



AGING IN COMMUNITY Action Plan

April 2023



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Appendix A: AARP Livability Index – Mount Prospect

Appendix B: Aging in Community Survey Report

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Paul Wm. Hoefert
Mayor.



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Village of Mount Prospect
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As the Mayor of the Village of Mount Prospect, it is my honor to support the Village of Mount Prospect Aging in Community Action Plan. The Village of Mount Prospect identified Aging in Community as a high priority in the 2019 Strategic Plan and pledged to:

1. Establish new mechanisms and improve existing ones to involve older people;
2. Build on and update our baseline assessments of age-friendliness of our community;
3. Develop a community-wide action plan based on the findings of the assessment; and
4. Identify meaningful indicators by which progress can be measured.

The Aging in Community Action Plan represents the collective efforts of Village staff, Age Friendly Task Force members, community stakeholders, and Village residents to move Mount Prospect forward as a livable community for all ages, with a focus on older adults. Residents 60 years of age and older represent 24% of Mount Prospect's population. Older adults are a vital part of this community and the majority of those surveyed indicated a strong desire to remain in Mount Prospect as they age. The physical environment was highly rated for quality of its sidewalks, hospitals and health care facilities and well-maintained properties. The library, faith communities and park districts were identified as key resources for life-long learning.

While Mount Prospect has many strengths that contribute to our residents' ability and desire to age in place, we are not without challenges. Specifically, we know that many older adults in Mount Prospect experience challenges and barriers in the areas of housing, transportation, social engagement, health and wellness, and information and communication. The Aging in Community Action Plan lays out goals and objectives to address these five priority areas over a three-year period.

The Village is committed to this work and our responsibility to serve this segment of our population. We also acknowledge that collaboration and partnership are keys to success. This work is not contained to one department in the Village, but requires a "whole of government approach." This Action Plan is not meant to be carried out by the Village alone, but in concert with community stakeholders and residents. Nor do these issues cease at the borders of the municipality; many of our neighbors are experiencing the same demographic shifts and challenges. Together we can leverage our strengths to achieve a collective vision of Mount Prospect as an "accessible, inclusive community where older adults thrive and have the tools to navigate the aging process."

Sincerely,



Paul Wm. Hoefert
MAYOR

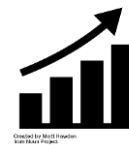
Executive Summary

The Village of Mount Prospect launched the Aging in Community Initiative in 2019. **The mission of the initiative is to strengthen community infrastructure and systems that enhance the lives of older adults.** The Village convened a Task Force composed of community partners and residents with expertise and interest in age-friendly policy and programming to develop a three-year Action Plan. The Action Plan lays out concrete goals and objectives that will enhance age-friendly features of the community and advance Mount Prospect as an **accessible, inclusive community where older adults thrive and have the tools to navigate the aging process.**

ACTION PLAN PROCESS

Assessment (2021)

- Collect Primary Data (Focus Groups, Survey)
- Collect Secondary Data (Census, Existing Efforts)
- Develop Community Profile



Planning (2022)

- Develop Vision, Mission, and Values of Plan
- Analyze Primary and Secondary Data
- Prioritize Needs and Goals



Implementation / Evaluation (2023-2025)

- Convene Work Groups to Lead Implementation
- Define Strategies and Metrics to Achieve Goals
- Implement Plan; Evaluate and Adjust As Needed



The Task Force established mission, vision, and values statements to guide the decisions and actions of the Aging in Community Initiative.

AGING IN COMMUNITY MISSION, VISION, VALUES

MISSION

Strengthen community infrastructure and systems that enhance the lives of older adults.

VISION

Mount Prospect is an accessible, inclusive community where older adults thrive and have the tools to navigate the aging process.

VALUES

Intergenerational • Accessible • Respectful
Collaborative • Adaptable

Community input was collected from a variety of sources, including:

- Senior Focus Groups 2019
- Aging in Community Survey 2021 (Appendix B)
- Senior Opportunities Survey 2021
- Aging in a Changing Region Strategic Guide 2022 (Appendix C)
- Human Services Needs Assessment 2022

The Task Force sorted the community data and input into 11 thematic areas, and then prioritized the top 5 areas for the Action Plan. The Task Force identified goals and objectives for each priority area. Work Groups will be formed to lead the work for each Priority Area and meet the goals for the three-year Action Plan period.






MOUNT PROSPECT AGING IN COMMUNITY: PRIORITY AREAS & GOALS			
Housing	1	Enable older adults to remain in their homes through physical modifications to the structure.	
	2	Enable older adults to remain in their homes by connecting them to affordable and reliable home maintenance services.	
Transportation	3	Decrease barriers to transportation for older adults in Mount Prospect.	
	4	Increase access to all of Mount Prospect via public and other transportation programs.	
Social Engagement	5	Increase social engagement opportunities for older adults.	
	6	Decrease social isolation in older adults.	
Information / Communication	7	Reduce barriers for older adults to access information and resources.	
	8	Enhance existing methods of communication to connect older adults and their caregivers to resources and events.	
Health / Wellness	9	Increase older adult access to health and wellness resources.	
	10	Increase awareness of mental health issues among older adults.	

