Action Plan. Below are the updated numbers. While numbers are still relatively high, the progress should be noted. Rates for both counties have dropped by at least 4%. Kendall shows an overall improvement of 7.8%. Both counties are also now below national and state averages.

**Obesity**

This indicator reports the number and percentage of adults aged 20 and older self-report having a Body Mass Index (BMI) greater than 30.0 (obese). Respondents were considered obese if their Body Mass Index (BMI) was 30 or greater. Body mass index (weight [kg]/height [m]²) was derived from self-report of height and weight. Excess weight may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

Within the report area, there are a total of 32,726 adults age 20 and older who self-reported having a BMI greater than 30.0. This represents a 25.6% of the survey population.

*Note: In 2021, the CDC updated the methodology used to produce estimates for this indicator. Estimated values for prior years (2004 - 2017) have been updated in this platform to allow comparison across years. Use caution when comparing with saved assessments generated prior to November 10, 2021.*

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Population Age 20+</th>
<th>Adults with BMI &gt; 30.0 (Obese)</th>
<th>Adults with BMI &gt; 30.0 (Obese), Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Location</td>
<td>126,642</td>
<td>32,726</td>
<td><strong>25.6%</strong></td>
</tr>
<tr>
<td>Grundy County, IL</td>
<td>37,113</td>
<td>9,538</td>
<td><strong>25.4%</strong></td>
</tr>
<tr>
<td>Kendall County, IL</td>
<td>89,529</td>
<td>23,188</td>
<td><strong>25.7%</strong></td>
</tr>
<tr>
<td>Illinois</td>
<td>9,523,557</td>
<td>2,673,824</td>
<td>27.8%</td>
</tr>
<tr>
<td>United States</td>
<td>239,867,275</td>
<td>69,963,348</td>
<td>29.0%</td>
</tr>
</tbody>
</table>

*Note: This indicator is compared to the state average.*

*Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 2019. Source geography: County*

While numbers have improved significantly over the years, there is still room for improvement. Access to healthy nutritious food is expensive and often requires more effort to prepare. Below is a KCHD customer comment on food:
My kids are always so busy. From after school practices and activities, there isn’t always time to cook a healthy home prepared meal. Organic food is so expensive on top of that. It’s just easier to run through a McDonald’s and get a quick and easy meal. Even on off nights the last thing I want to worry about is having to cook a meal.”

The Kendall County Health Department addressed the above nutrition needs of the community by planning a “Commit to Be Fit” program. Below is a summary of the plan.

Our goal at KCHD is to provide population-based programs that serve to promote physical, mental and environmental health, protect the community’s health, prevent disease, and promote family socio-economic stability.

The lack of access to care and nutritional based educational programs is often found within many clients served at the KCHD. We are committed to developing an educational program that meets this emerging trend for our low-income clients and assisting in the fight against obesity and other diseases. Parents or guardians who do not instill healthy habits within their children at early ages place their children at risk for long term health consequences.

Commit to Be Fit is designed to provide a nutrition and whole wellness based educational program that also addresses lack of access to care with an eight-week cycled course. Since good nutrition is but one aspect of a family’s whole health and well-being, albeit one of the most important, commit to be fit also incorporates group activities, gardening skills, fitness and nutrition education, cooking demos, mental wellness, oral health education, and assistance with access to care and socioeconomic needs.

Our team of health care professionals at KCHD along with our strategic partners have the necessary staffing and facilities to instill healthy nutritional habits at an early age, assist with social determinants of health such as stress and depression, provide social support, assist with managing affordable meals and locating food sources within the community, transportation, assist with job searches, and educate our community on environmental risk factors such as smoking and UV rays. Our proposed project will illustrate a forward movement on the implementation of the PH 3.0 concepts.

The Kendall County Woman Infants and Children (WIC) Program is going strong even during the crazy days of the COVID pandemic. The USDA that administers the WIC Program, has allowed the program staff to work remotely by conducting appointments over the phone, through the use of waivers that remove the in-person requirement for participants. This has kept mothers and babies safe throughout the pandemic. The caseload has increased since the start of the pandemic. Clients reportedly find the phone appointments much more convenient and safer for their families. Present allocated caseload for the WIC program has increased from 640 participants in 2021 to 738 participants in 2022. Currently, 750 clients are enrolled. Outreach efforts continue on a daily basis.

Kendall County’s WIC Program is also working on issuing Farmer’s Market Nutrition Program benefits for WIC clients. This State of Illinois program allows WIC families to receive additional benefits to be spent at the local Farmer’s Markets to purchase fresh, locally grown produce. Participation in this program is optional however this program is a WIN-WIN for community families and local farmers alike.

The WIC Program continues to strive to grow as they move into 2023. One new initiative for the coming year is to focus on increasing breastfeeding rates in Kendall County. The pandemic and the national formula shortage have created an environment that lends itself to more women choosing to breastfeed their babies. WIC is the perfect place to educate about breastfeeding and its advantages for mothers and babies.

Grundy County’s health department addressed obesity rates in their most recent 5-year Community Health Improvement Plan. Below is a list of Community input concerning obesity in Grundy County that was published in Grundy County’s Community Health Needs Assessment and their outcome and intervention strategies addressing health education.
Community Input – Overweight and Obesity
Stakeholder interviews identified the following issues, challenges and barriers related to overweight and obesity:

- Nationwide, there is pretty good evidence we aren’t making a lot of progress in addressing obesity. It is becoming more common and can lead to diabetes and cardiac problems. Morris is trying to get a YMCA off the ground with help from Joliet YMCA, not sure they have any other programs that address that. Some provide health clubs throughout region, coaching, but other than YMCA or park district cost may be a barrier as well.
- We eat a lot of fast food and processed food. People are ingesting things we didn’t ingest 30 years ago.
- We are doing more to promote healthy eating and exercise at schools and we are starting to see a difference.
- There are plenty of exercise facilities in the area: YMCA, 24-Hour Fitness, yoga studios. We have access to places to exercise, walking, running, and tennis clubs.
- Our sedentary lifestyles, large portions, behavioral management increase obesity. And in winter it is not as easy to exercise.
- Everyone sits in front of a computer all day. Kids especially don’t get enough exercise. People need to move.
- On TV all we see are food advertisements. We just need to eat right and exercise and maintain a healthy weight.
- There is a lack of activities for people and numerous taverns and bars. People sit around and eat and drink. People say I can’t wait until the kids graduate so I can leave here.
- This issues leads back to lack of education and proper diet and nutrition. Some local resources like the YMCA and the Diabetes Center offer classes on nutrition.
- Grundy County is not very walkable. Not very friendly in terms of getting exercise. There is lot of obesity in Grundy County. There is a lack of access to exercise, or don’t have time, working a lot, have children, it’s not convenient, general apathetic attitude to living healthy. Fast food is celebrating – you cap off your work week with a pizza. Widespread public education is needed.
- We don’t have community based programs. We have a YMCA but you must pay to join and that is a stopping point in communities where people don’t have jobs. There is only one grocery store in Dwight, and none in Gardner. They are forced to buy from family restaurant or Subway-type restaurant. Food pantries and hospital help coordinate the food pantry drop off and outreach programs.

- People who want to make meaningful changes in their life want to be refreshed and want to go to things that are inspiring. People want to go where others ready to make the same changes.
- Farmer markets are really for the upper middle classes. Usually people in their 20s and 60s cannot afford that.
Outcome Objective
- By 2021, increase the percentage of Grundy County adults by 10% who receive health education and prevention information and services.

Impact Objectives
- By 2021, increase Grundy County residents’ awareness of health education and preventive services available in the community.
- By 2021, reduce barriers in the community to access needed health education resources and preventive services.

Intervention Strategies
To address Prevention and Education needs, Grundy County Health Department will:
- Utilize existing funding and seek new funding to hire a Health Educator whose main role will be to implement and monitor Prevention and Education activities.
- Participate in health education and wellness events throughout the county

- Promote Prevention and Education during our monthly radio spot. A new topic will be discussed monthly.
- Participate in community activities by attending and providing prevention information on relevant health topics (i.e. substance abuse, obesity, etc.).
- Continue to work with community stakeholders to provide messages about Prevention and Education.
- Provide Prevention and Education health topics during appointments with clients.
- Continue to provide WIC services in Grundy County and incorporate a Prevention and Education component.
- Work with local care providers to offer Prevention and Education clinics (i.e. blood pressure checks, blood sugar level checks, nutrition course, etc.)
- Continue to provide educational opportunities including, but not limited to:
  - Food Service Sanitation Managers Certification Course
  - Youth Mental Health First Aid
  - Nutrition
  - CPR, First Aid and AED

Community Resources
- Morris Hospital
- Behavioral Health Alliance
- Community Foundation
- County Coroner
- Grundy County Health Department Board of Health
- Grundy County Interagency Council (GCIC)
- Grundy County Chamber of Commerce
- Illinois Department of Human Services (IDHS)
- Illinois Department of Public Health (IDPH)
- Mental Health Advisory Committee
- Schools
- State’s Attorney
- Substance Abuse and Mental health Service Administration (SAMHSA)
- Other organizations within the county that support Prevention and Education.

Estimated Funding needed for Implementation
The most critical component for the Health Department to fund is a full time health educator. This person will be responsible for all Grundy County Health Department prevention and education activities. Additional funding will be needed to participate in health education and wellness events as well as provide education materials. The Grundy County Health Department will team up with local partners and seek grant
Below are Grundy County’s WIC numbers from their last annual report.

<table>
<thead>
<tr>
<th>NURSING</th>
<th>2021</th>
<th>2020</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communicable Disease Investigation</td>
<td>4,317</td>
<td>3,830</td>
<td>230</td>
</tr>
<tr>
<td>Immunizations Administered, Child</td>
<td>374</td>
<td>436</td>
<td>694</td>
</tr>
<tr>
<td>Immunizations Administered, Adult</td>
<td>42,617</td>
<td>282</td>
<td>540</td>
</tr>
<tr>
<td>Tuberculosis Tests</td>
<td>41</td>
<td>78</td>
<td>175</td>
</tr>
<tr>
<td>WIC Certified (average/month)</td>
<td>303</td>
<td>305</td>
<td>328</td>
</tr>
<tr>
<td>Fluoride Varnish Application</td>
<td>0</td>
<td>0</td>
<td>16</td>
</tr>
<tr>
<td>Fecal Immunochemical Test (FIT)</td>
<td>0</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>Lead Case Management</td>
<td>0</td>
<td>0</td>
<td>17</td>
</tr>
<tr>
<td>Vision Screenings</td>
<td>235</td>
<td>14</td>
<td>379</td>
</tr>
<tr>
<td>Hearing Screenings</td>
<td>337</td>
<td>14</td>
<td>436</td>
</tr>
</tbody>
</table>

**Transportation**

The Customer Needs Assessment addressed the current conditions concerning transportation in both counties. The survey question focusing on transportation needs given to KGCA’s reporting area customers is below, as well as the results:

Which transportation needs could you or your family use help with: (Please check all that you feel apply)

- Having access to public transportation
- Having dependable transportation to and from work
- Getting financial assistance to buy a dependable car
- Getting financial assistance to make car repairs
- Getting myself to and from school
- Getting financial assistance to buy car insurance
- Getting financial assistance to pay car registration or license fees
- Getting a driver’s license
- Getting to and from medical or dental appointments
- Getting my children to and from child care
- Getting my children to and from school
- Getting my children to and from school or club activities
- Going shopping and doing errands
Top four responses were:
- 19%: Getting financial assistance to make car repairs
- 14%: Having dependable transportation to and from work
- 13%: Getting financial assistance to buy a dependable car
- 11%: Getting financial assistance to buy car insurance

As for the remaining responses, 10% reported needing access to public transportation. 8% reported needing financial assistance to pay for car registration or license fees. 6% reported needing assistance getting themselves to school. 5% reported needing assistance in obtaining a driver’s license and with getting their children to and from childcare. 3% reported needing help with going shopping and doing errands and getting their children to and from school. 2% reported needing assistance with getting to and from medical and dental appointments, and getting their children to and from school or club activities.
Top four responses were:

- 19%: Getting financial assistance to make car repairs
- 16%: Getting financial assistance to buy a dependable car
- 15%: Having dependable transportation to and from work
- 11%: Getting financial assistance to buy car insurance

Also noted were the following:

8% of Kendall County customers reported that they needed financial assistance to pay car registration or license fees. 6% reported that they needed access to public transportation, getting their children to and from school or club activities, and needed help getting a driver’s license. 4% reported that they needed assistance getting their children to and from childcare. 3% reported that they needed assistance getting their children to and from school and getting themselves to and from school. 2% reported that they needed help getting to and from medical or dental appointments. 0% reported going shopping and doing errands.

Both counties identified getting financial assistance to make car repairs as their number one need for transportation. The similarities do not end there. Both counties shared all of the same needs as their top priorities for transportation. KGCA believes that this trend is likely due to increased interest in keeping and maintaining available transportation. Customers are holding on to cars much longer, likely a result of chip shortages, empty car lots, and sky-high used car prices.

Modern cars can contain as many as 150 tiny processors, controlling everything from engine timing to touchscreen units. As the COVID-19 pandemic triggered travel restrictions, demand for new cars plummeted. Automakers slowed down production plans and reduced their orders for new microchips. The misconception is that production of chips slowed down. In reality, chip factories didn’t slow down. Consumers, many working and attending school from home for the first time, bought more electronics. When lockdowns restrictions began to ease up, automakers tried to increase their chip orders. By this time however, chip factories were too busy to accommodate them. Chip production has the ability recover. Although, there is a strong possibility that automakers will not return to the old days of building so many cars that dealers mark them down to sell them. Car manufactures like Ford, one of the largest, has publicly suggested the possibility of moving to a business model where consumers order cars before they are built. (Tucker, 2022).

Increased car prices, limited availability of new cars for the foreseeable future, and changing technologies all play a large role in the current state of transportation needs. This is a phenomenon that exists not only in Kendall and Grundy counties but through the whole nation. Transportation services will be needed to help supplement transportation needs.

Public transportation in both counties is in high demand. Kendall County has Kendall Area Transit (KAT), a local paratransit bus service that began in early 2010. Since then, they have provided over 100,000 trips at a very modest cost to Kendall County residents. Residents have to call ahead no later than one day before their ride, so while the service is helpful, the scheduling can be burdensome. KAT recognizes the increased need and is trying to find additional ways to address it. KAT has implemented new systems and processes, increased service, and adjusted to become more customer friendly to users.

Ridership continues to be steady with seniors making up for the majority of ridership. So far in 2022, 4,537 rides have been provided the general public, 11,032 to seniors, and 5,280 to those with disabilities. Most rides have been related to education and medical necessities. Compared to 2019 ridership for nutrition is down significantly. In 2022 there have been 82 rides related to nutrition versus 634 in 2019. It should be noted that 2019 statistics account for the entire fiscal year while 2022 statistics only account for July 2021-May 2022. However, with only one month left in the fiscal year, KAT would have to serve 552 nutrition-related rides to catch up to pre-COVID
numbers. It should be noted that ridership related to medical has increased exponentially from 2019. In 2019 566 rides were related to medical while in 2022 9,712 rides were related to medical.

Grundy County has a similar version of public transportation; the service is called the Grundy Transit System (GTS). It has been in service since 1999 with limited run-days, but it is helping to fill transportation voids. Morris has a hospital bus that will deliver low-income individuals and seniors to their doctor’s appointments, but many people, due to the need for transportation, tend to misuse this system. They may ask to be dropped off at the doctor’s office and then walk instead to the grocery store in order to fulfill other needs.