Image Credits: Andrejs Kirma, Icon Solutions, Adrien Coquet, Ricki Tri Putra, and Becris from the Noun Project

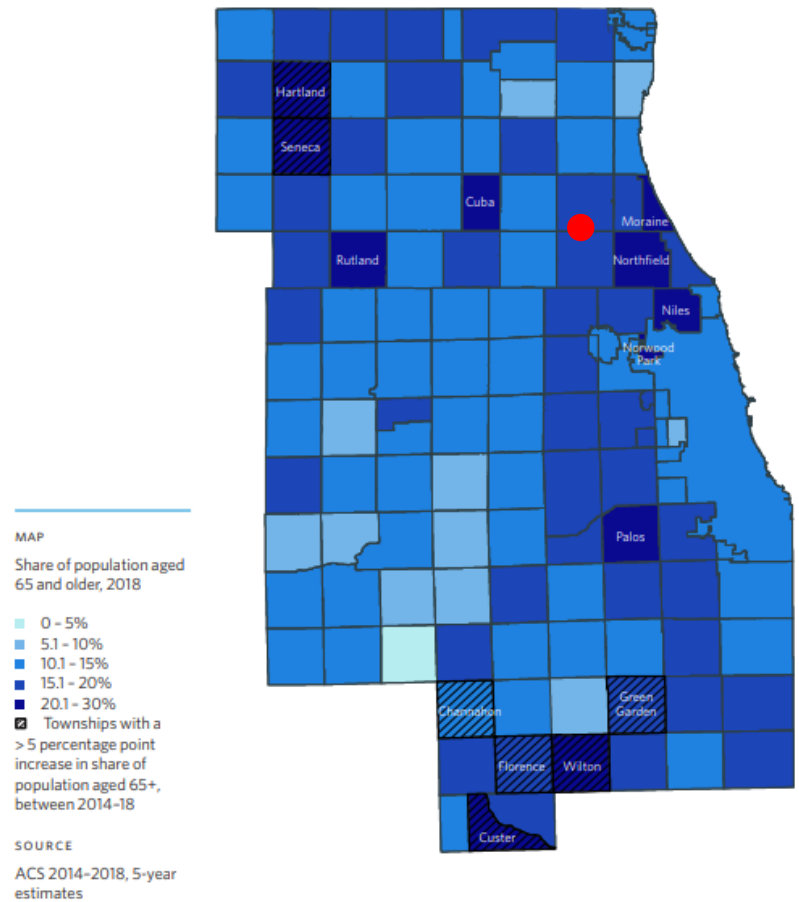
Introduction

Why Focus on Aging?

It is an undeniable fact that Americans are getting older. The country as a whole is experiencing a demographic shift towards an aging population. This is due to a multitude of factors, such as declining birth rates and advances in medicine, but can primarily be attributed to the large generation born after World War II known as the Baby Boomers. By 2030, when all Baby Boomers are older than 65, they are expected to make up 21% of the US population. The Chicago metropolitan region senior population is projected to increase by 880,000 between 2015 and 2050.¹

According to AARP, 77% of adults 50 years and older would prefer to stay in their communities and homes long-term, a process also known as “aging-in-place.” It is important for municipalities to evaluate and improve current infrastructure and programs for older adults, so all residents can live a safe and fulfilling life in the area of their choice.

Senior population **growing fastest** in northern Cook, western McHenry, and southern Will counties



Map Source: Chicago Metropolitan Agency for Planning

17% of Mount Prospect’s population is 65+

24% of suburban Cook older adults are householders that live alone

32% of suburban Cook adults 60+ are still in the labor force

3 in 4 adults age 50+ want to stay in their homes and communities as they age

By 2030, **1 in 5** Americans will be over the age of 65

By 2050, people 50+ will spend **61 cents** out of every retail dollar spent

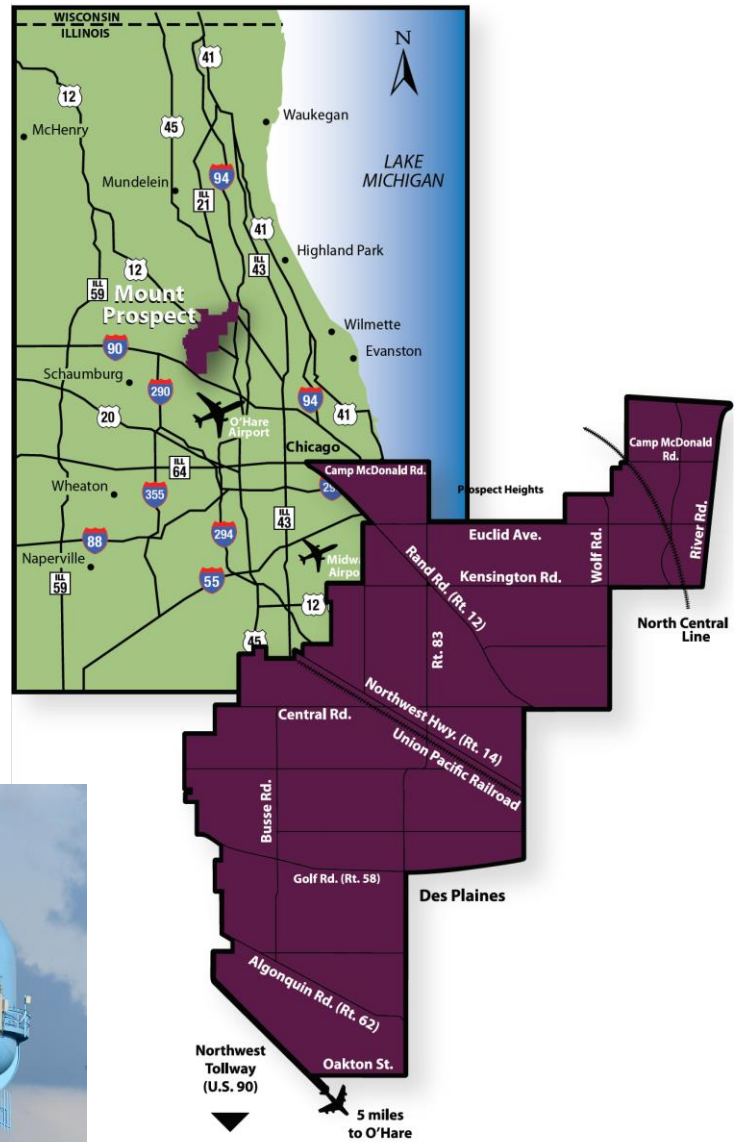
By 2060, life expectancy for Americans is projected to increase to **85.6** years²

¹ CMAP Policy Brief, 2021. [“Planning for an aging population in northeastern Illinois.”](#)

² Fact Sources: 1, 2, 3. American Community Survey 5-year Estimates, 2015-2019; 4. AARP.org; 5. Census.gov; 6. AARP.org; 7. Census.gov

Community Profile

The Village of Mount Prospect was incorporated in 1917 after being founded by a collection of farmers. Originally a commuter town built around a rail station, Mount Prospect has leveraged its position in the Northwest suburbs of Chicago to evolve into a community with a strong economic base. This is due, in part, to its location 20 miles northwest of Chicago as well as proximity to other amenities in the Northwestern suburbs such as O'Hare International Airport, the Allstate Arena, and the Schaumburg Convention Center. Recent changes to the Village's downtown have increased the number of mixed-use buildings and created open community spaces that allow residents to patronize local businesses while maintaining small-town charm.