These services are a push in the right direction, but the increased number of people needing rides and the limited buses make it difficult to ensure that people are making it to school, work, or even a job interview on time. Neither service operates on the weekends, early mornings, or late afternoons all of which are a low priority based on the financial constraints and lack of vehicles for both services at this time.
Results of the Kendall-Grundy Community Action Consumer Insight Instrument:

What services are you looking to receive today?
110 responses

- Utility Bill Assistance: 102 (92.7%)
- Employment Support: 6 (5.5%)
- Housing Assistance: 12 (10.9%)
- Drive To Success: 2 (1.8%)
- Helping Hands: 6 (5.5%)
- Scholarships: 2 (1.8%)
- Weatherization: 6 (5.5%)
- Battery Recharge: 1 (0.9%)
- Help with rent and groceries: 1 (0.9%)
- Lithium Battery Fish: 1 (0.9%)
- Mobile Battery Fish: 1 (0.9%)
- Evacuation reimbursement: 1 (0.9%)
- Loss snapshot: 1 (0.9%)
- Utility bills, rent, or just any help: 1 (0.9%)

To what extent were you treated with respect by all staff?
110 responses

- Very Respectful: 98.2%
- Moderately Respectful: 1.8%
- Somewhat Respectful: 0%
- Very Disrespectful: 0%

Please rate the effectiveness/helpfulness of service you received.
100 responses

- Very Effective: 94 (94.4%)
- Moderately Effective: 4 (3.7%)
- Somewhat Ineffective: 1 (0.9%)
- Very Ineffective: 0 (0.0%)
Most clients participating in the program received Energy Assistance. Of those that participated 95% found KGCA to be very helpful while 90% said that KGCA helped them to understand the importance and reasoning behind energy conservation. Customers also have the option to comment on their experiences while receiving energy assistance. Some responses are listed below:

- Always very helpful and respectful
- Don’t understand why you need mine and my family’s social security numbers.
- Thank you from the bottom of my heart!
- I think ***** was so very nice and helpful!
- Very helpful information was given to me and my family today. Much appreciated
- I’m not good on using my phone, ***** helped me so much.
- It was a pleasure speaking with *****, they were very helpful
- You guys do such a wonderful job at helping people going though hardship I cannot thank you enough for your services
- Thank you for your service
- I appreciate the help from everyone
- Thank you for your support that you provide to individuals in need
- You have helped us before and we appreciate it very much
- This was my first time utilizing this service and the caseworker made me feel comfortable talking about my situation and they were very helpful with additional service
- Thank you for helping when we desperately need it!
- Everyone in the Morris office is very friendly and always there to explain anything that I don’t understand. I especially like working with *****. Very caring and nice.
- I received great customer service from **** they went over everything with me. They know what they are doing. This is not my first time using this service. I feel that **** is doing a great job. I want to rate **** a 10 for great customer service and 100% they have a nice personality.
• The person that I spoke with was extremely helpful, and very courteous. Thank you for what you do. There are many that don’t know how to navigate help that is available, and your organization is vital for those services.

• **** was extremely professional, helpful, knowledgeable, and friendly. He is amazing! Thank you, **** and LIHEAP!

• *** was very clear and helpful

• **** assisted me today. They were very polite & professional. They answered all of the questions that I had with satisfactory answers. They made the application process move very quickly. Thank you **** for exceptional customer service today.
Description of the Service Delivery System
The Kendall County Health Department’s first annual report, referred to as the *Kendall County Nurse Report*, was completed in 1965. In November of 1972, the voters of Kendall County passed a referendum which established the Board of Health’s current governing structure. In 1996, Community Action, the Health Department, and Human Services merged into one health services organization governed by the Board of Health.

The Kendall County Health Department has four units, each offering essential services and core functions in public health; physical, mental, environmental, and socio-economic health and well-being. The four units are titled; Community Actions Services, Mental Health Services, Community Health Services, and Environmental Health Services. Elements of emergency preparedness and response, health education, and continuous systems improvement are integrated and practiced across the Health Department. Administrative/Support is integrated through all of the units. Administrative/Support functions exist in order to serve every staff endeavor in the aforementioned areas so that staff may most effectively serve the health and well-being needs of our community.

As a Community Action Agency (CAA) located in what continues to be one of the fastest growing areas in the nation, as well as an area experiencing negative community impact due to high foreclosure rates, we are committed to meeting the needs of our customers. With the recession, the aftermath, the growth, and our statistics comes a demand for new services and the need to be aware of new priorities. Throughout the past few years, we have spent a considerable amount of time discussing the flux in population demographics, as well as the impact of COVID-19. Thanks to our work implementing and the impact of our 5-year Community Health Improvement Plan, as well as performing constant community surveillance, we have been researching ways to combat the multi-faceted challenges our population is currently facing.

As we worked on Kendall-Grundy Community Action’s (KGCA) Community Action Plan (CAP), we were able to come together as a cohesive group to prioritize the needs of our community. As we continue to move forward, our priority as a community action agency is to address the continual growth of both Kendall and Grundy counties, the impacts of COVID-19, and the ongoing aftermath of the foreclosure issue facing Kendall County. KGCA is helping the community reach and remain on the right path to self-sufficiency despite some of the obstacles that may come their way.

KCHD is the chief provider and/or referral source for both personal and mental health promotion. KGCA is a unit of KCHD serving Kendall and Grundy counties with Low Income Home Energy Assistance Program (LIHEAP), Illinois Home Weatherization Assistance Program (IHWAP), Low Income Home Water Assistance Program (LIHWAP), Community Services Block Grant (CSBG), and Domestic Violence Response Team (DVRT). KGCA proposes to address all of the principal needs identified in the Community Action Plan. Agency projects, as well as outside resources, will continue to be coordinated in order to service many of the principal needs of the community.
Needs: Throughout the agency’s service area, only a small percentage of all housing is subsidized. The average rental cost for a two-bedroom apartment in Grundy County is $1205 and for Kendall it is $1303. The high cost of rent in the area can make it very difficult for low-income households to maintain adequate housing.

Services: Low Income Home Energy Assistance Program (LIHEAP) funds are used to assist eligible households in meeting the costs of home energy. The Illinois Home Weatherization Assistance Program (IHWAP) assists low-income households by helping/guiding them on ways to save fuel and money while increasing the health, safety, and comfort level of their home. Information, referrals, and housing-related counseling are provided. Low Income Home Water Assistance Program (LIHWAP) is also available to assist families in paying down their debt owed towards their water and sewer bills. Many customers call KGCA for assistance in paying their monthly rent or mortgage. KGCA facilitates the local board for the Emergency Food and Shelter program. This board allocates funds to other local agencies to provide emergency food and shelter to people in need within the community. One of the agencies in Kendall County, Community Benefits, provides rental assistance and KGCA customers can pick up and drop off an application at our office. A Community Benefits volunteer picks up the finished applications at our office on a weekly basis. In Grundy County, KGCA refers clients in need of rental or mortgage assistance to We Care of Grundy County, Help for Hope, and St. Vincent De Paul. All clients are also referred to their respective local townships for general assistance if/when township funds are available. KGCA also refers community members of both counties to Catholic Charities Diocese of Joliet for rental and mortgage assistance.

Needs: Low-income households cannot afford to eat adequately and lack the knowledge to purchase and prepare well-balanced meals. Food pantries in the area are serving more families who are above the poverty level but are struggling to meet basic needs. The SNAP program has changed their eligibility requirements so that more families and individuals are able to qualify, however, the allocation of assistance to each family has been changing. Kendall and Grundy counties currently do not host a local SNAP office, nor is there one in close proximity.

Services: KGCA refers customers to local public aid offices and food pantries. KGCA offices have modestly stocked emergency food pantries (food and supplies provided by the local food pantries) readily accessible to any customers that express a need. The Salvation Army also gives KGCA ALDI and Jewel gift cards to give to customers who need emergency food and supplies on a regular basis. KGCA also refers customers to the Women, Infants, and Children (WIC) program if the customer is a new mother. The WIC program is facilitated through the KCHD’s Community Health Services (CHS) unit. CHS has most recently begun to provide cooking and exercise classes for WIC customers and a fruits and vegetables ‘teaching garden’ has been planted on health department grounds. The Grundy County Health Department also provides WIC services in their nursing division and has a garden planted on their grounds.

Needs: Low-income people need supplemental funds to continue their education, resulting in greater self-stability.

Services: KGCA implements a scholarship program for economically disadvantaged students in cooperation with Illinois businesses, industries, and community colleges. This program is funded through Community Service Block Grant (CSBG) funding to aid in the acquisition of vocational skills training and higher education. KGCA also refers customers seeking education assistance to the local Workforce Innovation and Opportunity Act (WIOA) offices, also referred to as One-Stop Shops for job seekers.

Needs: While information is reflective of unemployment as an improving issue in our community, customers still express a need for more jobs, mostly with a focus on are permanent jobs that provide full-time hours and a living wage.

Services: KGCA offers internship opportunities in our own office for low-income persons who are in need of fulfilling an internship for accomplishing their degrees. KGCA has partnered with Northern Illinois University and Aurora University to recruit interns that may be interested. KGCA has a Drive to Success program that is for low-income persons who are employed and need repairs done on their vehicles so that they can continue to have transportation to and from work. KGCA also refers customers to WIOA supports and has a current
memorandum of understanding with the local WIOA offices to ensure that both agencies are working together to assist customers who are in need of employment.

**Needs:** Current evidence shows a growing homeless and poverty-stricken population in both Kendall and Grundy counties. With homelessness and poverty comes a demand for emergency food, shelter, and other crisis assistance. Yet funding cutbacks made it difficult for community organizations to meet increasing emergency needs.

**Services:** KGCA refers persons in crisis to Community Benefits, Kendall County food pantries, and We Care of Grundy County, as well as Catholic Charities for emergency assistance. At this time, Kendall County PADS has officially disbanded. KGCA will continue to provide emergency shelter and case management for those experiencing homelessness for the 2022-2023 season. Grundy County offers emergency shelter and rapid rehousing through their Grundy Area PADS shelter. Kendall has coordinated a Continuum of Care group and is active with the United Way of Will County Continuum of Care the lead agency for KGCA's service area.

**Needs:** Kendall and Grundy counties update their information and referral system annually, and on an as-need basis. Every customer that comes in for assistance receives updated information and referral packets, and each intake specialist assesses a customer’s needs to make sure that they are aware of all programs that would be of benefit.

**Services:** Through CSBG, the agency provides an Information and Referral service, which places low-income individuals in contact with other services available within the KGCA agency and throughout the community. KGCA maintains and makes available an Information & Referral Directory for both counties. In addition to identifying appropriate agencies, included are location, phone numbers, and hours of operation for each provider. The directories of community resources were developed with information on services, eligibility, funding, fees, etc. An update is done minimally on an annual basis.

**Needs:** Local law enforcement has experienced an increase in domestic violent cases since and possibly perpetuated by the COVID-19 Stay-at-Home Order. Criminal cases regarding domestic violence can take over a year to be closed. Those escaping domestic violence often require financial assistance among other resources.

**Services:** To address the rise in domestic violence, the Kendall County Domestic Violence Response Team (DVRT) was created in January of 2020. The team consists of the Kendall County States Attorney’s Office who presents the domestic violence case in criminal court, the Kendall County Sheriff’s Office who investigates complaints to inform the courts during case prosecution, the Kendall County Health Department who provides community resources to facilitate independence to victims, and Mutual Ground who provides support through legal advocacy and counseling services to the victims.
Performance Outcomes Management Plan

The Kendall County Health Department’s Performance Outcomes Management Plan is implemented annually to educate both staff and stakeholders about, and provide for, the efficacy, efficiency, and ethics of the organization. Efficacy refers to the relationship between outcomes and change. Efficiency refers to the pragmatic and prudent acquisition and distribution of fiscal, material, and personnel resources. Ethics refers to the more abstract aspects of outcomes such as communication of outcomes, intent of outcomes, and the integrity of the outcomes.

KGCA’s Performance Outcomes for 2019

1st Quarter Avg. Therms = 359.34/ Avg. Kwh = 791
2nd Quarter Avg. Therms = 94.97/ Avg. Kwh = 361
3rd Quarter Avg. Therms = 25.5/ Avg. Kwh = 1124
4th Quarter Avg. Therms = 32.1/ Avg. Kwh = 503.7

Despite an average temperature of 35 degrees, January saw nearly six consecutive days with temperatures below 0 degrees. With the average dwelling type being single-family homes, more energy is required to heat the larger space. CAS must also note that cold weather influences more energy consumption. The public being advised to stay indoors and school cancellations resulted in furnaces running at almost twice the capacity, more lights on during the day, and more time spent using the internet or watching television. The second quarter this year was very cool and mild with a lot of rain. Last year’s second quarter was warmer and dryer, which may have led to increased usage of air conditioning which would account for why 2018’s usage was higher as well as our hard work educating our clients on energy conservation for their homes. This is the first summer that all of Kendall and Grundy have their ComEd smart meters installed. We have noticed a significant uptick in everyone’s usage in regards to kWh’s even ourselves and estimates no longer occur on customers’ bills. We will continuously provide energy conservation education and tools to all our clients to strive for lower energy usage practices among our customers.

KGCA’s Performance Outcomes for 2020

1st Quarter Avg. Therms = 164.5/ Avg. Kwh = 922
2nd Quarter Avg. Therms = 101/ Avg. Kwh = 751
3rd Quarter Avg. Therms = 125/ Avg. Kwh = 1085
4th Quarter Avg. Therms = 60/ Avg. Kwh = 724

Out of the three years that we gathered data on, 2020 was the warmest year while 2019 was the coolest year in regards to temperature. 2020 was also the year where COVID-19 had people staying at home due to stay-at-home orders. Individuals were working from home and children were attending school remotely. We forecasted that 2020 would have higher energy usage due to these above-mentioned conditions. The therms were actually less in 2020 than 2019 but it was a very mild winter. However, the kwh’s were much higher in 2020 than in 2019 but that could be because it was warmer where air conditioners were in use more and all the electronics that needed to be plugged in at home on a consistent basis thanks to the COVID-19 stay at home orders. Noteworthy is that the KWH’s were less in 2020 than 2018. This particular finding may show some evidence that our energy conservation education could be working in reducing energy usage among our energy assistance applicants. More data will need to be collected in the next two years to make conclusions that are more valid.
KGCA’s Performance Outcomes for 2021

1st Quarter Avg. Therms = 151.02/ Avg. Kwh = 1118.33

2nd Quarter Avg. Therms = 163.65/ Avg. Kwh = 660.77

The Therms in this year’s quarter is down from last year even though the average temperature was lower than last year’s quarter. However, the Kwh are the highest we have recorded yet in the first quarter and that is a bit alarming. This is disheartening, however we have had a lot of new customers this year than ever before since the eligibility has been raised to qualify for energy assistance. Many of our customers are receiving energy conservation education for the first time so we will continue to see what patterns occur next program year since the eligibility will remain the same for program year 2022 as it was for program year 2021.

The second quarter of 2021 was very similar to the second quarter of 2020. Both years had a warmer degree average that 2018 and 2019. However, the therms are higher in 2021 than all the previous years but the kwh’s are lower for the second quarter. With the warmer weather, maybe more families are able to have the windows open instead of using air or heat. Staff will delve into more with each customer on energy habits when the weather is “nice” to give better insight.

Accessibility Plan

The Kendall County Health Department Accessibility Plan is created in consideration of persons served, personnel, and stakeholders. To ensure best practices, the Kendall County Health Department Accessibility Plan may consider accessibility to be inclusive of architecture, environment, attitudes, finances, employment, communication, and transportation.

- Architecture

The health department will create and maintain an atmosphere of openness and equal opportunity which requires a physical environment designed to eliminate potential barriers. Annually, facilities management staff conduct health department inspections for ADA compliance. In the event of a finding, the implementation of necessary corrections will be made and documented.

- External Environment

The health department works diligently to enhance accessibility to health and wellbeing information and advocacy with particular reference to vulnerable groups and those most in need. Vulnerable groups in society are often most in need of health and social services but may have great difficulty in accessing them. Identifying barriers to access and putting initiatives in place to combat them is central to the work of the health department.

- Attitudes

The health department views persons served as vital community partners. Health department staff understands the importance of each individual’s diverse needs and the necessity to utilize person-centered thinking when providing culturally competent and culturally equitable assistance.

- Finances

The health department maintains modest fees for services. These fees are set at or below comparable
services of analogous counties. Also, the mental health unit utilizes a sliding fee scale fee structure for all services. To further increase access to care, health department also accepts several types of insurances for most mental health and community health services.

- Employment

When a position is made available at the health department, the position is advertised internally and when necessary, externally. The hiring procedure follows an ethical and culturally competent and culturally equitable process to ensure that the most qualified candidate is hired.

- Communication

The health department hosts internal Spanish interpreter availability and access to over 200 other languages through an offsite interpreter translation service. Additional assets to linguistic access at the health department include: translated paperwork, accessing brail, enlarged font, and TTY calls.

- Transportation

When personal transportation is not available, local resources such as a cab service or Kendall Area Transit (KAT) are available to assist in transportation efforts for consumers of the health department at their expense.

**Accessibility Plan Goal:** In order to ensure accessible community information and informatics, the health department will maintain an up to date website that will be reviewed annually through the year 2020.

**Accessibility Plan Update:** Throughout 2020, amidst the COVID-19 pandemic, the Health Department provided consistent messaging focusing on COVID-19 protective factors related to; mental health, substance abuse, grief and loss, social isolation, proper sanitation, suicide prevention, safety standards, financial assistance, overall health and wellbeing. Each day we shared relevant health data related to the status of COVID-19 in Kendall County. We displayed dashboards on our website that included; local, state and international COVID-19 data for our residents to easily monitor. We also reformatted the website home page to make it more user-friendly and hosted the pertinent information right on top to make it easily accessible. During the height of the pandemic, we provided daily public service announcements to our community to ensure full access to the latest information and transparency regarding the pandemic. The Health Department website remains the quickest and most reliable place for up to date health information for our residents.

The **Wellness Alerts** section of the health department website hosts health articles that are relevant to current conditions that may affect our residents.

The **Wellness Alert** articles include:

- Illinois Department of Public Health Warns Public to Watch Out for Rabid Bats and Other Animals - IDPH
- IDPH warns Public to Avoid Tick Bites as Summer Season Gets Underway - IDPH
- Kendall County Cooling Center List Updated - KCHD
- Illinois Officials Remind Residents to Use Caution When Recreating in Illinois Waters and Be Aware of Harmful Algal Blooms – IEPA IDPH
- Public Health Officials Warn About Salmonella Outbreak Linked to JIF Peanut Butter – IDPH
- IDPH Endorses Federal Authorization of COVID-19 Vaccine Booster Dose for Children 5 Through 11 Years – IDPH
- IDPH Issues Warning About Three Potential Cases of Severe Hepatitis in Children in Illinois – IDPH
- IDPH Issues Warning that COVID-19 Cases are Slowly Rising in Many Areas of the State – IDPH
- IDPH Adopts New Federal Guidelines for Reporting COVID-19 Data – IDPH
- Avian Influenza Confirmed in Illinois Backyard Poultry – Illinois Department of Agriculture
- Powdered Infant Formula Recall – IDPH
- IDPH COVID-19 Safety at Retreats, Conferences, and Large Business Meetings – IDPH
- IDPH COVID-19 Variant of Concern Health Advisory – IDPH
- Health Alert Legionnaires’ Disease – IDPH

To view a sample of Wellness Alerts, please go to www.kendallhealth.org/alerts/

The **Featured News** section of the health department website hosts valuable health and community information pertaining to; recent health research, recognition of prominent community members and other agencies/departments that excel in the area of health, legislative testimonies about health issues and concerns, immunization schedules for our clinics and vaccination recommendations due to regional outbreaks that may affect our residents or their families.

The **Featured News** articles include:
- Public Service Announcements County Coronavirus Updates - KCHD
- College Vaccinations - IDPH
- Johnson & Johnson (Janssen) Update - KCHD
- Coronavirus Disease Update for Kendall County – KCHD
- Roll Your #SleeveUp to #FightFlu – KCHD
- Public Health Officials Announce 2,128 New Confirmed Cases of Coronavirus Disease - IDPH

To view a sample of Featured News, please go to www.kendallhealth.org/news

The **Opioid Repository** has been created and routinely updated. This provides our community with timely and cutting edge prevention-based information.

To view a sample of the Opioid Repository, please go to http://www.kendallhealth.org/news/category/opioid-update-repository/

The **Upcoming Events** section of the health department website hosts information about; speaking engagements, health fairs, community education presentations, and family activities that are happening either at the health department, or hosted by external stakeholders. To view a sample of Upcoming Events, please go to www.kendallhealth.org

Some of the important health topics that were shared through social media (Facebook and Twitter) include; International Overdose Awareness Day, West Nile Virus, Employment Opportunities, National WIC Breastfeeding Week, Recognizing an Opioid Overdose, KCSO Youth Academy Class of 2022, Practicing Safe Food Handling, Fourth of July, Monkeypox Information, Cooling Centers, Mosquito Surveillance, Community Action Month, Memorial Day, and Mental Health Services.

Furthermore, the website is host to a Kendall County Resource Directory, Green Pages, programmatic detailed information about our services, fee schedules for services; it provides access to required paperwork, and valuable health data, that are monitored for accuracy and accessibility for our residents.
Description of Linkages and Coordination Efforts
The Kendall County Health Department is the core provider of services, resources, and planning. We are unique in that we have many services under one roof. This allows customers to have access to many departments and a whole-health experience during one visit.

We have a no wrong door design. The goal is to provide services that promote self-sufficiency and stabilization. We are committed to assisting customers in obtaining entitlements and successfully linking them to sets of services that promote self-determination with regard to the unique needs of each individual/family that comes to us for help.

Our commitment to providing our customers with timely, quality linkages and referrals emphasizes the goals and objectives of KGCA. The first is to encourage self-sufficiency, while recognizing the need for transitional, direct services for those faced with poverty and crisis. The second is to maintain an up to date Information and Referral program. KGCA/KCHD programs are tied effectively together and staff members from all programs cooperate and work together for the benefit of the customer. On the local level, KGCA/KCHD provides long range planning by tracking requests for services, as well as identifying gaps and duplications in services. This allows us to keep an updated list of service providers. KGCA/KCHD serves Kendall and Grundy Counties with Low Income Home Energy Assistance Program LIHEAP, Low Income Household Water Assistance Program (LIHWAP), Illinois Home Weatherization Assistance Program (IHWAP), and Community Services Block Grant (CSBG).

All CSBG eligible households will be referred to other appropriate services as part of meeting the household’s individual needs. The coordination of resources with other agency programs is key and continuous. We will also continue to join forces with community members and partner agencies to address the needs and opinions on health and health care, housing, utilities, income, transportation, social activities, and other issues related to daily life.

KGCA staff is familiar with and cross-trained in all KGCA agency programs. All CSBG eligible households are referred to other appropriate agency programs as part of linking the household’s needs to programs providing services.

We are committed to working with area stakeholders to ensure we are providing the necessary programs to meet the needs of our customers. The intent is to afford residents and customers one-stop access to county health and social services. This is especially important in an area with limited public transportation. The Department also houses CASA (Court Appointed Special Advocate), Kendall County Housing Authority, Veterans Assistance Commission, and the local Workforce Development Division. To date, the one-stop concept has worked well as reflected in feedback from both staff and customers alike.

Public relations and marketing efforts are on-going. Monthly media releases are sent to local newspapers, radio stations, and television. We post informational flyers and make presentations to community businesses and clubs and other agencies. Targeted outreach sites are senior centers, housing complexes, church groups, employment agencies, schools, and other social service agencies. We are an active member of the National Association of Community Action Agencies, the National Association of Housing and Redevelopment, Coalitions of Citizens with Disabilities, the National Association of Energy Engineer, the Association of Information and Referral Services, the Coalition to End Homelessness, the Illinois Ventures for Community Action, and the Illinois Community Action Association.

Other efforts to maintain effective delivery of coordination and linkages include the development and implementation of the KCHD Strategic Plan. We also have a lead role in the KCHD 5-year Community Health Improvement Plan which identifies and leverages strengths and opportunities in the local community regarding public health. These discovered opportunities help inform goals for us to address in a five-year span including goals for improvement on the community’s social well-being.

KGCA annually pursues and obtains valuable customer insights intended to identify gaps in service. The survey covers characteristics such as demographics, housing, education, employment, and nutrition. The survey asks the
customer to speak of any issues that they feel the reporting area may be experiencing or that they may personally be experiencing in regards to those characteristics.

A separate survey is also given to board members, stakeholders, and other community members that may not have a chance to visit the office. This separate survey also addresses the same socioeconomic characteristics.

The outcomes of referrals, case management, and follow-up consults also affect how we continue to perform and provide our programs. If customers are not reaching a higher level of self-sufficiency and continuously keep seeking assistance year after year, we reflect on what may be the cause of this behavior and strive to create linkages and innovative programs to alleviate these reoccurrences.

This data from the surveys and outcomes of programs and performance assists us in identifying the needs of the community and what service gaps may exist. This in turn helps inform a plan with goals and outcomes that serve to address these needs and gaps. This system is a process of management and accountability practices better known as Results-Oriented Management and Accountability, or ROMA. ROMA is the way we incorporate the use of our program outcomes and results into evaluating whether or not we are assisting our customers in the best possible way with the resources that are available. As of February 2017, KGCA has had a ROMA implementer on staff, our Assistant Executive Director.

CULTURAL EQUITY PLAN

This cultural equity plan has been set forth in order to respond to the diversity of stakeholders with respect to; age/agedness, ethnicity/race, gender/orientation, language/literacy, mental health, physical ability, socioeconomic status, and spiritual beliefs. Cultural diversity also includes concepts of status, dress/modesty, family traditions, health values, help-seeking behaviors, matters of privacy, personal boundaries and spiritual identity. Efforts to reduce population health disparity is more likely to succeed if it is part of a broader culture of equity. Fostering a culture of equity can have significant benefits for an organization. When an organization values a culture of equity, the staff shares an understanding of equitable care and places high value on its delivery. Similar to a culture of quality, a culture of equity will be essential to the success of quality improvement that seeks to reduce population health disparities.

PARTNER PARTICIPATION

Persons served are vital community partners. Such clients often experience community barriers due to educational, linguistic, or socioeconomic disparities. Client input into services may occur in any of the following 15 ways; Effectiveness Insight Instrument, individual service/treatment planning, governance participation, community health assessment, community health planning, strategic planning, or other spontaneously rendered insight. Another way that client participation input into their own services are achieved, is by asking them about the usefulness of services following the rendering of those services. Client centered services are influenced by abilities, culture, needs, strengths, and desires/preferences of the person served.

COMMUNITY ENGAGEMENT

Engagement with community groups that reflect community diversity may contribute to an understanding of cultural trends free of a deficit discourse. These community engagement efforts include outreach to community action, environmental health, mental health, and physical health networks, community resource team, community churches, community schools, senior centers, outreach efforts to community members having difficulty accessing services, and enhanced engagement with current clientele of direct services. The health department is committed to utilizing diverse forms of social media in order to access diverse populations, keeping in mind that electronically prepared vehicles of communication are also accessible to those with mobility impairments. Community engagement also occurs through these vehicles of health information: Annual Report, Community Events, Oral Communication, Brochures/Flyer, Educational Materials, Press Release, Bulletin Board, Facebook/Twitter Feeds, Care.
RECRUITMENT & RETENTION

Professional development related to culture, diversity, and cultural competence is strongly supported. Existing organizational training should carefully embed relevant diversity topics within the training. The intent of embedding cultural competence into training or in developing any training around cultural competence is to promote the ethics and efficacy with regard to serving diverse populations. That is to say that cultural competence will be a part of ongoing training. Assertive efforts will be made to recruit diversity that is representative of cultural competence for leadership positions, management positions, support positions, and direct service positions through both the employment posting and the interview process.

INTERPRETER AVAILABILITY

Internal Spanish interpreter availability will be available through the health department. Translation of additional materials is also available as needed. Other language interpreter availability will be posted for access to any other language interpretation as needed. All forms are verbally explained to clients in order to ensure their understanding. Standard forms will be reviewed for possible translation needs. Additional assets to linguistic access include: Accessing Braille * Translation Support * Enlarged Font * TTY Calls * Interpretation Support

ASSESSING ACCESS

An awareness of organizational diversity will be demonstrated in the personnel report. Culturally competent accessibility will be demonstrated through a culturally equitable recruitment process, through professional development opportunities, through sound delivery design, and through an environment that promotes comfort, trust, and cultural relevance. Specific characteristics/barriers of the population served will be reflected in the community health assessment and partnership engagement in order to increase access to health care services. Community members are welcome to contact the health department for educational information about specific health/services access issues.

EQUAL OPPORTUNITY

The Kendall County Health Department (hereafter KCHD) will comply fully with the non-discrimination regulations set forth in relevant State and Federal law and Executive Orders. KCHD has always offered equal opportunities in employment and, by the very nature of its experience, equal services to all the residents of Kendall County. It is the intent of KCHD to provide equality and respect to all individuals in matters of service and employment.

STATEMENT OF COMMITMENT

It is of great benefit to all employees as well as all those we serve to show professional responsibility and commitment towards continuous growth in cultural competence.

HIRING PRACTICES

All persons will have equal opportunity for advancement and promotion

COMPLAINT PROCEDURE
Complaints will be directed to the Executive Director of KCHD who will direct them as necessary to the Board of Health. The complainant will be advised of ensuing steps which will be taken. The Illinois Department of Human Rights brochure is posted in areas of key visibility throughout the health department.

ANNUAL REVIEW

A review of this plan and CLAS Standards will occur annually.

PROFESSIONAL DEVELOPMENT

Professional development opportunities related to cultural equity will continue to be made available to staff. Special emphasis will be placed upon embedding a commitment to cultural equity within the units of the health department.

Coordinated Partnerships

KGCA/KCHD is committed to working with area stakeholders to ensure we are providing the necessary programs to meet the needs of our customers. The intent is to afford residents and customers one-stop access to county health and social services. This is especially important in an area with limited public transportation. To date, the one-stop concept has worked well.

Other groups and agencies with which this objective will be coordinated are listed below:

- Employment: Kendall County and Grundy County Workforce Development Services, Open Door Rehabilitation, JTPA, Department of Rehabilitation Services, Aurora University, Northern University and Private Employment Services.

- Nutrition: Kendall County Health Department’s Women, Infants, and Children Program, Grundy County Health Department’s Women, Infants, and Children Program, Kendall County Community Food Pantry, Helmar Food Pantry, Northern Illinois Food Bank, Harvest Baptist Food Pantry, Northern Illinois Food Bank, Food Stamp Programs, Meals on Wheels, School Lunch Programs, Red Cross, Salvation Army, We Care of Grundy County, and Township Supervisors.

- Housing: Kendall County Housing Authority, Grundy County Housing Authority, Community Benefits, Catholic Charities, Will County Continuum of Care, and Rural Development, and local landlords.

- Health: Kendall County Health Department Mental Health and Substance Abuse Treatment Programs, Grundy County Health Department’s Mental Health Treatment, Kendall County Health Department’s Immunizations Programs, Grundy County Health Department’s Community Health Clinic, Rush Copley Medical Center, Edward Hospital, Mercy Provena Hospital, Morris Hospital, Valley West Hospital, Aunt Martha’s Federally Qualified Health Center, Visiting Nurse’s Association’s Federally Qualified Health Center, Hine’s Veteran’s Hospital, Mercy Mental Health Impatient Treatment Center, Elgin Mental Health Center, Tinley Park Mental Health Center, Kendall County’s Health Department’s 24/7 Crisis Line, 988, Kendall County Free Health Clinic, and Morris Hospital Transportation Service.

- Education: Joliet Community College, Wabunsee Community College, Illinois Valley Vocational Center, Kendall Grundy Regional Office of Education, Aurora University, Community Colleges, Northern Illinois University, Kendall County Public Schools, Grundy County Public Schools, and Vocational Centers
• Miscellaneous: Kendall County Health Department’s Community Outreach Case Management, Kendall County Health Department’s Elder Care, Kendall County and Grundy County Interagency, Kendall County Veteran’s Assistance Commission, Grundy County Veteran’s Assistance Commission, Kendall Senior Services, Fox Valley Older Adults, Grundy Senior Service, Kendall County Township, Grundy County Township, Prairie State Legal Services, Three River’s Head Start, Cross Lutheran Social Services, Yorkville Optimist Club, Grundy Community Foundation, Childcare Resources and Referral, Grundy County Expanded Area Transit, Northeast Area on Aging, Coal City Library, Retired Senior Volunteer Program, Illinois Department of Veterans Affairs, IDEA Offices, Regional SST Offices, Regional VA Offices, Illinois Migrant Council, Grundy County PADS, Grundy County Foundation, 311 Project, and Illinois Child Support Enforcement office Joliet Region
KGCA/KCHD is committed to enhancing the health and economic well-being of the community and will strive to look for continued ways in which we can interact. We intend to be more in communication with each other and to reach out to work towards healthier lifestyles for residents. KGCA/KCHD’s diverse network of stakeholders, community groups, agencies, and other care-givers help ensure that we are aware of what services are available. It also helps in determining the gaps in services that may exist in the community.