After experiencing the majority of its population growth between 1950 and 1980, the Village of Mount Prospect's population has mostly leveled out. On par with national trends, the share of the population who is 55 and older is growing; this presents not only a challenge, but also opportunity. As the older share of the population grows, they will have a significant impact on spending and economic growth in the coming decades. This growing demographic requires strong planning to ensure that the Village can capitalize on the opportunity to make it a great place to age, as well as live out its mission to advance the community's collective quality of life and potential.

MOUNT PROSPECT SNAPSHOT

Population	Total: 56,510 60+: 13,418
Bachelor Degree+	Total: 47% 60+: 40%
Below Poverty Level	Total: 5% 60+: 8%
Homeowners	Total: 70% 60+: 82%
Cost-Burdened Owners	Total: 23% 60+: 30%
Cost-Burdened Renters	Total: 42% 60+: 47%
White Alone, Not Latino	Total: 65% 60+: 80%
Speak Other Languages	Total: 43% 60+: 33%
Speak English Less Than "Very Well"	Total: 17% 60+: 22%

Social Characteristics

According to the 2021 American Community Survey, the Village of Mount Prospect has a total population of 56,510. The median age is 40.5, which is 3.2 years older than the median age for Cook County. Currently, 24% of the population is 60 years or older. Mount Prospect has strong educational attainment, with 47% of residents having a Bachelor's degree or higher. Additionally, 92% of residents have at least a high school education. About 9% of the total population has a disability.

Looking specifically at the 60+ population, the Village has 13,418 residents age 60 or older. 40% of this population have a Bachelor's degree or higher, and 90% have at least a high school education. 24% of the older adult population has a disability.

Mount Prospect has an ethnically diverse population, which presents unique opportunities and challenges for an aging community. Mount Prospect has a significant Hispanic / Latino population as well as a large Asian population. Additionally, there is a significant community of Eastern European immigrants. 43% of Mount Prospect residents speak a language other than English at home, and 17% speak English less than "very well." 65% of the population identifies as White alone, not Hispanic or Latino.

Looking specifically at 60+ adults, 80% of this population identifies as White alone, not Hispanic or Latino. 33% of the older population speaks a language other than English at home, and 22% speak English less than "very well."

Housing Characteristics

Because the majority of Mount Prospect's growth took place during the late Twentieth Century, approximately 78% of the housing stock was built before 1980. This may affect the accessibility of these houses for an aging population, as well as create significant maintenance needs. The majority of housing is single-family homes (61%), followed by 20+ units (16%), 2-9 units (14%), and 10-19 units (9%).

70% of residents own their homes, though 23% of owner-occupied units are "cost-burdened" (spending more than 30% of their income on housing). This number increases to 43% for renter-occupied units. Median monthly owner costs for a housing unit with a mortgage is \$2,320, while median gross rent is \$1,239. The median value of a home is \$336,300. 95% of households have at least 1 vehicle available. 94% of households have a computer and 91% have a broadband internet subscription.

Among 60+ adults, 82% own their homes. 30% of older homeowners are cost-burdened, while 47% of older renters are cost-burdened.

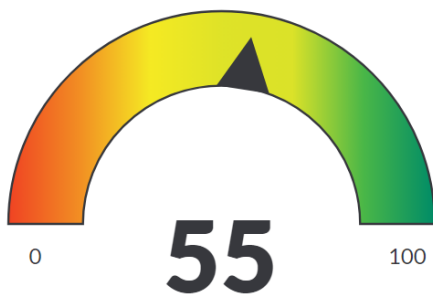
Economic Characteristics

The median household income is \$92,477, which is significantly higher than the \$72,121 median income for Cook County. 5% of the total Mount Prospect population is below 100 percent of the poverty level, compared to 8% of the 60+ population. About 10% of the total population does not have health insurance coverage.

68% of the total population is in the labor force, while 32% of the 60+ adults are in the labor force. 72% of workers age 16+ drive alone to work, 7% take public transit, and 11% work from home. The mean travel time to work is roughly 30 minutes. Management, business, science, and arts is the largest occupation group for Mount Prospect residents (45%), followed by sales and office (21%), service (14%), production, transportation, and material moving (13%), and natural resources, construction, and maintenance occupations (7%).








AARP Livability Index

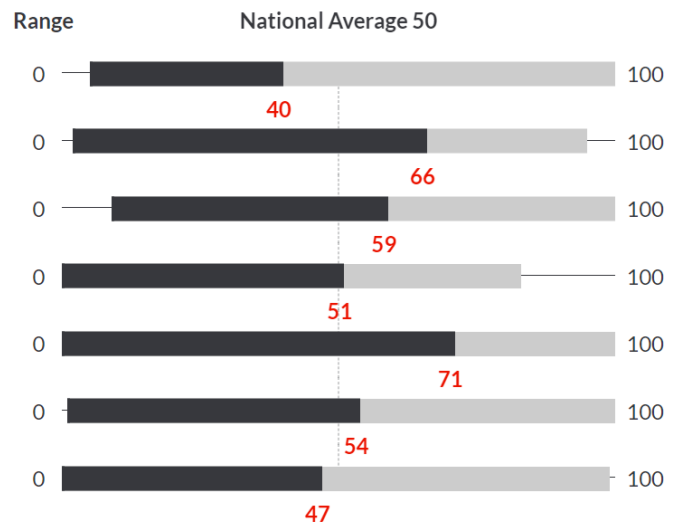
The AARP Livability Index is a tool designed to measure community livability on a scale of 0-100, with a higher score indicating greater livability. Mount Prospect has a livability score of 55, which is slightly greater than the national average of 50. Its highest scores are in neighborhood and health, while the lowest scoring categories are housing and job opportunities. The full AARP Livability Index Profile is available in Appendix A.