Programs we coordinate with are:

- **KCHD** *Professional Seminar Series* – delivers state-of-the-art continuing education programs for professionals in the health & human services and education fields. CEU and CPDU credits are available for Licensed Social Worker, Licensed Clinical Social Workers, Licensed Professional Counselors, Licensed Clinical Professional Counselors, Licensed Marriage and Family Therapists, and school personnel.
- **KGCA** *Staff fills out vouchers for customers to receive free merchandise from local resale shops.*
- **KGCA** *Is the local outreach site for the Salvation Army in Kendall County. In Grundy County, the office is the intake site for the Salvation Army’s Nicer Sharing program and Energy Aide programs.*
- **KGCA** *Kendall and Grundy County are members of the United Way of Will County Continuum of Care.*
- **KGCA** *Is the local outreach site for the Salvation Army in Kendall County. In Grundy County, the office is the intake site for the Salvation Army’s Nicer Sharing program and Energy Aide programs.*
- **KGCA** *Is the local outreach site for the Salvation Army in Kendall County. In Grundy County, the office is the intake site for the Salvation Army’s Nicer Sharing program and Energy Aide programs.*
- **KGCA** *Member of The Grundy County Interagency Council since 1983/Member of The Kendall County Interagency Council since 2017- Members are all social service agencies and non-profits who serve Grundy County. Keeps agencies updated on programs, staff, funding, collaborations, events. Discuss broad, county-wide issues such as housing, seniors, etc.;
- **KGCA** *Served Grundy County after Morris Battery Fire Incident in 2021. KGCA worked with other service agencies to provide gift cards for groceries and energy savings kits. We assisted some applicants with hotel rooms that had been displaced do to their proximity to the fire, the goal of which was to help families get back into their homes and make up for lost income due to the fire. An event took place at the Morris City Hall on August 11th 2021. Over 200 families participated.*
- **KCHD** *Staff and other community members actively seek donations from many sources, mostly individuals, to provide Christmas gifts for low-income children under the title of “Share Your Blessings”.*
- **KGCA** *Provides financial assistance to persons in need of temporary shelter, meals, gasoline, Rx drugs, etc.
- **KGCA** *Coordinate with local food pantry and churches to assist families at holidays and back to school events.*
- **KCHD** *Public Health Emergency Planning and Preparedness - Drills and exercises: Regional Partners’ Strategic National Stockpile (SNS) Policy Table Exercise, KCHD Table Top Exercise, Kendall County SNS Distribution/Dispensing Functional Drill.*
- **KCHD** *Health Education Tasks – Educational Bulletin Boards are constructed, newspaper articles are written for both counties, updates made to KCHD website and FaceBook with educational and health posts, presentation made to local boards, committees, and service providers. Attendance at several community and school health fairs.*
- **KGCA** *IHWAP team air seals and insulates drafty windows, doors, air conditioners, ceiling fans, and added insulation. This was to help lower utility bills for low-income families and individuals. All IHWAP staff members are QCI/BPI certified*
- **KGCA** *Staff goes out to other agencies to take LIHEAP applications*
- **KGCA** *Emergency Food and Shelter Program-Staff serves as the local chair and contact for the Local Board who acts as the decision making local body in distributing funding to other agencies in the county who serve the community in providing emergency food and shelter to local families in need.*
- **KCHD** *Building Resilience Against Climate Effects (BRACE)- Staff participates in developing strategies and programs to help the community prepare for the effects of climate change*
- **KCHD** *Staff received Incident Command System 300 training*
- **KGCA/KCHD** *Participation in ALICE training and Active Shooter Drills*
• KGCA/KCHD* Participation in Kendall County Health Department’s “Sense-sational Garden”, a fruit and produce garden established in 2017 as an expansion to its Serenity Garden—both of which are shared with clients.
• KGCA *Previously participation in the LIKE program with the UIC Energy Resources Center
• KGCA*Created, implemented, and facilitated and Kendall County Interagency Group in April 2017
• KGCA/KCHD* Participation in Kendall and Grundy County’s Senior Providers Groups
• KCHD* Staff member receive ROMA Implementer certification
• KGCA* Participation in Grundy County We Care Grundy Area Providers Resource Days
• KGCA/KCHD* HIPPA trained
• KGCA/KCHD* All staff have participated in quarterly call down drill
• KGCA* MOU established between all local WIOA offices.
• KGCA* Participation in utility vendor weatherization program
• KGCA* Joined the Domestic Violence Response Team (DVRT) in September 2021, in Partnership with Kendall County Sheriff’s Department and Mutual Ground.
• Staff member joined Grundy County PADS board
• Staff member joined Will County Continuum Board, Executive Committee, and Ranking Committee
• Staff member joined We Care Relief Committee

KENDALL COUNTY HEALTH DEPARTMENT IS A MEMBER OF THE
FOLLOWING PROFESSIONAL ORGANIZATIONS

✓ ACHMAI (Association of Community Mental Health Authorities of Illinois)
✓ CAP (Community Action Partnership)
✓ Community Behavioral Healthcare Association
✓ Companeros en Salud
✓ Grundy County Interagency Council
✓ IAPHA (Illinois Association of Public Health Administrators)
✓ ICAA (Illinois Community Action Agencies)
✓ ICAF (Illinois Community Action Foundation)
✓ ILCSWMA (Illinois Counties Solid Waste Management Association)
✓ IPHA (Illinois Public Health Association)
✓ Illinois Ventures for Community Action
✓ NACCHO (National Association of County & City Health Officials)
✓ NIPHC (Northern Illinois Public Health Consortium)
✓ Product Stewardship Initiative
✓ Kendall County Police Chief Association
Kendall County Health Department (KCHD) is the county public health department. We are the lead agency for public and mental health services, providing input into community planning to enhance the quality of life for county residents.

KCHD offers service coordination and referrals internally and to other agencies. In addition, we provide home energy assistance, weatherization services and the community action block grant provides funding for family socioeconomic self-stability.

A wide variety of professional public health, mental health and community services personnel are employed by the department, bringing many valuable years of experience to the community. Teamwork is a critical component for delivering holistic services to the residents of Kendall County. This is achieved through both staff and program coordination, and includes collaboration with other agencies within and throughout our Local Public Health System.

KCHD constantly strives to meet the changing demands and needs of the growing community. KCHD works with county agencies and municipalities on emergency planning and preparedness using an all hazards model.
Description of Innovative Community and Neighborhood-Based Initiatives
Kendall-Grundy Community Action Services, a division of the Kendall County Health Department, is one of 37 Community Action Agencies which, together, serve the entire state of Illinois; and is a member of the National Organization, Community Action Partnership. The promise of Community Action is “Helping People / Changing Lives,” carrying out its mission through a variety of means, including: Low-Income Home Energy Assistance Program (LIHEAP), Low Income Household Water Program (LIHWAP), Illinois Home Weatherization Assistance Program (IHWAP), Community Service Block Grant (CSBG), Domestic Violence Response Team (DVRT) and several other self-sufficiency programs offered to the two-county area.

The structure of Community Action is unique in that federal dollars are used locally to offer specialized programs in communities. Coordination is the bedrock of Community Action, using resources of all kinds, in combination, to solve community problems. It is a coordinated effort to address the root effects of poverty and to move families and individuals towards a life path of self-sufficiency.

Kendall-Grundy Community Action serviced Kendall and Grundy Counties with the following innovative community and neighborhood based initiatives:

**Kendall County Interagency Council**

In alignment with the goals of Kendall-Grundy Community Action, the idea for the Kendall County Interagency Council (KCIC) was presented in early March 2017. KCIC held its first formal meeting on April 11, 2017.

*The mission of the Kendall County Interagency Council is to provide a forum for professional collaboration to nurture and support partnerships among local agencies to maximize resources and to better enable providers to serve customers and the community.*

Modeled after the Grundy County Interagency Council, KCIC is composed of a myriad of service providers throughout several industries to include assisted living facilities, home care, equine therapy, education, veterans’ services, emergency preparedness, child care, legal services, and several other social service agencies.

The intent of KCIC, in addition to providing a professional forum for collaboration, is to minimize the duplication of work involved with providing similar or identical services to clientele.

Since its inception, KCIC has been meeting once a month. The main concentration of each meeting is to have one person/organization present their product/service in order to build understanding and awareness with the other participating individuals/organizations. Before the conclusion of each meeting, all individuals/organizations give a brief synopsis of current or upcoming events.

KCIC, even still in its infancy, is proving to be a valuable asset to providers in the area and to the people of Kendall and Grundy Counties.
2021-2026 Illinois Project for Local Assessment of Needs (IPLAN)

Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it's the only thing that ever has. Margaret Mead

Mental Health Services and Community Action Services, under the 2016-2021 IPLAN, endeavored to promote and preserve the socio-economic well-being and mental health needs of, in addition to others, our community’s senior population. MHS and CAS objective was to connect seniors to assets that reduce financial instability and support mental health through a combination of extensive community engagement, seamless care coordination and the delivery of person-based services. The following paragraphs describe the most updated planning process that has taken place to formulate three priority health problems. The outcomes of the planning process will influence potential new innovative programs that KGCA intends to develop in the next year.

● ASSESSMENT METHODS / COMMUNITY HEALTH PLAN PROCESS

The Kendall County Health Department implemented the community-driven MAPP process for its ability to promote strong community connections that would foster and produce the collective wisdom of our community partners - essential to identifying, and eventually addressing, community health concerns by consensus. Although interrupted by COVID-19, we took our community and community partners, collectively referred to as our Community IPLAN Committee, on a journey through community health improvement planning using concepts that included visioning, an environmental scan, the identification of strategic issues, and the formulation of strategies. This was accomplished through the vehicle of MAPP's four unique and progressive assessments. The community members, partners and sectors making up our IPLAN Committee were very active for our first assessment, then participation was stifled in Spring of 2020 when stay-at-home orders were mandated. This abrupt shift to remote work made it difficult to maintain relatively consistent members throughout the duration of our next two assessments. That said, the public at large, through the use of mainstream and social media, was kept informed of our progress, their input and remote/in-person participation encouraged, with each assessment performed. Once we reconvened in-person during the summer of 2021, new Committee members were added and gladly welcomed.

In our first assessment, the Local Public Health System Assessment, our Committee collaborated to measure the capacity of our local public health system to conduct essential public health services. This lead to our Community Themes and Strengths Assessment, during which health department staff collected, analyzed, prepared and discussed a great deal of information shared by members of our community unable to join us at the table, identifying public health themes that interest and engage our community, their perceptions about quality of life, and that which they believed to be community assets. While unable to meet with our Committee at this juncture due to the pandemic, they were privy to this information later in the MAPP process. Our Committee then enjoyed the results of a comprehensive, data-driven Community Health Status Assessment, during which they were made privy to analyzed data about our community’s health status, quality of life, a broad and diverse cross section of public health risk factors, and associated health assets. In our fourth and final assessment, the Forces of Change Assessment, our Committee worked closely to identify forces that are occurring or will occur that will affect our community or our local public health system. Pulling it all together, our Committee applied their cumulative experiential and data-driven knowledge gained through all four assessments to create by consensus, meaningful public health priorities intended to positively impact the health and well-being of our community for the next five years.

● PRIORITIZATION OF RESULTS

Three health priorities have been selected. Chosen through community partner consensus, these three health priorities represent health and well-being initiatives unduplicated by efforts already established in the local public health system, and can be distinguished by innovation from efforts yet established in the public health system. The community engagement processes by which these priorities were selected are elaborated upon later in this document. The three health priorities proudly represent community driven health priorities.
The three health priorities are on the health and well-being topics of:
• Promote Opportunities to Reduce Vaccination Hesitancy
• Increase Community Awareness to Protect Against Vector Borne Disease
• Connect our Most Vulnerable to Assets that Reduce Socio-Economic Duress & Support Mental Health

KGCA will be working with KCHD’s mental health division with connecting seniors to assets that reduce socio-economic duress and support mental health.

**PRIORITY: CONNECT THE MOST VULNERABLE TO ASSETS THAT REDUCE SOCIO-ECONOMIC DURESS & SUPPORT MENTAL HEALTH**

The Kendall County Health Department’s (KCHD) Mental Health Services and Community Action Services will endeavor to promote and preserve the socio-economic well-being and mental health needs of Kendall County’s most vulnerable populations. Kendall County’s most vulnerable populations are defined as persons who are experiencing a high exposure to poverty, who lack reliable transportation, who identify as English as a Second Language (ESL), who may be in residential isolation, and may have mental and physical disabilities. These categories represent a demographic within our community, thoughtfully chosen by our community partners, who may benefit greatly from efforts intended to address a lack of access to care. KCHD will work on using a combination of extensive community engagement and intentional care coordination, while increasing the delivery of person-based services in an effort to raise individual and community awareness and promote access to services which address mental health and substance abuse, social isolation and connectedness, and financial instability.

**IMPORTANCE OF PRIORITY HEALTH NEED WITH ANALYSIS TO IDENTIFY POPULATION GROUPS AT RISK**

KCHD utilized a multi-modal process to determine population groups at risk. Through the use of MAPP (Mobilizing Action for through Planning and Partnerships), the KCHD completed the Community Health Status Assessment, Local Public Health System Assessment, Community Themes and Strengths Assessment, and Forces of Change Assessment. Healthy People 2030, State Health Improvement Plan, Kendall/Grundy Community Action Plan, and IPLAN Data Systems were also included during the analysis. These assessments, in addition to other relevant data, helped to identify population groups at risk for this community health improvement plan priority of connecting the most vulnerable to assets that reduce socio-economic duress and support mental health.

The Covid-19 pandemic continues to be a major public health threat, challenging the provision of mental health services, and has led to the most significant economic disruption since The Great Depression. There was an expectation that depression and suicide rates would increase due to the pandemic. Before the pandemic, from January to June of 2019, 11% of adults reported symptoms of anxiety disorder and/or depressive disorder. In January of 2021, 41% of adults reported symptoms of anxiety disorder and/or depressive disorder. (Centers for Disease Control and Prevention, 2021, October 20) See chart on next page.
The Blue Cross and Blue Shield Health of America Report shows depression rates by state which was published in May of 2018. They reported Illinois having 4% of the population diagnosed with depression. Overall rates have gone up by 33% since 2013 with teen rates going up 63%. Women are two times as likely to be diagnosed compared to men. (Blue Cross and Blue Shield, 2018, May 10)

According to the Centers for Medicare and Medicaid Services, 11.5% of Kendall County beneficiaries are diagnosed with Depression. The prevalence rate for beneficiaries that are less than 65 years old is at 23.3% while for beneficiaries that are 65 years old and over the prevalence rate is 9.9%. (Centers for Medicaid and Medicare Services, 2021, January 15)

The County Health Rankings and Roadmaps 2021 report shows that Kendall County residents reported on average 3.8 days as poor mental health days in the past 30 days. The 2020 report showed Kendall County residents on average had 2.8 days that were poor mental health days in the past 30 days. (County Health Rankings, n.d.)

The annual suicide rate in the United States was 14.3 per 100,000 as of 2019. This rate has increased steadily since 2000, when it was 10.4 per 100,000. Suicide is the 10th leading cause of death in the United States across all ages. Reports since the pandemic have not found significant changes in the overall rates of suicide so far. However, studies of previous epidemics in history show an increase in suicide rates occurring later after pandemics subsided. This has been attributed to an increase in social connectedness, community cohesion, and mutual support in the acute phase of a pandemic. It is important for communities to be prepared to prevent mental health crises as the pandemic may have long term impacts moving forward. (Liang, Angela, Nestadt, Paul. John Hopkins Medicine, 2021, February 13)
Illinois and Kendall County’s suicide rates are less than the national rate. Illinois, for 2019, had a rate of 11.2 per 100,000 and Kendall County had 9.5 per 100,000. The suicide rate for Kendall county in 2017 was slightly lower at 8.1 per 100,000 while the rates were the same for Illinois and the United States. See chart below for the 2017 rates.

The Kendall County Coroner’s Annual 2020 report shows 13 deaths by suicide which were all males of different age ranges. See charts below from the report:

<table>
<thead>
<tr>
<th>DEATHS by MANNER</th>
<th></th>
</tr>
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<tbody>
<tr>
<td>Natural</td>
<td>365</td>
</tr>
<tr>
<td>Accident</td>
<td>17</td>
</tr>
<tr>
<td>Suicide</td>
<td>13</td>
</tr>
<tr>
<td>Homicide</td>
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</tr>
<tr>
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<td>0</td>
</tr>
<tr>
<td><strong>TOTAL DEATHS REPORTED 2020</strong></td>
<td><strong>396</strong></td>
</tr>
</tbody>
</table>
The Kendall County Coroner’s Annual 2019 report showed 12 deaths by suicide. Two were female and 10 were male mostly of middle age. See charts below for 2019 data:

| Deasphyxation due to Bag Over Head | Suicide | 53 | Male |
| Deasphyxation due to Hanging | Suicide | 51 | Male |
| Deasphyxation due to Hanging | Suicide | 92 | Male |
| Gunshot Wound to the Head | Suicide | 83 | Male |
| Gunshot Wound to the Head | Suicide | 52 | Male |
| Deasphyxation due to Hanging | Suicide | 22 | Male |
| Gunshot Wound to the Head | Suicide | 19 | Male |
| Gunshot Wound to the Head | Suicide | 33 | Male |
| Deasphyxation due to Hanging | Suicide | 24 | Male |
| Deasphyxation due to Hanging | Suicide | 22 | Male |
| Gunshot Wound to the Head | Suicide | 26 | Male |
| Gunshot Wound to the Head | Suicide | 48 | Male |
| Deasphyxation due to Hanging | Suicide | 54 | Male |

According to the US Census Bureau, Kendall County’s population has increased by 131.11% since the year 2000, and forecasts show continuing growth. Kendall County’s growth is far above Illinois’ increase of 2.83% since 2000. This data opposes recent media reports regarding the amount of people leaving Illinois; according to the 2020 National Movers Study by United Van Lines, more residents moved out of Illinois than into Illinois, with 66.4% of moves being outbound while 33.6% were inbound. (United Van Lines, 2021)
New Census data that just came out for 2020 shows that the population rose even higher to 131,869 which is an increase of 14.9% from 2010. Not only is Kendall County’s population growing, it is becoming more diverse. The percentage of White county residents declined from 83.6% in the 2010 census to 67.4% in the 2020 census. The percentage of Black county residents rose from 5.7% in 2010 to 8% in 2020 and the Hispanic population rose from 15.6% in 2010 to 20% in 2020. Asian residents account for 2.2% of the county’s 2020 population.

Even with Kendall’s growth, Kendall County still does not have a hospital in the county. Access to care has not met up with the population growth in Kendall County. Agencies have not seen an increase in funding or staff as more people are moving into the area looking for resources.

Kendall County has a poverty rate that is lower than the percentage for the state of Illinois and the United States and the rate has not changed significantly since the year 2000.