Overall Livability Score ⓘ

The overall livability index score for Zip Code 60056 is 55. This is in the top half of communities in the U.S.

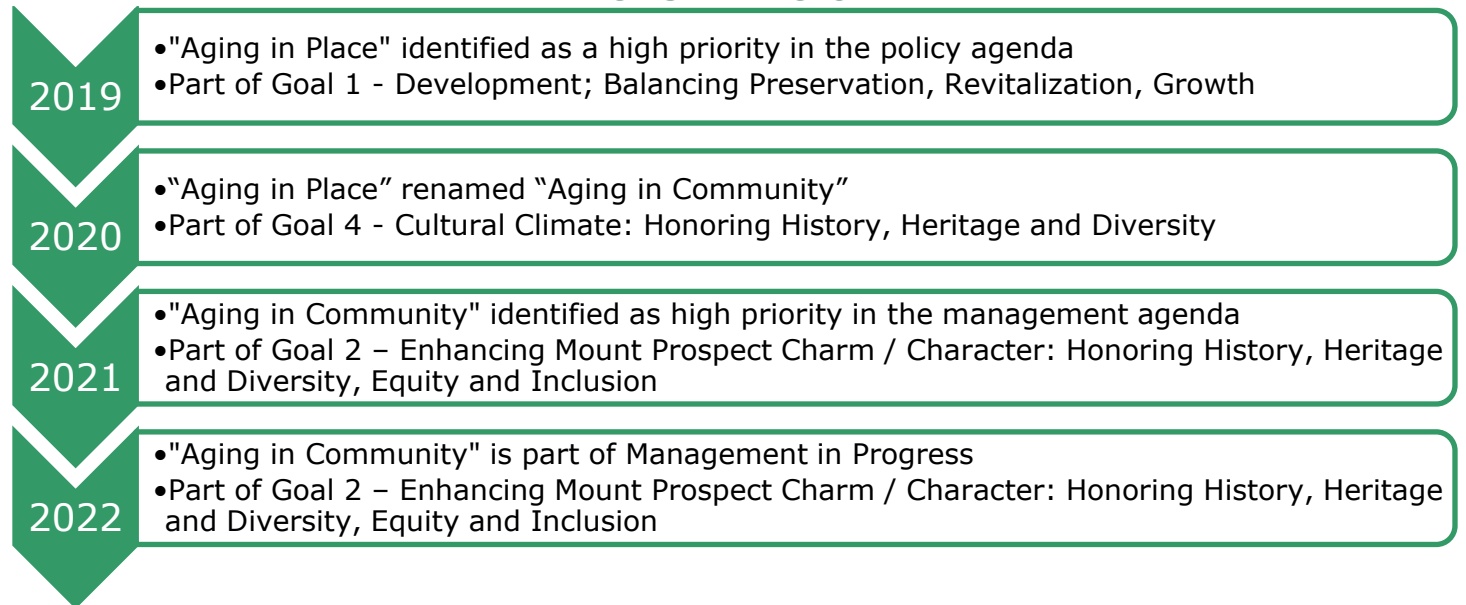
-  Housing ⓘ
-  Neighborhood ⓘ
-  Transportation ⓘ
-  Environment ⓘ
-  Health ⓘ
-  Engagement ⓘ
-  Opportunity ⓘ



The Path to Age-Friendly

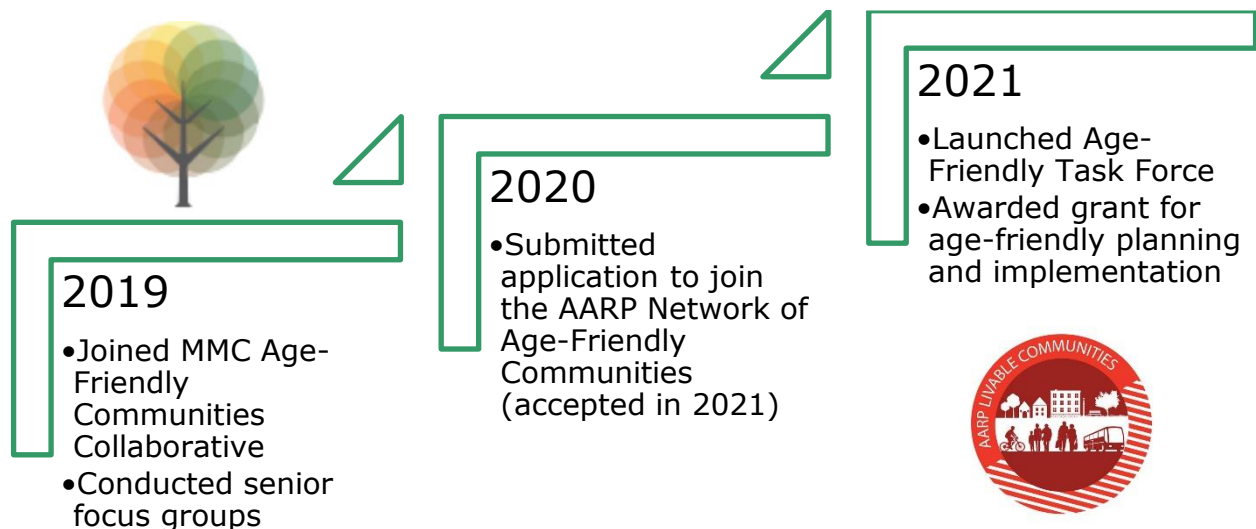
The Village of Mount Prospect identified "Aging in Place" as a strategic priority starting in the 2019 Strategic Plan. In 2020 the initiative was renamed "Aging in Community," to recognize that many older adults in Mount Prospect not only wish to remain "in place" in their homes, but also wish to remain in the Mount Prospect community for as long as they can.