Females in the service area have a higher percentage of being in poverty than males.
The population by race alone shows that Black or African Americans, and Multiple Race are populations in poverty that are higher than Whites in Kendall County. The Hispanic or Latino population in poverty is at 4.35%. This population is also higher than Whites in poverty.

The Kendall County child poverty rate is at 5.0% while the senior poverty rate is at 6.4% which are both higher than the general poverty rate for Kendall County. These poverty rates are from the US Census Bureau and are from 2019, before the pandemic occurred. More current data at the county level has not been released yet by the US Census due to delays from the pandemic.
The amount of persons in poverty for Kendall County in 2019 was 5195 people. Community Action Services served 5073 persons with our low-income supports in 2019. Most of the services given were assistance with utilities and services that included case management with the goal of reaching a step forward out of poverty. To reach that level of care for our families in poverty we would need more funds and available staff. A onetime Low Income Home Energy Assistance Program payment for the year does not even begin to address the wide array of needs for our low-income population which would include a more holistic and coordinated approach. Poverty rates also may not give the entire picture of the socio-economic well-being of the community.

The National Low Income Housing Coalition (NLIHC) put out a report in 2021 showing that Kendall County is the second most expensive area in the state of Illinois to reside in. In Kendall County, the Fair Market Rent (FMR) for a two-bedroom apartment is $1,283. In order to afford this level of rent and utilities—without paying more than 30% of income on housing a household must earn $4,276 monthly or $51,320 annually. Assuming a 40-hour work week, 52 weeks per year, this level of income translates into an hourly housing wage of $24.67. A person working a minimum wage job would have to work 84 hours a week to afford a two-bedroom apartment at FMR in Kendall County. (National Low Income Housing Coalition, 2021)

Kendall County has a higher eviction rate than the state and national percentage. The latest data on eviction rates was from 2016. Due to the pandemic, Illinois Gov. JB Pritzker banned evictions from March 2020 to August 2021. The Kendall County Sheriff’s Office began eviction enforcement at the end of the moratorium but there has been a backlog of filings.
Kendall County ranked as 5th in the nation with the highest foreclosure rate right before the pandemic occurred. Foreclosures, just like evictions, were banned from March 2020 to August of 2021 in Illinois. Looking at data for 2021, the states that did not have a moratorium are reporting foreclosures but not Illinois since the moratorium just ended at the time of this writing. KCHD will be vigilant in their surveillance of what the numbers will be a year from now when the courts start to catch up on foreclosure and eviction filings. In the meantime, requests for housing assistance since the pandemic have increased for Community Action Services. Before the pandemic, Community Action Services requests for housing assistance averaged about 100 a year. Since the pandemic started, Community Action Services have received 7,000 requests for housing assistance. The funding and staff availability is not enough to fulfill the need at this time. More funding for program support and case management is crucial to assist our most vulnerable in this time of crisis (Kendall County Health Department COVID-19 Community Action Plan Update, pg. 60).

The Kendall County PADS shelters have not opened for the past two seasons and the number of homeless in Kendall County has increased. The Regional Office of Education #24 Mckinney-Vento Liaison Rhonda Redgate-Offhaus gave us the following report on our area’s homeless families:

Below find the data for end of FY20 and FY21. Since last November when I started working with the schools an additional 56 children were identified. The number between FY20 and FY21 showed a decrease due to the usual reasons of moving, establishing a household, graduation etc... The biggest reason for the decrease is perceived need due to COVID-19. With technology and food provided to all, if the families were doubled up, they didn’t think as much of themselves being homeless. Our numbers went up, as students returned to in-person learning and my working with them in getting this population identified if that makes sense.

<table>
<thead>
<tr>
<th>RCDT</th>
<th>LEA</th>
<th>End of FY 20 McK-V #</th>
<th>End of FY 21 McK-V #</th>
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<td>South Wilmington CCSD 74</td>
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<td>2</td>
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</tr>
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<tr>
<td>24032201004</td>
<td>Minooka CCSD 201</td>
<td>15</td>
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</tr>
</tbody>
</table>
The chart above shows that there were 325 homeless children in the schools for 2020 and 249 in 2021.

The chart above shows the number of homeless families throughout the years in our service area. As Ms. Redgate-Offhaus stated above, 2021 shows a decline in the number of homeless families enrolled in school for that year (Kendall County Health Department COVID-19 Community Action Plan Update, pg. 61-62). There were also moratoriums put in place on evictions and foreclosures throughout the 2021 school year. At the time of this writing, Community Action Services has seen an increase of homeless persons coming in looking for shelter resources since the pandemic began. According to Community Services Single Tracking and Reporting System (STARS), in 2019 there were 273 case management services received to assist homeless individuals. For 2021 there have been 345 case management services received to assist homeless individuals. That is a 78% increase since before the pandemic. Community Action Services is anticipating a greater increase once the eviction and foreclosure filings become routine within the courts due to the suspension of the housing moratoriums in October 2021.

The above information was presented at a Community Action Services Advisory Board (CAAB) meeting. The CAAB members advised that the families with children that are being reported to the Regional Office of Education as homeless must become a priority for services. Discussion on increased case management and caseworkers being directed towards those families occurred so that they have someone to assist them with navigating all possible services and opportunities (Kendall County Health Department Community Action Advisory Board, 2021, pg. 4).
KCHD’s priority health need of connecting the most vulnerable to assets that reduce socio-economic duress and mental health support is in line with Healthy People 2030 which speaks to the ongoing difficulty for individuals and the importance of stability and quality of life. KCHD will work to outreach to 100% of community residents and partners, with whom we engage, to address the need for greater mental health awareness and support and to decrease socio-economic duress regarding our community’s most vulnerable. Likewise, in the 2021 State Health Improvement Plan (SHIP-FINAL), it is noted that “social determinants” affect health, and therefore it is important that health is addressed holistically with regards to employment, housing, and mental health (SHIP-FINAL, 2021, p. 38). Many of the goals cited within SHIP align with the priority set forth by KCHD, including “increasing behavioral health literacy and decrease stigma,” “improve the collection, utilization, and sharing of behavioral health-related data in Illinois,” and “build upon and improve local system integration” (SHIP-FINAL, 2021, p. 39).

Healthy People 2030 also seeks to increase the proportion of the population, in general, with mental health problems who access and engage treatment. KCHD will utilize strategies to promote mental health awareness for Kendall County residents at large, with the desire to increase engagement and awareness in those who are the most vulnerable. One area that is likely a barrier to access to care is language and cultural norms. Healthy People 2030 lists “Language and Literacy” as key issues in the Education Access and Quality Domain (People 2030, H., Language and Literacy). Within exploring this need, Healthy People 2030 cites the following regarding those who have English as their second language (ESL) compared to those who have English as their first language - those who are ESL “are more likely to have no usual source of care, report lower self-rate health, and report feeling sad most or all of the time (Ponce, et al).” Additionally, due to health care and literacy being connected, literacy and language can pose as a barrier to “health knowledge access, proper medication use, and utilization of preventive services (People 2030, H., Language and Literacy).” KCHD staff will work to reduce stigma and increase staff cultural competencies for increased ability to deliver inclusive services to all, including the most vulnerable, to increase mental health support within the community.

Further regarding socio-economic duress and accessing assets and benefits is the barrier to transportation. Syed, Gerber, and Sharp discuss the relationship to health care access and transportation including rescheduled or missed appointments, delayed care, and difficulties with consistent medication usage (Syed, Gerber, Sharp, 2013). Public transportation in Kendall County is limited, if even available, and securing transportation through Kendall Area Transit (KAT) can be challenging with the high level of need in the community and prior authorization required. In the time of COVID and adaptability of KCHD, telephonic and telehealth services have become more widely utilized and accepted. However, in order to address those in the community, provide education, and bridge the ever looming gap of disparities, it will be important to continue to engage and outreach the community, at large, off-site and in creative ways to protect the individual’s information and decrease duress and barriers and increase support of both mental health and socio-economic assets.

**RISK FACTORS, DIRECT CONTRIBUTING FACTORS, INDIRECT CONTRIBUTING FACTORS**

Drawing on the Health Problem Analysis Worksheet below, KCHD concentrated on what may be the risk, direct contributing and indirect contributing factors to the health problem of connecting our communities most vulnerable to assets that reduce socio-economic duress and support mental health. Three significant risk factors associated with this health problem were established, they being selected as stigma and misinformation, infrastructure, and economic instability.

When contemplating the first risk factor of stigma and misinformation, four direct contributing factors emerged; social media, cultural traditions and societal norms, a decline in trust with institutions, and language barriers. Indirect contributing factors associated with social media included specious journalism, unreliable sources and influencers, and tribalism. Considerations to the direct contributing factor of cultural traditions and societal norms include indirect contributing factors such as religion, gender and sexuality norms, and generational beliefs. The third direct contributing factor, language barriers, brought attention to three indirect
factors; the Hispanic and Asian populations on the rise, and a lack of foreign language speaking professionals in the field of mental health and social work/services.

Direct contributing factors were discussed as having an impact on the second of three risk factors, infrastructure. They include staff shortages, lack of transportation, and a lack of facilities. Indirect contributing factors that may advance a lack of infrastructure are staff burnout, not enough professionals in the industry of community based social services, and competitive wages. Indirect factors pertinent to a lack of transportation is the lack of public transportation, rural residents may be more isolated, and the rapidly growing population of Kendall County. Indirect factors associated with the lack of facilities are the population growth and the lack of a hospital in Kendall County.

Reflecting on the third risk factor of economic instability, direct contributing factors include employment insecurity, housing instability, and transportation. Indirect contributing factors that fall under employment insecurity include lack of health coverage, inability to afford care, and a lack of living wage jobs in the area. The indirect contributing factors associated with housing instability are lack of affordable housing, the high foreclosure rate in Kendall County, and the high eviction rate. Transportation became the final direct contributing factor associated with the risk factor of economic instability. Assigned as indirect factors were the lack of public transportation, rural residents being more isolated and the rising cost of gas for vehicles.

**MEASURABLE OUTCOME OBJECTIVE**

- By 2026, outreach to 100% of community residents and partners, with whom we engage, to address the need for greater mental health awareness and support and to decrease socio-economic duress regarding our community’s most vulnerable.

**MEASURABLE IMPACT OBJECTIVE**

- By 2026, increase the number of outreach settings, to a minimum of three (3) underserved towns, beyond the building of the Kendall County Health Department to allow people closer access to services.
- By 2026, increase educational information access throughout the community by conducting a minimum of four (4) podcasts in both English and Spanish and a minimum of three (3) community presentations or events about services at the health department related to socio-economic and mental health services.
- By 2026, annually cultivate a minimum of one (1) new and/or strengthen a minimum of one (1) existing community partnership, dedicated to helping promote and address the need for socio-economic and/or mental health support.

**PROVEN INTERVENTION STRATEGY**

KCHD will endeavor to connect our communities most vulnerable to assets that reduce financial instability and support mental health through a combination of extensive community engagement, seamless care coordination, and the delivery of person-based services.

KCHD possesses a great deal of experience in each of the aforementioned processes, including the delivery of person-based services using a people-centered approach to care.

Community engagement will be performed through traditional public outreach and through the use of technology. Under public outreach, three underserved towns beyond the building of the Kendall County Health Department. Outreach settings will become available to have a more convenient setting for customers who may not have access to reliable transportation. The proposed settings will be located in Plano, Newark, and Gardner Illinois. Staff will be present at these locations as well as other service partners including The Northern Illinois Food Bank, Senior Services, and the Veterans Assistance Commission. KCHD will provide a number of presentations through various forms to community members to raise awareness of, promote, and educate access to services which address mental health, substance abuse, and financial instability. These various platforms will include podcasts, community presentations, and a summit. Additionally, with consideration to the use of technology, KCHD will leverage the 24/7
accessibility of the internet to prepare, provide and promote community-wide resources for mental health and financial stability-related information and related community resources. KCHD’s local public health system partners will be encouraged to inform and/or contribute to this community-wide offering of information. The availability of and access to this information will be actively promoted; the information routinely updated, and also communicated through social media messages (KCHD’s Facebook and Twitter), and KCHD’s quarterly electronic newsletter made available to KCHD’s local public health system partners and the Kendall County population as a whole.

The Kendall County Domestic Violence Response Team (DVRT) was created in January of 2020. The team consists of the Kendall County State's Attorney’s Office who presents the domestic violence case in criminal court, the Kendall County Sheriff’s Office who investigates complaints to inform the courts during case prosecution, Mutual Ground who provides support to the victims and the Kendall County Health Department who provides community resources to victims. KCHD will be adding more staff to assist with the referrals that come in through the DVRT. Additionally, KCHD has several partnerships with local police departments providing Crisis Intervention Team (CIT) work to those in need within the community. Through CIT, clinicians reach out to those who have had police contact due to a mental health or substance use concern and may need wrap-around services including counseling, financial resources, and referrals.

As such partnerships are vital to the engagement of the community at large and those who are most vulnerable, KCHD will cultivate and/or strengthen community partnerships, dedicated to helping promote and address the need for socio-economic and/or mental health support. KCHD’s efforts to engage and educate the community and providers, is intended to lead our communities most vulnerable to community supports and services capable of addressing their needs as they relate to mental health and financial instability. KCHD is one of Kendall County’s leading providers of these services.

In an effort to increase the KCHD workforce, KCHD will develop partnerships with the local universities to welcome interns to participate in KCHD activities. Community Actions services will participate in the Illinois Public Health Associations Academia meetings to engage in recruitment of interns as well as Aurora University’s School Community Resource Collaborative meetings. KCHD will endeavor to have representation on the National Alliance on Mental Illness Kane, DeKalb and Kendall Counties board to further deliver the message of holistic health and further increase provisions of resources to those in need.

Mental health is an integral part of health; indeed, there is no health without mental health (World Health Organization, 2021). KCHD will endeavor to raise awareness of mental health among both Kendall County’s population, and our local public health systems partners – in particular, our local health care and provider professionals. In an effort to educate and wrap around needed services around our most vulnerable members of our community, KCHD will create and provide to all customers seeking KCHD socioeconomic supports, information describing what mental health is; how to recognize mental health issues and illness; and where to receive help. This information will serve more than the possible needs of the direct recipients of this information. There may very well be a family member, friend or acquaintance of the recipients of this information, in need of mental health supports. Our information will be designed to be easily shared.

Concurrently, KCHD will strive to identify possible socio-economic duress among those seeking mental health treatment and supports, for all, but with an emphasis on our most vulnerable population. In a holistic effort to educate and wrap needed services around our most vulnerable, KCHD will create and provide to all mental health clients, through KCHD mental health treatment and supports, information describing the risk factors leading to socio-economic duress (also described as financial instability and economic insecurity), and more importantly, protective factors intended to secure and maintain one’s financial stability and economic security. This information will serve more than the possible needs of the direct recipients of this information. Again, there may be a family member, friend or acquaintance of the recipients of this information, in need of socioeconomic supports. This information also will be designed to be easily shared by the recipient with others.

KCHD will track and measure the number of participants around which the aforementioned services have been wrapped. Additionally, KCHD will measure the impact that these services have had on our participants’ mental
health (documented in KCHD’s psychosocial assessments), and financial stability and economic security (documented in KCHD’s Single Tracking and Reporting System).