VILLAGE STRATEGIC PLAN



The Village has taken steps towards age-friendly designation, including joining the Metropolitan Mayors Caucus (MMC) Age-Friendly Communities Collaborative in 2019 and joining the AARP Network of Age-Friendly Communities in 2021. Many other municipalities are facing similar challenges in meeting the needs of their existing older adult population and preparing for an increase in this demographic. The Collaborative and Network provide best practices, technical assistance, and peer learning opportunities for communities interested in age-friendly practices, no matter where they are on the path to age-friendly.

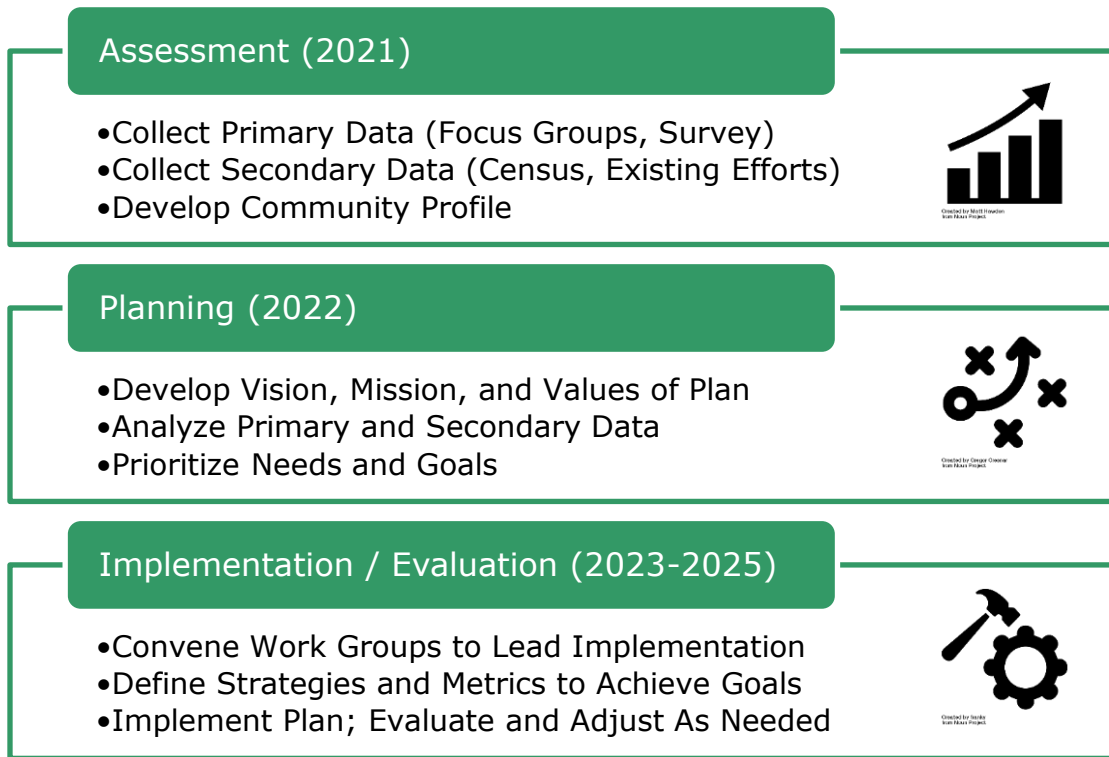
VILLAGE OF MOUNT PROSPECT PATH TO AGE-FRIENDLY



Action Plan Process

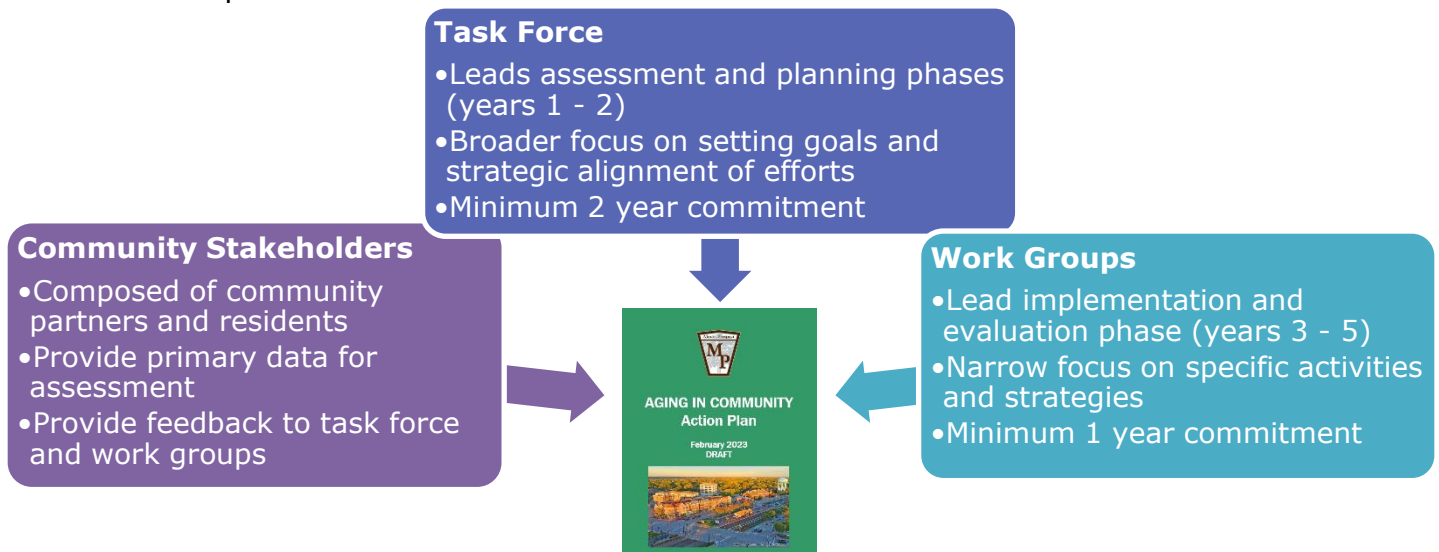
In 2021, the Village convened an Age-Friendly Task Force (“Task Force”) composed of community partners and residents with expertise and interest in age-friendly policy and programming to develop a three-year Action Plan. The Action Plan lays out concrete goals and objectives that will enhance age-friendly features of the community and advance Mount Prospect as an **accessible, inclusive community where older adults thrive and have the tools to navigate the aging process.**

ACTION PLAN PROCESS



Roles and Responsibilities for the Action Plan

The Task Force led the assessment and planning phases of the Action Plan from 2021 through 2022. The Work Groups will lead the implementation and evaluation phase from 2023 through 2025. Community partners and residents (collectively referred to as “Community Stakeholders”) will be engaged throughout the five-year period to provide data and feedback to the Task Force and Work Groups.



Aging in Community Task Force Members

Amy Gall • Connections to Care
Beth Corrigan-Buchen • Mount Prospect Public Library
Bruce Barry • River Trails Park District
Christie Webb • St. Mark Lutheran Church
Crissy Castillo • Kenneth Young Center Older Adult Services
Irma Rodriguez • Senior Resident
Jeanette Palmer • Right at Home
Kathleen Meersman Murphy • Law Office of Kathleen Meersman Murphy, LLC
Rafi Sahakian • Coldwell Banker Realty
Walter Szymczak • Senior Resident
Yihyun Kim • Hanul Family Alliance

Aging in Community Staff Liaisons

Antonia Lalagos • VOMP Community Development
GinnyThomas • VOMP Human Services
Julie Kane • VOMP Human Services
Mark Rysavy • VOMP Community Development
Nicole Cooper-Ffrench • VOMP Human Services

Former Aging in Community Task Force Members

Bill Gonzalez • Picket Fence Realty
Dallas Tomlin • Connections to Care
Emily Bettler • VOMP Community Development
Emily Kaitis • Law Office of Kathleen Meersman Murphy, LLC
Jill Heinking • VOMP Human Services
Kenia Roman • VOMP Human Services
Valeria Tarka • VOMP Community Development

Aging in Community Workshop #1 Stakeholder Organizations

A Homecare Service LLC
Access Community Health Network
Allcare Medical Equipment and Supply LLC
American Legion #525
Arosa Care
Busey Bank
Catholic Charities Senior Services
District 214 Community Education
Elk Grove Township
Friedrichs Funeral Home
Frisbie Senior Center
Hands on Suburban
Interfaith Council

Kenneth Young Center
Kenzie Senior Residences
Lifeway Mobility Chicago
Medtec Health Care
Mount Prospect Park District
Mount Prospect Senior Living
Northwest Community Hospital
Northwest Compass
Northwest Housing Partnership
Right at Home
St. Paul Lutheran Church
Van Driel's Medical Supply
Veterans of Foreign Wars Post 1337

Mission, Vision, and Values

Brad Winick of Planning/Aging led a workshop with the Task Force members to establish the mission, vision, and values of the Aging in Community Initiative. The mission is a one-sentence statement of why the initiative was launched, including specific aims and goals. The vision statement is a one-sentence aspirational description of the long-term effects that will result from the work of the initiative. Value statements detail the core values that should guide the age-friendly work. The Task Force incorporated the voice of community residents and their own experience in the aging network to arrive at the statements.

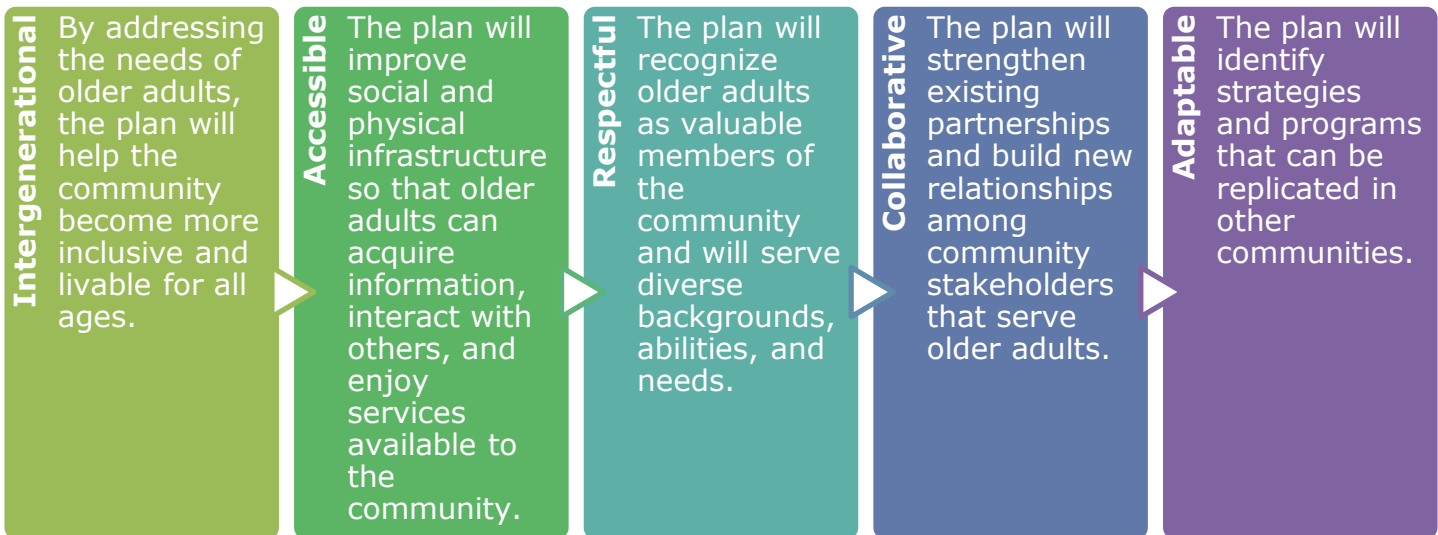
MISSION

- Strengthen community infrastructure and systems that enhance the lives of older adults.