KCHD will serve our communities most vulnerable in a manner that builds trust and addresses their needs in culturally competent, dignified and holistic ways. Participants will be encouraged and enabled to collaborate with KCHD in identifying and addressing the best approaches to meeting their individual mental health and socioeconomic needs. Participants will be informed and involved in decision-making, and will have choices. They will be invested and active participants in achieving their individual needs. Combined, these strategies will serve to minimize if not prevent poor mental health and financial instability among those in need representing the community’s most vulnerable.
HEALTH PROBLEM ANALYSIS WORKSHEET

DIRECT CONTRIBUTING FACTORS

- Social Media
- Cultural Traditions and Social Norms
- Decline in Trust in Institutions
- Language Barriers

RISK FACTORS

- Stigma and Misinformation

INFRASTRUCTURE

- Lack of Access to Care
- Transportation
- Lack of Facilities
- Food Insecurity
- Employment Insecurity
- Housing Instability
- Transportation

ECONOMIC INSTABILITY

- Limited Public Transportation
- Rural Residents More Isolated
- Population Boom
- Population Boom
- No Hospital in County
- Can’t Afford Healthy Foods
- Lack of Fresh Markets
- Lack of Nutrition Education
- Lack of Health Coverage
- Unable to Afford Care
- Lack of Living Wage Jobs
- High Foreclosure Rate
- Lack of Affordable Housing
- High Eviction Rate
- Limited Public Transportation
- Rural Residents More Isolated
- Gas Prices on the Rise

INDIRECT CONTRIBUTING FACTORS

- Specious Journalism
- Unreliable Sources and Influencers
- Tribalism
- Religion
- Gender/Sexuality Norms
- Generational Beliefs
- Racism/Discrimination
- Financial Agendas
- Political Marginalization
- Hispanic Population on the Rise
- Asian Population on the Rise
- Lack of Foreign Language Speaking Professionals in the Field
- Staff Burn Out
- Not Enough Professionals in the Industry
- Competitive Wages
- Limited Public Transportation
- Rural Residents More Isolated
- Population Boom
- Population Boom
- No Hospital in County
- Can’t Afford Healthy Foods
- Lack of Fresh Markets
- Lack of Nutrition Education
- Lack of Health Coverage
- Unable to Afford Care
- Lack of Living Wage Jobs
- High Foreclosure Rate
- Lack of Affordable Housing
- High Eviction Rate
- Limited Public Transportation
- Rural Residents More Isolated
- Gas Prices on the Rise
## Community Health Plan Worksheet

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<th>Health Problem:</th>
<th>Outcome Objective(s)</th>
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<td>Lack of access to care with mental health services and socio-economic well-being supports.</td>
<td>By 2026, outreach to 100% of community residents and partners, with whom we engage, to address the need for greater mental health awareness and support and to decrease socio-economic duress regarding our community’s most vulnerable.</td>
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<th>Risk Factor(s) (May be Many)</th>
<th>Impact Objective(s):</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Stigma and misinformation</td>
<td>By 2026, increase the number of outreach settings, to a minimum of three (3) underserved towns, beyond the building of the Kendall County Health Department to allow people closer access to services.</td>
</tr>
<tr>
<td>• Infrastructure</td>
<td>By 2026, increase educational information access throughout the community by conducting a minimum of four (4) podcasts in both English and Spanish, a minimum of three (3) community presentations or events about services at the health department related to socio-economic and mental health services.</td>
</tr>
<tr>
<td>• Economic Instability</td>
<td>By 2026, annually cultivate a minimum of one (1) new and/or strengthen a minimum of one (1) existing community partnership, dedicated to helping promote and address the need for socio-economic and/or mental health support.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Contributing Factors (Direct/Indirect; May be Many)</th>
<th>Proven Intervention Strategy(ies)</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ]</td>
<td></td>
</tr>
<tr>
<td>Social media</td>
<td>• KCHD will implement a combination of extensive community engagement, seamless care coordination, and the delivery of person-based services using the person-centered care approach.</td>
</tr>
<tr>
<td>Specious journalism</td>
<td>• Three outreach settings will become available to underserved towns beyond the building of the Kendall County Health Department. These outreach settings will provide a more convenient setting for customers who may not have access to reliable transportation.</td>
</tr>
<tr>
<td>Unreliable sources and influencers</td>
<td>• KCHD will provide a number of presentations through various forms to community members to raise awareness of, promote, and educate access to services which address mental health, substance abuse, and financial instability. These various platforms will include podcasts, community presentations, and a summit.</td>
</tr>
<tr>
<td>Tribalism</td>
<td>• Develop partnerships with local universities to welcome interns to participate within the KCHD workforce.</td>
</tr>
<tr>
<td>• Cultural traditions and societal norms</td>
<td>• Provide person-centered care, in a manner that builds trust and addresses needs in culturally competent, dignified and holistic ways. Participants will be encouraged and enabled to collaborate with KCHD in identifying and addressing the best approaches to meeting their individual mental health and socioeconomic needs.</td>
</tr>
<tr>
<td>Religion</td>
<td>• Identification and provision of wrap-around services</td>
</tr>
<tr>
<td>Gender/sexuality norms</td>
<td>Food insecurity</td>
</tr>
<tr>
<td>Generational beliefs</td>
<td>Can’t afford healthy foods</td>
</tr>
<tr>
<td>• Decline in trust in institutions</td>
<td>Lack of fresh markets</td>
</tr>
<tr>
<td>Racism/Discrimination</td>
<td>Lack of nutrition education</td>
</tr>
<tr>
<td>Financial agendas</td>
<td>• Employment insecurity</td>
</tr>
<tr>
<td>Political marginalization</td>
<td>Lack of health coverage</td>
</tr>
<tr>
<td>• Language barriers</td>
<td>Unable to afford care</td>
</tr>
<tr>
<td>• Hispanic population on the rise</td>
<td>Lack of living wage jobs</td>
</tr>
<tr>
<td>Asian population on the rise</td>
<td>• Housing instability</td>
</tr>
<tr>
<td>• Lack of foreign language speaking professionals in the field</td>
<td>-Lack of affordable housing</td>
</tr>
<tr>
<td>• Staff shortages</td>
<td>-High foreclosure rate</td>
</tr>
<tr>
<td>• Staff burn out</td>
<td>• Transportation</td>
</tr>
<tr>
<td>• Not enough professionals in the industry</td>
<td>-High eviction rate</td>
</tr>
<tr>
<td>• Transportation</td>
<td>Limited public transportation</td>
</tr>
<tr>
<td>• Competitive wages</td>
<td>Rural residents more isolated</td>
</tr>
<tr>
<td>• Staff burn out</td>
<td>Population boom</td>
</tr>
<tr>
<td>• Not enough professionals in the industry</td>
<td>Gas prices on the rise</td>
</tr>
<tr>
<td>• Transportation</td>
<td>Lack of facilities</td>
</tr>
<tr>
<td>• Competitive wages</td>
<td>Population boom</td>
</tr>
<tr>
<td>• Transportation</td>
<td>No hospital in county</td>
</tr>
<tr>
<td>• Staff burn out</td>
<td>Food insecurity</td>
</tr>
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<tr>
<td>• Competitive wages</td>
<td>-Lack of affordable housing</td>
</tr>
<tr>
<td>• Transportation</td>
<td>-High foreclosure rate</td>
</tr>
<tr>
<td>• Competitive wages</td>
<td>-High eviction rate</td>
</tr>
</tbody>
</table>

**RESOURCES AVAILABLE (GOVERNMENT & NON-GOVERNMENTAL)**

**BARRIERS**
DESCRIPTION OF HEALTH PROBLEMS, RISK FACTORS AND CONTRIBUTING FACTORS (INCLUDING HIGH RISK POPULATIONS, AND CURRENT AND PROJECTED STATISTICAL TRENDS):

KCHD and its community partners have identified the health problem of lack of access to mental health and socio-economic supports in the population. Risk factors include stigma and misinformation, infrastructure, and economic instability. While there are many identified direct contributing factors, significant areas include social media, cultural traditions and societal norms, a decline in trust in institutions, language barriers, staff shortages, transportation, lack of facilities, food insecurity, employment insecurity, and housing instability. Person’s in the community that are considered higher risk at experiencing a lack of access to mental health and socio-economic supports are those experiencing a high exposure to poverty, transportation/language barriers, residential isolation, and may have mental/physical disabilities.

CORRECTIVE ACTIONS TO REDUCE THE LEVEL OF THE INDIRECT CONTRIBUTING FACTORS:
• The creation and dissemination of information describing what mental health is; how to recognize mental health issues and illness; and where to receive help.
• The creation and dissemination of information describing the risk factors leading to socio-economic duress (also described as financial instability and economic insecurity), and more importantly, protective factors intended to secure and maintain one's financial stability and economic security.
• Provision of mental health and socio-economic supports facilitated for those considered at highest risk of experiencing a lack of access to mental health and socio-economic supports.

**CONTRIBUTING FACTORS (DIRECT/INDIRECT; MAY BE MANY)**

<table>
<thead>
<tr>
<th>Direct</th>
<th>Indirect</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social media</td>
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</tr>
<tr>
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<tr>
<td></td>
<td>Lack of affordable housing</td>
</tr>
</tbody>
</table>

|                      | High foreclosure rate          |
|                      | High eviction rate             |
|                      | Gas prices on the rise         |

**PROPOSED COMMUNITY ORGANIZATION(S) TO PROVIDE AND COORDINATE THE ACTIVITIES:**
| • Kendall County Health Department Mental Health and Community Action Divisions | • Kendall County youth organizations |
| • Senior Services Associates | • Local universities |
| • Oswego Senior Center | • IPHA academic Committee |
| • Kendall Area Transit | • Will County Center for Community Concerns |
| • Local Park Districts | • Behavioral Health and Community Action Advisory Board members |
| • Local Schools | • Kendall County Housing Authority |
| • Kendall County Senior Providers | • Local food pantries |
| • Kendall and Grundy Interagency Council | • Catholic Charities Diocese of Joliet Daybreak Center |
| • Rush Copley | • Local libraries |
| • Workforce Development | • Local police departments |
| • Churches | • Kendall County States Attorney |
| • YMCA | • Mutual Ground |
| • Kendall and Grundy County VAC | • Prairie State Legal Services |

**EVALUATION PLAN TO MEASURE PROGRESS TOWARD REACHING OBJECTIVES:**

- Number of presentations made to community members at local facilities, centers, clubs and social gatherings, to raise awareness of, promote, and educate access to services which address mental health and substance abuse, social isolation, and financial instability.
- Number of outreach settings utilized
- Number of successful internship programs completed
- Increased number of mental health and socio-economic supports facilitated. This will be measured and tracked using KCHD’s Footholds relational database, and Single Tracking and Reporting System (STARS) data base.
Youth Programming
Kendall County and Grundy County continue to grow and change. We recognize the need to reach out to the youth population. Our Mental Health Services staff are involved in community outreach to courts, schools, hospitals, and other referral sources. Most of the increases in referrals in intake this past year were for youth under age eighteen for investigative alcohol/drug evaluations. KCHD goal is to continue to assist customers in lessening or preventing acute family crisis, reducing social isolation and substance abuse issues, and assist youth in improving daily functioning and progress toward independence.

MENTAL HEALTH SERVICES PROGRAM DESCRIPTION
Mental Health Services provides comprehensive and holistic services designed to meet diverse needs of the child, adolescent, and adult populations. Services are client focused, recovery driven, and vary in intensity depending on individual need. KCHD takes an integrated approach to all service endeavors, so that individuals with multiple diagnostic features may be served. Services include, but are not limited to, individual, group, and family counseling, as well as psycho education. KCHD strives to deliver preventative and emergency crisis services designed for the assessment and immediate stabilization of acute symptoms of mental illness, alcohol and other drug abuse, and emotional distress or in response to acts of domestic violence or abuse/neglect. These services are designed to provide thorough assessment, intervention, and closure strategies to suicidal and crisis episodes. Prevention and diversion services deliver proactive services designed to reduce individual, family, and environmental risk factors, increase resiliency, enhance protective factors, and achieve individual and comprehensive community wellness.

• COUNSELING SERVICES

We provide individual, family, group, and marital/couples counseling services to promote growth, development, and optimal functioning.

• SCHOOL BASED COUNSELING SERVICES

We offer Kendall County schools the option of having a Mental Health and Substance Abuse Treatment Clinician present in the school for a two-hour time period one day per week. These services are offered to Kendall County public and private schools as a way to promote access to treatment and help to remove any potential barriers from the treatment process.

• PSYCHOLOGICAL TESTING

Psychological testing services are available for diagnostic clarification and for treatment support. Psychological testing is also available for fitness to stand trial, pre-employment, and fitness for duty.

• PSYCHIATRIC TREATMENT

Psychiatric treatment services are available, when indicated, to support treatment and wellbeing.

• SUBSTANCE ABUSE TREATMENT

We provide comprehensive outpatient services for the adolescent and adult individual addressing substance misuse problems. Individuals are supported as they learn to live their lives without the harmful consequences of substance use.

• ANGER EVALUATIONS

We provide comprehensive anger evaluations to provide insight and, if necessary, treatment recommendations when there is a pattern of unhealthy emotional coping.
• FITNESS RESTORATION

Court ordered education for individuals who have been found unfit to stand trial. Services are provided to increase mental stability, understanding of court/legal process, and to be an effective participant during trial.

• TRAUMA FOCUSED SERVICES

Staff have also been increasing their knowledge of and focus on the provision of trauma-induced stress and related treatments; a cornerstone to fostering community resilience. Mental Health Services has expanded trauma focused questions on the psychosocial assessment to ensure that those individuals who have experienced or witnessed trauma have specific interventions that are both effective and meaningful.

• CRISIS & SUICIDE INTERVENTION SERVICES

Services are provided on Kendall County campus sites to promote a low rumination plan, amelioration of psychiatric distress, meaningful support, and follow-up services. Services are available in English and Spanish and 24/7 support is available through the emergency crisis line.

• YOUTH BEHAVIORAL HEALTH COALITION

We will launch a community based coalition focused on mental health, substance abuse, and the overall wellbeing of youth and families in Kendall County. This coalition will be comprised of diverse community partners including schools, youth serving organizations, and health care providers. The intent of this coalition will be to share resources for comprehensive mental health wellbeing and to identify any trends or gaps in service. This coalition will also help to promote connection between Kendall County school social workers and counselors, who will no longer be working together in a county wide collaborative manner due to the dissolving of the Kendall County Special Education Cooperative.

• FORENSIC INTERVIEWING

We work closely with the Kendall County Child Advocacy Center in serving and supporting victims of child abuse in a sensitive, respectful manner. Our skilled forensic professional interviewers perform interviews of child-victims in a neutral, non-suggestive atmosphere, following a uniformed protocol. Post-interview counseling services are made accessible to each child and family.

• TRANSITIONS PROGRAM

The Transitions Program assists clients in maintaining their highest level of functioning, health, and independence. We provide psychosocial education/intervention, care coordination, senior counseling, and family system support. We not only work to foster a sense of well-being to survive and thrive, but also develop increased well-being and social connectedness. This is often a challenge for seniors experiencing economic stress, isolation, or lacking information on resources and opportunities that address such concerns. We raise individual and community awareness and promote access to services addressing mental health and substance abuse, social isolation, and financial instability. To foster and inspire our seniors' highest level of functioning, we advocate local resources improving one’s ability to interact with others, encourage healthy habits, and provide one-on-one care management.
Outcomes
As part of the Community Action Plan process, hawse have reviewed and identified appropriate indicators based off the current needs assessment. KGCA has developed projections/goals and strategies based on these indicators.

**CSBG WORK PROGRAM DETAIL SHEET 2023**

**Kendall Grundy Community Action**

<table>
<thead>
<tr>
<th>Program Category</th>
<th>Education and Cognitive Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title</td>
<td>02.061 Educational Financial Aid Assistance (1)</td>
</tr>
</tbody>
</table>

**Summary**

Kendall County Health Department Community Action Services Unit Scholarship program will provide scholarships for Community Services Block Grant (8) eligible persons for post-secondary education or occupational training.

**Objective**

Kendall County Health Department Community Action Services Unit will facilitate the scholarship program made available with Community Services Block Grant 5% discretionary funding. The scholarship program is designed to provide financial assistance to low-income and disadvantaged persons of high academic attainment. Kendall County Health Department will assure that:

1. The scholarship provides formal education or occupational training at an accredited Illinois institution to Community Services Block Grant eligible clients with particular consideration given to fields of study in high technology areas or other growth occupations.
2. The education and training made possible through the scholarship includes either general education to achieve functional literacy skills, short-term training (2 years or less) in growth occupation skills, or general post-secondary education. The agency should assist recipients of post-secondary scholarships in obtaining other educational grants and aid in order to complete their education.
3. Documented fairness exists in the scholarship recipient selection process.
4. The scholarship program generates documented publicity for the participating agency, the Community Services Block...
Grant program and the Department. For example, all program notices and publicity releases will include the names of Kendall County Health Department and the Department of Commerce & Economic Opportunity, and reference the Community Services Block Grant funding source.

5. Where occupational training is involved, there is formal coordination with the local Workforce Investment Opportunity Act program.

Quarterly Goals:
First = 0
Second = 0
Third = 8
Fourth = 0
Total = 8
The range of the scholarships for each student will be between $250-$1250

Agency Activities

Kendall County Health Department Community Action Services Unit assures the following:
01. The scholarship will provide formal education or occupational training at an accredited Illinois institution to CSBG eligible clients. Preference will be given to the fields of study in high technology areas or other growth occupations.
02. A CSBG file will be maintained which will include 30-day income, proof of household members and proof of Kendall or Grundy County residency.
03. The education and training made possible through the scholarship includes either general education to achieve functional literacy skills, short-term training (2 years or less) in growth occupation skills, or general post-secondary education.
04. Assistance will be provided to recipients of the scholarships in obtaining other education grants and aid in order to complete their education.
05. The selection process: The selection committee will consist of CSBG Advisory Board Members and Kendall County Health Department Community Action Services Staff. Applicants will be graded on their scholastic achievement, personal essay content, letters of recommendation, honors accomplishments, exceptional life circumstances and other community activities. The total score from each reviewer will be averaged to a final score.
06. Document fairness exists in the scholarship recipient selection process.
07. The scholarship program generates documented outreach and publicity for the participating agency, the CSBG program and DCEO. All publicity releases will include the names of the local agency, DCEO and reference that funds are CSBG.
08. Where occupational training is involved, there is formal coordination with the local workNet/WIOA program.
09. All scholarships will be distributed by the end of the second or third quarter
10. Each scholarship recipient will submit a copy of their grades to document academic progress.
11. Each recipient will receive at least $250.00; higher amounts are dependent on applicant's final score.
12. Each recipient will be invited to attend a presentation at a CSBG Advisory Board meeting.