VISION

- Mount Prospect is an accessible, inclusive community where older adults thrive and have the tools to navigate the aging process.

VALUES



Community Assessment

The community assessment is used by the Task Force to decide what goals to set and the activities necessary to reach those goals. The Task Force pulled out key findings from the Aging in Community Survey, senior focus groups, and other sources of information to identify recurring themes and subthemes related to aging in community. The Task Force then prioritized goals and identified activities that reflect the needs and preferences of Mount Prospect’s older residents and align with the mission, vision, and values of the Aging in Community Initiative.

Aging in Community Survey Findings

The primary source of information for the community assessment was the Aging in Community Survey. The full Aging in Community Survey Report is available in Appendix B. The Task Force launched the survey in 2021 to collect information about the current and anticipated needs of older adults in the Mount Prospect community. The target population for the survey was Mount Prospect residents ages 55 and over. The Task Force analyzed the 466 survey responses and identified the overall themes, as well as strengths, weaknesses, opportunities, and threats that emerged from the survey data.

THEMES FROM AGING IN COMMUNITY SURVEY, 2021







Housing	<ul style="list-style-type: none"> • Strong desire to stay in home as long as possible • ½ of respondents said a home modification would be needed • Lack of housing options for older adults to transition as they age • Housing affordability 	
Transportation	<ul style="list-style-type: none"> • Heavy dependence on private vehicles for transportation • Few people reported using public transportation and it scored low for its “convenience” 	
Information	<ul style="list-style-type: none"> • Lack of awareness of available resources • Need information in many formats (e.g. print, electronic, phone, multiple languages) 	
Employment	<ul style="list-style-type: none"> • Employment questions scored lowest out of all the categories • Challenges identifying and getting to / from volunteer opportunities 	
Social Engagement	<ul style="list-style-type: none"> • Understand barriers to participating in social opportunities (transportation, cost, age of participants, cultural, etc.) 	
Special Populations	<ul style="list-style-type: none"> • Different strategies for reaching different age cohorts (e.g. pre-retirement vs. post-retirement age) • Collect more information from minority populations about their needs 	

Image Credits: Andrejs Kirma, Icon Solutions, Ricki Tri Putra, Adrien Coquet, and Guilherme Furtado from the Noun Project



Community Strengths

Overall the respondents thought Mount Prospect was a “very good” place for people to live as they age. Many respondents have lived in the community a long time, conveying a sense of satisfaction and ownership. This is echoed in the overwhelming desire to be able to live independently in their homes as they age and the strong

desire to remain in their current community for as long as possible. The physical environment was rated highly for the quality of its sidewalks, hospitals and health care facilities, and well-maintained homes and properties. Questions related to health care professionals were rated "very good" on average. The library, faith communities, and park districts were identified as key resources for life-long learning, while the most trusted sources of information were family and friends, senior centers, units of local government, and health care professionals. There was a low response rate about home repair services in the community, but those who did respond rated these categories "very good." Few reported using public transportation, but those who do rated the public transit "very good" in terms of safety. At an individual level, most respondents self-reported as being in "very good" health. 90% of respondents have daily or weekly contact with others, and 90% have someone to call any time of day or night if they were in trouble or distress.

Community Weaknesses



While most respondents expressed a preference to stay in their homes, data suggests that the community does not have enough facilities to accommodate those that need to move out of their homes. Questions asking about the availability of affordable housing, variety of housing options for older adults, and physically accessible homes received low scores. Personal safety or security concerns were cited as a "major factor" if respondents were to move from their current community, though it was not clear if the concerns were from home safety (e.g. falling hazards) or community safety (e.g. crime). 74% of respondents reported living in single-family homes, and 50% of respondents reported that their home would need major repairs and / or modifications to stay there as long as possible. When asked to rate the community's home repair and maintenance services, there was a high proportion of "no response," suggesting that residents may be unfamiliar with these services. In the area of Education, Civic Engagement, and Volunteering, respondents gave a "fair" rating for "activities that offer senior discounts" and "transportation to and from volunteer opportunities." Village Hall and the local Senior Center appear to be under-utilized as a source for continuing education and self-improvement classes, and there may be a lack of awareness about local service agencies. When asked to rate health and wellness services, accessible mental health services and affordable in-home caregiving scored lowest.



Community Opportunities

One of the biggest opportunities identified by the Task Force was helping adults plan ahead of time for how they would like to age, rather than waiting for a crisis before decisions are made. There is a great deal of information available but there has to be a strategy to coordinate delivery of and access to the information. Mount Prospect has taken steps to enhance information dissemination through a senior newsletter and could potentially fill additional information gaps through this vehicle. Other ideas such as a directory phone service (e.g. 311) and aging workshops were discussed. Many community organizations and institutions have existing programs and services, and where possible organizations should partner instead of re-creating existing programs. New forms of technology can pose a barrier for older adults, but it can also be an opportunity for greater engagement and connection to family and friends through texting, video calls, and social media. There is an opportunity to help older adults achieve their goals to live safely and independently in their homes for as long as possible by supporting access to affordable home remodeling and maintenance services, and exploring universal housing design. Finally, almost three-quarters of the respondents reported that they were retired, which represents a potential source of volunteers and advocates who may have spare time to support older adult initiatives.



Community Threats

For some older adults, employment is not optional, but various barriers such as ageism or the need to take care of a loved one can make it difficult to find work. Costs continue to rise for caregiving services and 28% of respondents said they were “very likely” or “extremely likely” to provide unpaid care to an adult loved one in the future. The Covid-19 pandemic was cited as a major threat that greatly impacted many aspects of aging, including increased pressure on the caregiving workforce, reduced access to in-home services, and fewer socialization opportunities. Nearly one-third of the respondents reported that they lived alone. Social media, while a great connector, can also exacerbate feelings of isolation or anxiety. Older adults may be resistant to change and may find it challenging to downsize their belongings, adapt to new technology, or try new ways of doing things. 93% of respondents reported that they drive themselves, but the Task Force found that most people are not prepared for when they can no longer drive, and suburban infrastructure is predominantly car-oriented. The country is facing a severe housing shortage of all types of housing, which has increased housing prices for all demographics. Lastly, many local institutions do not have the capacity to deliver information and services to non-English speakers.