Customer Steps

1. The client will call or write Kendall County Health Department to obtain a scholarship application.
2. The client will complete application including all requested documentation and submit it to Kendall County Health Department.
3. The client will attend an interview with Kendall County Health Department scholarship committee.
4. If selected, the client will provide Community Services Block Grant required information and proof of enrollment.
5. Recipients of the scholarship will attend an awards ceremony.

Method Of Tracking

Kendall County Health Department will retain client's applications and copy of payment to school or training center. The Health Department will also maintain case notes and contact the schools to verify enrollment.

Client Assistance

<table>
<thead>
<tr>
<th>Special</th>
</tr>
</thead>
</table>

| $ 8,500.00 | $ 0.00 |

Other Funding Sources

There are no other funding sources.

Modification Changes
<table>
<thead>
<tr>
<th></th>
<th>Target Number of Persons Served</th>
<th>Target Number of Successful Outcomes</th>
<th>Completed Serviced YTD</th>
<th>Completed Outcomes YTD</th>
</tr>
</thead>
<tbody>
<tr>
<td>S-02-28 Scholarships</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>02.11 Makes progress to post secondary degree</td>
<td></td>
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</tr>
</tbody>
</table>
Kendall Grundy Community Action

Program Category: Services Supporting Multiple Domains

Title: 07.011 Case Management (1)

Summary

The Case Management program will provide general assistance for crisis intervention. Assistance includes counseling, referrals, provision of food, transportation, shelter, rent, mortgage, utilities, and medical assistance.

Objective

The Case Management program will provide financial assistance for crisis intervention to meet shelter, medical, dental, and utility, and transportation needs.

1. Salvation Army funding provides assistance for food, health care, lodging, rent, transportation, and utilities. Also, the Health Department will purchase certificates for items at local grocery stores. The objective of this program is to provide services to a customer that is in crisis so that they can be relieved of crisis and reach the next level of self-stability.

Quarterly Goals:
First = 7
Second = 6
Third = 6
Fourth = 6
Total = 23

Agency Activities
1. Staff will coordinate with other service providers, community groups, and government agencies to provide resources for general assistance for crisis intervention.

2. Staff will provide direct monetary assistance for solutions to crisis situation. On all mortgage applications, property ownership will be verified. For rental application, landlords will fill out a verification sheet.

3. Staff will fill medical prescriptions through local pharmacies. Medical, dental, and optical services will be coordinated with local providers as needed.

4. All other misc needs, assistance will be paid to the vendors. Example: We will pay USPS directly for PO BOX's for homeless individuals if that is determined the need. Checks will be made in person for the customer at the local DMV.

5. Staff will create and maintain a file on each household's emergency services showing itemized record of the amount, purpose, date, and to whom dollars were dispersed. File will also indicate any other programmatic services provided as well as any referrals.

6. Staff will refer clients to additional services as needed.

7. Staff will continue to follow up with customers from beginning of crisis to end of crisis as well as 90 day follows ups.

Customer Steps

1. The client will complete an application.

2. The client will meet with staff and provide all requested documentation.

3. If approved, the client will cooperate with Kendall County Health Department to verify amount to payment vendor for services.

Method Of Tracking

Kendall County Health Department will retain client's application of services and copy of payment to vendors. Follow up with client will occur after 90 days of service and case notes will be put on record.

Client Assistance

<table>
<thead>
<tr>
<th>Special</th>
</tr>
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<tbody>
<tr>
<td>$ 15,000.00</td>
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### Other Funding Sources

| N/A |

### Modification Changes

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<th>Target Number of Successful Outcomes</th>
<th>Completed Serviced YTD</th>
<th>Completed Outcomes YTD</th>
</tr>
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<tbody>
<tr>
<td><strong>S-04-03 Rent Payments</strong></td>
<td></td>
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<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>04.02.A Maintained safe and affordable housing 90 days</td>
<td>5</td>
<td></td>
<td></td>
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<tr>
<td><strong>S-04-05 Mortgage Payments</strong></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>04.02.A Maintained safe and affordable housing 90 days</td>
<td>5</td>
<td></td>
<td></td>
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<tr>
<td><strong>S-05-34 Nutrition</strong></td>
<td></td>
<td></td>
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<tr>
<td>(Gift card for food preparation, paper goods, and/or home supplies also used for incentives)</td>
<td>5</td>
<td></td>
<td></td>
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<tr>
<td>05.02.B Improved physical health Families</td>
<td>5</td>
<td></td>
<td></td>
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<tr>
<td><strong>S-07-04 Transportation Services</strong></td>
<td>5</td>
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</tr>
<tr>
<td>(bus passes, bus transport, support for auto)</td>
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</tr>
<tr>
<td>ID</td>
<td>Description</td>
<td>Value</td>
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<td>--------------------------------------------------</td>
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<td>05.02</td>
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<td>Individual</td>
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<tr>
<td>S-07-14</td>
<td>Emergency Clothing Assistance</td>
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<td>03.01</td>
<td>Meet basic needs for 90 days</td>
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</table>
Program Category: Services Supporting Multiple Domains

Title: 07.031 Referrals (1)

Summary:
Kendall County Health Department will provide information to resources through an outreach, information, and referral service to Community Services Block Grant households as necessary by phone or walk-in consultation.

Objective:
Kendall County Health Department will field all inquirers about available services and make referrals to community programs to provide an outreach, information, and referral unit. The Health Department will refer Community Services Block Grant eligible households to needed resources through Kendall County Health Department Community Outreach, Information, and Referral Unit.

Quarterly Goals:
First = 500
Second = 250
Third = 250
Fourth = 500
Total = 1500
1. Staff will complete an intake form for each household seeking services to determine basic household demographic information, preliminary eligibility, and make preliminary assessment of need.
2. Staff shall maintain promotional pamphlets describing the services of Kendall County Health Department and distributed throughout services area.
3. Staff will participate in community networking meeting, fairs, and seek other opportunities to exchange information on available services.
4. Kendall County Health Department will provide ongoing training for staff and keep staff informed on most current services and available services.
5. Kendall County Health Department will conduct a planning survey regarding the needs and availability of services for the residents of Kendall and Grundy counties.
6. All referrals will be tracked on the back of the client’s intake form to substantiate services received.
7. All single parent families not currently collecting child support will be referred to the child support office for possible services.
8. Staff shall establish and use a system of collecting data for appropriate referral and to identify gaps in services.
9. Staff shall offer advocacy on behalf of an individual or group of individuals when needed services are not being adequately provided by an organization within the community's service delivery system.

Customer Steps

1. The client will call or visit Kendall County Health Department to inquire about available community resources.

Method Of Tracking

Kendall County Health Department will retain client's applications.

Client Assistance  Special

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>$ 0.00</td>
<td>$ 0.00</td>
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Other Funding Sources
There are no other funding sources.

Modification Changes

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<thead>
<tr>
<th>Target Number of Persons Served</th>
<th>Target Number of Successful Outcomes</th>
<th>Completed Serviced YTD</th>
<th>Completed Outcomes YTD</th>
</tr>
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<tr>
<td>S-07-03 Referrals</td>
<td>1500</td>
<td></td>
<td></td>
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<tr>
<td>06.01.C Enhanced ability to engage</td>
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<td></td>
<td>1500</td>
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Kendall Grundy Community Action

Program Category
Services Supporting Multiple Domains

Title
07.041 Transportation Services (1)

Summary
Drive to Success program will provide Community Services Block Grant eligible individuals or households with assistance with transportation costs to maintain employment.

Objective
Drive to Success program is designed to provide working clients with affordable and working transportation. Drive to Success will cover the transportation needs of clients such as repairs on vehicle, insurance, license, and title assistance. The amount that a customer can receive under this program will average to about $1000 with a maximum of $2500. The timeframe would be 2 customers per quarter for the year.

Quarterly Goals:
First = 2
Second = 2
Third = 2
Fourth = 2
Total = 8

Agency Activities
Drive to Success program is designed to provide working clients with affordable and working transportation. Drive to Success will cover the transportation needs of clients such as repairs on vehicle, insurance, license, and title assistance. The amount that a customer can receive under this program will average to about $1000 with a maximum of $2500. The timeframe would be 2 customers per quarter for the year.

Quarterly Goals:
First = 2
Second = 2
Third = 2
Fourth = 2
Total = 8

Customer Steps

1. Client will complete application including all requested documentation and submit to Kendall County Health Department.
2. The client if eligible for Drive to Success will provide Kendall County Health Department with estimate of repair cost and copy of car insurance.
3. If authorized for repairs, it is the client’s responsibility to arrange time and date to drop off the vehicle to vendor for repairs.
4. Once repair is completed, client is required to contact Kendall County Health Department staff of completion of repairs and schedule the pickup of the vehicle from the auto shop.
5. The client will pick up car at Kendall County Health Department if receiving a donated car.

Method Of Tracking

CAA will retain the DTS client's application and all paid bills from vendors.

Client Assistance          Special

$ 13,305.00  $ 0.00
### Modification Changes

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<tr>
<th>Description</th>
<th>Target Number of Persons Served</th>
<th>Target Number of Successful Outcomes</th>
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<tr>
<td>S-07-042 Transportation Services (Auto Repair)</td>
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<td></td>
<td></td>
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<tr>
<td>03.01 Meet basic needs for 90 days</td>
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<td>8</td>
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</table>
Kendall Grundy Community Action

Program Category
Agency Capacity Building

Title
09.011 Agency Capacity Building Activities (1)

Summary
Kendall County Health Department will increase capacity to achieve results.

Objective
Kendall County Health Department will participate in activities that increase the agency's capacity such as Annual Reports, Community Needs Assessment, Grant Accountability and Transparency Act, Results Oriented Management and Accountability, and Leadership/Management. Steve Curatti is our ROMA professional. We also will be performing more outreach if appropriate throughout our service area.

Agency Activities
Kendall County Health Department will request trainings during the 2023 program year as necessary. Some of the trainings will be provided by Illinois Association of Community Action Agencies and Department of Commerce & Economic Opportunity mandated by Community Services Block Grant. Staff will be present at two more sites in Grundy County to provide services and to increase Grundy County residents participation in our programs.

Customer Steps
Method Of Tracking

Employees will provide documents from trainings.

Client Assistance | Special

| $ 0.00 | $ 7,500.00 |

Other Funding Sources

There are no other funding sources.

Modification Changes

<table>
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<tr>
<th>Target Number of Persons Served</th>
<th>Target Number of Successful Outcomes</th>
<th>Completed Serviced YTD</th>
<th>Completed Outcomes YTD</th>
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<tr>
<td>S-09-03 Agency staff who completing certifications that increase agency capacity</td>
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<td></td>
<td></td>
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<tr>
<td>00.05 Nationally Certified ROMA Implementers</td>
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<td>7</td>
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ILLINOIS COMMUNITY ACTION AGENCIES
Needs Assessment Survey
(Community Stakeholders)

Illinois’s community action agencies are conducting a study of the needs of low-income people. Results from the study will be considered by Illinois’s community action agencies for planning, developing, and delivering agency activities, services, and initiatives.

INSTRUCTIONS:

Please answer each question by checking the appropriate box or boxes. If a question does not apply to you, please leave it blank. “Community” is defined as the neighborhood and/or city in which you live.

1. What county do you live in? ________________________________

2. What community stakeholder group do you belong to? select the one that best describes your group:
   - [ ] County government  [ ] educational institution  [ ] service organization  [ ] police  [ ] other
   - [ ] City government  [ ] health care provider  [ ] public/private housing  [ ] judicial
   - [ ] Board of Supervisors  [ ] faith based  [ ] neighborhood association  [ ] private business

3. Are there full-time living wage employment ($15 per hour or higher) opportunities available in your community?
   - [ ] there are an insufficient number of opportunities  [ ] there are a sufficient number of opportunities
   - [ ] there are an excessive number of opportunities  [ ] there are not any opportunities  [ ] unsure

4. Why do you believe people have problems getting or keeping a full-time living wage job? select all that apply:
   - [ ] jobs are not available  [ ] physical or mental disabilities  [ ] need better communication, people/customer job skills
   - [ ] language barriers  [ ] need better technical job skills  [ ] health issues  [ ] need child care
   - [ ] lack of education  [ ] transportation  [ ] substance abuse issues  [ ] other

5. Are child care programs (during the day, Monday through Friday) for low-income families available in your community?
   - [ ] there are an insufficient number available  [ ] there are a sufficient number available
   - [ ] there are an excessive number available  [ ] there are not any available  [ ] unsure

6. Are child care programs (evenings, nights, and weekends) for low-income families available in your community?
   - [ ] there are an insufficient number available  [ ] there are a sufficient number available
   - [ ] there are an excessive number available  [ ] there are not any available  [ ] unsure

7. Are pre-school programs (including Head Start programs) for low-income families available in your community?
   - [ ] there are an insufficient number available  [ ] there are a sufficient number available
   - [ ] there are an excessive number available  [ ] there are not any available  [ ] unsure

8. Are affordable child and youth (ages 5 to 17) activities or after school programs available in your community?
   - [ ] there are an insufficient number available  [ ] there are a sufficient number available
   - [ ] there are an excessive number available  [ ] there are not any available  [ ] unsure

9. In your community, in which areas do you believe youth (ages 12 to 17) need information, education, guidance, and/or assistance? select all that apply:
   - [ ] after school supervision  [ ] school attendance  [ ] birth control  [ ] affordable school/community activities
   - [ ] learning disabilities  [ ] behavior disorders  [ ] tutoring  [ ] monitoring/leadership/volunteering
   - [ ] finding employment  [ ] gang participation  [ ] obesity  [ ] sexually transmitted diseases
   - [ ] substance abuse/tobacco  [ ] teen parenting  [ ] mental health  [ ] physical health and dental issues  [ ] none apply

10. Are there adequate levels of non-medical emergency services available in your community? [ ] YES  [ ] NO  [ ] unsure

11. Are there a sufficient number of emergency shelters available in your community? [ ] YES  [ ] NO  [ ] unsure

12. Are there adequate levels of medical services available for low-income people in your community? [ ] YES  [ ] NO  [ ] unsure

13. Are there adequate levels of dental services available for low-income people in your community? [ ] YES  [ ] NO  [ ] unsure
14. Are there adequate levels of wellness (nutrition, exercise, etc.) programs available for low-income people in your community?  
☐ YES  ☐ NO  ☐ unsure

15. Are there adequate levels of public transportation options (cabs, taxis, buses, trolleys, etc.) available in your community?  
☐ YES  ☐ NO  ☐ unsure

16. Are the homes in your community in good repair?  ☐ most are  ☐ some are  ☐ few are  ☐ none are  ☐ unsure

17. Which of the following issues do you believe are the greatest challenges low-income families and individuals are currently facing? select all that apply:

☐ education  ☐ child care  ☐ living wage employment  ☐ mental health services
☐ job training  ☐ teen pregnancy  ☐ family/child abuse  ☐ medical care access
☐ housing  ☐ substance abuse  ☐ language barriers  ☐ dental care access
☐ budgeting  ☐ transportation  ☐ health food selection  ☐ health care costs
☐ parenting  ☐ family violence  ☐ special needs children  ☐ credit card debt  ☐ child support
☐ chronic illness  ☐ energy/utility costs  ☐ financial literacy/planning  ☐ legal issues/services  ☐ none apply

18. Which of the following areas do you believe low-income families and individuals need assistance with in order to achieve or maintain self-sufficiency? select all that apply:

☐ employment  ☐ mental health  ☐ substance abuse treatment  ☐ medical care
☐ job training  ☐ literacy  ☐ financial literacy/planning  ☐ family/child abuse
☐ housing  ☐ transportation  ☐ energy/utility costs  ☐ language barriers
☐ child care  ☐ legal issues/services  ☐ family planning  ☐ none apply

19. Which of the following areas do you believe the elderly (seniors) in your community need assistance with in order to remain in their home? select all that apply:

☐ housework  ☐ yard work/snow removal  ☐ home repairs  ☐ energy/utility costs
☐ managing medications  ☐ grocery shopping  ☐ preparing meals  ☐ laundry
☐ financial assistance  ☐ tax preparation/legal issues  ☐ access to transportation  ☐ none apply

20. Of the following, which of these do you believe low-income families and individuals need information, education, guidance, and/or assistance:

☐ checking and savings accounts ........................................ ☐ YES  ☐ NO  ☐ unsure
☐ credit card debt .......................................................... ☐ YES  ☐ NO  ☐ unsure
☐ credit repair ............................................................... ☐ YES  ☐ NO  ☐ unsure
☐ payday loans ............................................................. ☐ YES  ☐ NO  ☐ unsure
☐ car title loans (not a car purchase loan) ....................... ☐ YES  ☐ NO  ☐ unsure
☐ budgeting or money management issues .................... ☐ YES  ☐ NO  ☐ unsure
☐ filing tax returns (Earned Income Tax Credit) ............. ☐ YES  ☐ NO  ☐ unsure
☐ obtaining loans .......................................................... ☐ YES  ☐ NO  ☐ unsure
☐ property tax exemptions ............................................ ☐ YES  ☐ NO  ☐ unsure
☐ rent reimbursement claims ......................................... ☐ YES  ☐ NO  ☐ unsure
☐ energy/utility cost issues ............................................ ☐ YES  ☐ NO  ☐ unsure
☐ landlord/tenant issues .............................................. ☐ YES  ☐ NO  ☐ unsure

21. On a scale of 1 to 5 (1=poor/poorly, 3=adequate, and 5=excellent), please rate the following:

How would you rate your relationship with the community action agency in your community?  
☐ 1  ☐ 2  ☐ 3  ☐ 4  ☐ 5  ☐ no relationship

How well is the community action agency in your community meeting the needs of low-income families and individuals?  
☐ 1  ☐ 2  ☐ 3  ☐ 4  ☐ 5  ☐ unsure

22. What do you believe causes poverty? [please provide answer on separate sheet]

23. What community improvement initiative would you like your community to address? [please provide answer on separate sheet]

24. If you had $1,000,000 to solve a community issue, what would you solve? [please provide answer on separate sheet]

25. Any other comments? [please provide answer on separate sheet]
Needs Assessment Survey

Illinois’s community action agencies are conducting a study of the needs of low-income people. Results from the study will be considered by Illinois’s community action agencies for planning, developing, and delivering agency activities, services, and initiatives.

INSTRUCTIONS:

Please answer each question by checking the appropriate box or boxes. If a question does not apply to you, please leave it blank. “Community” is defined as the neighborhood and/or city in which you live.

1. What county do you live in? ______________________

2. What is your position with the community action agency? select all that apply:
   - [ ] board member
   - [ ] staff person
   - [ ] Head Start Policy Council
   - [ ] advisory committee
   - [ ] ____________

   2a. How many years have you served in this capacity?
       - [ ] 0-2
       - [ ] 2-5
       - [ ] 6-10
       - [ ] 11-15
       - [ ] 16-20
       - [ ] 21-25
       - [ ] 26-30
       - [ ] over 30

3. Are there full-time living wage employment opportunities available in your community?
   - [ ] there are many opportunities
   - [ ] there are some opportunities
   - [ ] there are few opportunities
   - [ ] there are not any opportunities
   - [ ] unsure

3a. Why do you believe people have problems getting or keeping a job? select all that apply:
   - [ ] jobs are not available
   - [ ] physical or mental disabilities
   - [ ] health issues
   - [ ] language barriers
   - [ ] need better technical job skills
   - [ ] substance abuse issues
   - [ ] lack of education
   - [ ] transportation
   - [ ] other
   - [ ] need child care
   - [ ] need better communication, people/customer job skills

4. Are there child care programs for low-income families available in your community?
   - [ ] there are many programs
   - [ ] there are some programs
   - [ ] there are few programs
   - [ ] there are not any programs
   - [ ] unsure

5. Are pre-school programs (including Head Start programs) for low-income families available in your community?
   - [ ] there are many programs
   - [ ] there are some programs
   - [ ] there are few programs
   - [ ] there are not any programs
   - [ ] unsure

6. Are affordable youth (ages 5 to 17) activities or after school programs available in your community?
   - [ ] there are many activities/programs
   - [ ] there are some activities/programs
   - [ ] there are few activities/programs
   - [ ] there are not any activities/programs
   - [ ] unsure

7. In your community, in which areas do you believe youth (ages 12 to 17) need assistance? select all that apply:
   - [ ] after school supervision
   - [ ] school attendance
   - [ ] birth control
   - [ ] teen parenting
   - [ ] obesity
   - [ ] learning disabilities
   - [ ] behavior disorders
   - [ ] tutoring
   - [ ] mentoring and leadership
   - [ ] finding employment
   - [ ] gang participation
   - [ ] volunteering
   - [ ] sexually transmitted diseases
   - [ ] substance abuse/tobacco
   - [ ] affordable school/community activities
   - [ ] none of these apply

8. Do you believe the schools in your community meet the educational needs of the children they serve?
   - [ ] in almost all cases
   - [ ] in most cases
   - [ ] in some cases
   - [ ] in a few cases
   - [ ] not at all
   - [ ] unsure
9. Are non-medical emergency services available in your community? □ YES □ NO □ unsure

10. Are emergency shelters available in your community? □ YES □ NO □ unsure

11. Are medical services available for low-income people in your community? □ YES □ NO □ unsure

12. Are dental services available for low-income people in your community? □ YES □ NO □ unsure

13. Are wellness (nutrition, exercise, etc.) programs available for low-income people in your community?
   □ YES □ NO □ unsure

14. Are the homes in your community in good repair? select one:
   □ most of them are □ some of them are □ few of them are □ none are □ unsure

15. What public transportation options are available in your community? select all that apply:
   □ cab or taxi □ regional transit bus □ municipal bus □ trolley □ none □ other

16. Which of the following issues do you believe are the greatest challenges low-income households are currently facing? select all that apply:
   □ education □ child care □ living wage employment □ mental health services
   □ job training □ teen pregnancy □ family/child abuse □ medical care access
   □ housing □ substance abuse □ language barriers □ dental care access
   □ budgeting □ transportation □ health food selection □ health care costs
   □ parenting □ family violence □ special needs children □ credit card debt
   □ chronic illness □ energy/utility costs □ none apply

17. Which of the following areas do you believe low-income households need assistance with in order to achieve or maintain self-sufficiency? select all that apply:
   □ employment □ mental health □ medical care □ substance abuse treatment
   □ job training □ education □ family/child abuse □ financial planning
   □ housing □ transportation □ language barriers □ parenting education
   □ child care □ legal issues □ family planning □ energy/utility costs □ none apply

18. Which of the following areas do you believe the elderly (seniors) in your community need assistance with in order to remain in their home? select all that apply:
   □ housework □ yard work/snow removal □ home repairs □ energy/utility costs
   □ managing medications □ grocery shopping □ preparing meals □ laundry
   □ financial assistance □ tax preparation/legal issues □ access to transportation

19. Of the following, with which of these do you believe low-income families need information, education, guidance, and/or assistance?
   □ checking and savings accounts ........................................................ □ YES □ NO □ unsure
   □ credit cards .................................................................................. □ YES □ NO □ unsure
   □ payday loans .................................................................................. □ YES □ NO □ unsure
   □ car title loans (not a car purchase loan) .......................................... □ YES □ NO □ unsure
   □ budgeting or money management issues ........................................ □ YES □ NO □ unsure
   □ financial credit issues .................................................................... □ YES □ NO □ unsure
   □ filing tax returns (EITC) ................................................................. □ YES □ NO □ unsure
   □ obtaining loans ............................................................................. □ YES □ NO □ unsure
   □ property tax exemptions ................................................................. □ YES □ NO □ unsure
   □ rent reimbursement claims ............................................................ □ YES □ NO □ unsure
   □ home energy/utility cost issues ...................................................... □ YES □ NO □ unsure

*** THANK YOU FOR YOUR PARTICIPATION ***

- 2 -
Illinois's community action agencies are conducting a study of the needs individuals and families may be experiencing in their lives. Results from the study will be considered by the community action agencies for planning, developing, and delivering agency programs, services, and activities.

INSTRUCTIONS: Please answer each question by checking the appropriate box (or boxes) or providing a written response. After completing the survey, please return it where you received it.

All surveys will be kept confidential. Thank you for participating.


3. Are you a male or female?       ☐ Male  ☐ Female  ☐ Other
4. Are you aged 55 or over?       ☐ YES ☐ NO
5. Are you married or living with a partner?  ☐ YES ☐ NO

6. EMPLOYMENT: Which employment needs could you use help with (select all that apply)?
   ☐ Getting training for the job that I want
   ☐ Getting an education for the job that I want
   ☐ Finding a temporary full-time job that will support me or my family
   ☐ Knowing what jobs are available
   ☐ Learning how to interview for a job
   ☐ Learning how to write a resume
   ☐ Learning how to fill out job applications
   ☐ Learning computer skills to apply for jobs
   ☐ Obtaining appropriate clothing for my job
   ☐ Obtaining equipment (e.g., tools) for my job

7. EDUCATION: Which education needs could you or a family member use help with (select all that apply)?
   ☐ Obtaining a high school diploma or GED/HSED
   ☐ Obtaining a two-year college degree
   ☐ Obtaining a four-year college or university degree
   ☐ Choosing a career
   ☐ Choosing a technical school program
   ☐ Learning how to use a computer
   ☐ Learning or improving communication or language skills
   ☐ Learning English (as a second language)
   ☐ Getting financial assistance to complete my education
   ☐ Completing college aid forms (including FAFSA forms)

8. FINANCIAL AND LEGAL ISSUES: Which financial and/or legal needs could you or your family use help with (select all that apply)?
   ☐ Budgeting and managing money
   ☐ Opening a checking or savings account
   ☐ Filling out tax forms
   ☐ Understanding credit scores
   ☐ Solving problems with a credit card or loan company
   ☐ Solving problems with utility or telephone company
   ☐ Solving problems with payday loans
   ☐ Solving bank foreclosure/bankruptcy/repossession problems or issues
   ☐ Solving divorce problems or issues
   ☐ Solving child custody problems or issues
   ☐ Solving child support problems or issues
   ☐ Solving restraining order problems or issues
   ☐ Getting protection in domestic violence situations
   ☐ Getting legal assistance with deportation or immigration issues
   ☐ Getting legal assistance when denied services
9. **HOUSING:** Which housing needs could you or your family use help with (select all that apply).
- Finding affordable housing that fits my family’s needs
- Getting financial assistance with a down payment or closing costs to buy a home
- Qualifying for a loan to buy a home
- Obtaining home ownership education
- Obtaining renter/tenant rights and responsibilities education
- Learning basic home repair and property maintenance skills
- Getting financial assistance with rent payments
- Getting financial assistance with rent deposits
- Making my home more energy efficient
- Making changes to my home for a person with disabilities
- Getting emergency shelter

10. **FOOD AND NUTRITION:** Which food and nutrition needs could you or your family use help with (select all that apply).
- Getting food from food pantries, food banks, or food shelves
- Having enough food at home
- Learning how to shop and cook for healthy eating
- Learning how to stretch my food dollar
- Getting emergency food assistance
- Getting meals delivered to my home
- Enrolling in the Food Assistance Program
- Learning how to model healthy eating for my children
- Getting nutritious foods during pregnancy
- Obtaining breastfeeding education and assistance

11. Do you have children (under the age of 18) living with you? □ YES □ NO. (If NO, skip questions 12 and 13)

12. **CHILD CARE AND CHILD DEVELOPMENT:** If you have children (under the age of 18) living with you, which child care and/or child development needs could you or your family use help with (select all that apply).
- Finding child care in a convenient location
- Finding quality licensed child care
- Finding affordable child care
- Finding child care for babies
- Finding child care for toddlers
- Finding child care for preschoolers
- Finding evening or nighttime child care
- Finding weekend child care
- Finding a quality preschool
- Finding a before/after school program
- Preparing my preschool child for public school
- Getting financial assistance with child care costs
- Getting financial assistance with school supplies
- Getting financial assistance with school fees
- Getting financial assistance with school or club activities

13. **PARENTING AND FAMILY SUPPORT:** If you have children (under the age of 18) living with you, which parenting and/or family support needs could you or your family use help with (select all that apply).
- Learning how to discipline my children more effectively
- Learning how to communicate and deal with my teenage children
- Learning how to deal with my children who have displayed bullying or violent behavior
- Learning how to deal with the bullying or violent behavior of my children’s friends
- Learning how to talk to my children about drugs and alcohol
- Learning how to talk to my children about sex, AIDS, STDs, etc.
- Learning how to help my children cope with stress, depression, or emotional issues
- Learning how to set goals and plan for my family
- Communicating better with my children’s care provider or teachers
14. TRANSPORTATION: Which transportation needs could you or your family use help with (select all that apply)...

- Having access to public transportation
- Having dependable transportation to and from work
- Getting financial assistance to buy a dependable car
- Getting financial assistance to make car repairs
- Getting financial assistance to buy car insurance
- Getting financial assistance to pay car registration or license fees
- Getting a driver’s license
- Getting to and from medical or dental appointments
- Getting myself to and from school
- Getting my children to and from child care
- Getting my children to and from school
- Getting my children to and from school or club activities
- Going shopping and doing errands

15. HEALTH: Which health needs could you or a family member use help with (select all that apply)...

- Having affordable health insurance
- Having affordable dental insurance
- Having health care available in my community
- Having dental care available in my community
- Getting my health insurance questions answered
- Finding a doctor willing to accept Medicaid (Title XIX)
- Finding a dentist willing to accept Medicaid (Title XIX)
- Getting financial assistance for regular medical checkups
- Getting financial assistance for regular dental checkups
- Getting financial assistance for medicine and prescriptions
- Getting financial assistance for items such as glasses, hearing aids, wheelchairs, etc.
- Getting financial assistance for long-term health care
- Obtaining family planning or birth control education and assistance
- Getting good medical care before my baby is born
- Getting regular check-ups, developmental screens, or physicals for my children
- Getting my children tested for lead poisoning
- Getting immunizations for my children
- Getting treatment for a drug or alcohol problem
- Getting treatment and services for mental health
- Dealing with stress, depression, or anxiety
- Dealing with problems related to physical, emotional, or sexual abuse

16. BASIC NEEDS: Which basic needs could you or your family use help with (select all that apply)...

- Getting basic furniture, appliances, or house wares
- Getting personal care items such as soap, diapers, toilet paper, etc.
- Getting clothing and shoes
- Doing yard work or snow removal
- Doing house work or laundry
- Managing medications
- Having a reliable phone
- Having access to the Internet
- Getting financial assistance with my utility bills (heating, electric, and/or water)

17. Are there any problems or needs that you or your family faced within the last 12 months that you were unable to get help with?

- YES □ NO □ If YES, please list those problems or needs:

18. What is ONE thing you would like to see improved in your neighborhood?
19. How did you learn about our agency? Select all that apply:
- Family or friend
- Current or former agency client
- The household I grew up in had received agency services
- Health care provider
- A state agency
- Social service agency
- Brochure or flyer
- Websites/Internet
- Newspaper
- Phone book
- A mailing
- Television
- Social media (Facebook, Twitter, etc.)
- Local Church
- Billboard
- Radio
- Other

20. What are your sources of household income? Select all that apply:
- No income
- TANF
- Employment income
- Social Security
- SSI
- Other
- Child support or alimony
- General Assistance
- Unemployment insurance
- Self-employed
- Pension

21. In the last 12 months, how has your household’s income situation changed? □ Increased □ Decreased □ No change

22. What time of day would you prefer to come to one of our locations (offices) for assistance? Select one:
- Weekday hours of 8:00 am - 4:30 pm
- Saturday hours from 9:00 am - 12:00 pm
- Weekday evening hours from 5:00 pm - 7:00 pm
- I am not able to come to any of your locations

23. What services has your household received from our agency within the last 12 months? Select all that apply:
- Energy Assistance (LIHEAP)
- Weatherization
- Head Start/Early Head Start
- ____________
- ____________
- ____________
- ____________
- ____________

24. If you know anyone with an incarcerated adult in their family, do they ever talk about particular concerns that could be addressed through our programs? Select all that apply:
- Transportation assistance
- Child care assistance
- Job skills training
- Medical bill assistance
- Mentor or after school programs for children
- Financial assistance
- Stress relief
- Other

25. When you think about your adult family, friends and neighbors, how many of them might say something like “there’s too much month at the end of my money?” or “where am I going to find money to pay for that?” Select one:
- Almost none (0 to 5%)
- Some (6 to 10%)
- Quite a few (11 to 66%)
- Most (67 to 95%)
- Almost everyone (96 to 100%)

26. When you think about your family, friends and neighbors, how many of them may have difficulties finding or buying enough quality food to provide at least three meals per day? Select one:
- Almost none (0 to 5%)
- Some (6 to 10%)
- Quite a few (11 to 66%)
- Most (67 to 95%)
- Almost everyone (96 to 100%)

27. When you have time to rest or are ready to sleep, what kind of issues in your family or neighborhood keep you up?

28. If given the opportunity, would you be willing to serve on a local board or committee that represents and makes decisions for families with low-incomes? □ YES □ NO □ Unsure □ YES, please provide your name and phone number:

FIRST NAME: ___________________________ LAST NAME: ___________________________

PHONE NUMBER (999-999-9999): __________________________

Customer Satisfaction Survey

1. I was helped in a timely manner. □ YES □ NO □ N/A (not applicable)
2. I was treated with respect. □ YES □ NO □ N/A
3. The staff were friendly and helpful. □ YES □ NO □ N/A
4. I got the information and/or the services I needed. □ YES □ NO □ N/A
5. I was informed about other agency or community services. □ YES □ NO □ N/A
6. I would recommend your agency to family and friends. □ YES □ NO □ N/A
7. What is ONE thing you would change about the services you received from our agency?
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