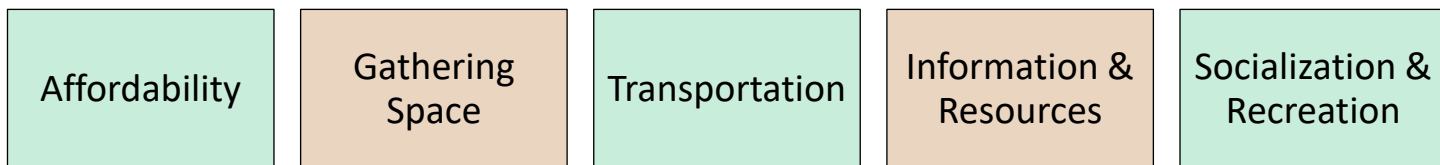
Senior Focus Groups Findings

Another important source of information for the community assessment were the senior focus groups conducted in 2019. The Village of Mount Prospect Human Services Department, in partnership with the Mount Prospect Public Library, Mount Prospect Park District, and River Trails Park District, facilitated six focus groups with a total of 46 adults in three age ranges: 57-67, 68-77, and 78+. The themes from the focus groups are summarized below.

THEMES FROM SENIOR FOCUS GROUPS, 2019

✓ Desire to age in Mount Prospect
✓ Need awareness of services through lists of activities, brochures, newsletter, central location for senior news
✓ Village services and resources are strengths of the community
✓ Desire a space to gather
✓ Will consider various housing options including staying in home, downsizing, affordability, centrally located housing and mixed age living
✓ Transportation options are important for ability to get around
✓ Opportunities for socialization to add to quality of life

"Of all the needs discussed, which one is the most important to you?"



Review of Other Aging in Community Data Sources

Beyond the survey and focus groups, the Task Force reviewed nine additional data sources related to aging in community and feedback from Mount Prospect residents. The sources were a variety of surveys, plans, and other reports from the local, regional, and state level. The idea behind this review was to identify recurring themes and subthemes, for two reasons: first, if a theme appeared across multiple sources, it is likely a critical issue that needs to be addressed; and second, if multiple organizations or locations are addressing a particular theme, then it

makes strategic sense to align our work with existing efforts. More detail about the community assessment sources is in Appendix D.

COMMUNITY ASSESSMENT SOURCES

Surveys

- Aging in Community Survey (2021)
- Human Services Senior Opportunities Survey (2021)
- VOMP Community Survey (2020)

Plans

- Human Services Needs Assessment (2022)
- AgeOptions – Area Agency on Aging Plan (2022)
- IDOA – State Plan on Aging (2022)
- VOMP Strategic Plan (2021)
- VOMP Comprehensive Plan (2017)

Other

- Aging in a Changing Region Report (2022)
- MMC AFCC Strategic Planning Survey (2022)
- Human Services Senior Focus Groups (2019)

The Task Force identified 11 themes across the 11 sources. The themes are listed in the leftmost column in the table below, followed by the definition of the theme in the second column, and the subthemes in the third column.

COMMUNITY ASSESSMENT THEMES

Theme	Definition	Subtheme
Housing	Housing as it relates to older adults includes options, economic factors and supports needed.	Housing issues to be considered include range of housing options, supportive services for those aging in place, modification needs, and affordability of senior housing.
Health and Wellness	Health and Wellness of older adults should be considered from a social, physical and mental health lens.	Issues that affect health and wellness include access to nutritious foods, physical activity opportunities, focus on prevention, response to elder abuse and neglect, access to mental health services and ability to maintain independence.
Information / Communication	Both access to information and the modality of communicating information should be considered for older adults.	Communication and information needs include awareness of programs offered, language barriers addressed, referral lists for resources and educational programs on a variety of topics.
Transportation	Transportation encompasses the methods older adults use	Transportation issues include lack of transportation options, geographic

	to get around and the various barriers and challenges they face in doing so.	restrictions to programs, difficulty managing ride share technology and lack of options for those that do not drive.
Social Engagement	Social Engagement includes both opportunities and ability to connect with others and the barriers that affect older adults.	Issues affecting social engagement include homebound status, effect of COVID pandemic, understanding barriers to engagement, opportunities to participate in and intergenerational programs.
Diverse Populations	Any identity outside of being an older adult.	Considerations for diverse populations such as veterans, LGBTQ, race and ethnicity and English as a second language. Issues identified include congregate meal sites with ethnic meals, programs delivered through lens of inclusion, needs of different age cohorts, access to programs that address social determinants to health, address language barriers.
Aging Network	The Aging network is comprised of local, state and federal agencies that service older adults.	Aging network issues include inability to understand and reach agencies regarding benefits, access to quality home and community based services, and need for inter-jurisdictional collaboration around aging issues.
Technology	Technology with regard to barriers for older adults in navigating systems and accessing information.	Technology issues include literacy, access to technology, inability to navigate applications online, education on technology needed.
Physical Environment	Physical environment as it affects older adults' ability to utilize facilities and move about the community in a safe manner.	Physical environment concerns include facility accessibility issues, safety education, increased walkability, businesses need to be handicap accessible,
Workforce / Caregivers	Issues affecting access to services for older adults and support for unpaid caregivers.	Need for paid caregivers, challenges with direct care services to older adults and lack of volunteers for aging services.
Employment / Volunteering	Opportunities for older adults to work and volunteer as they desire.	Opportunities for employment and volunteering, ability to get to and from.

Prioritization of Themes

The community assessment captured the wide breadth of issues that affect the quality of life for older adults. Many of these issues also affect quality of life for other age groups. It is not feasible to address every issue in a three-year action plan; therefore the Task Force followed a two-step process to select priority areas and goals.

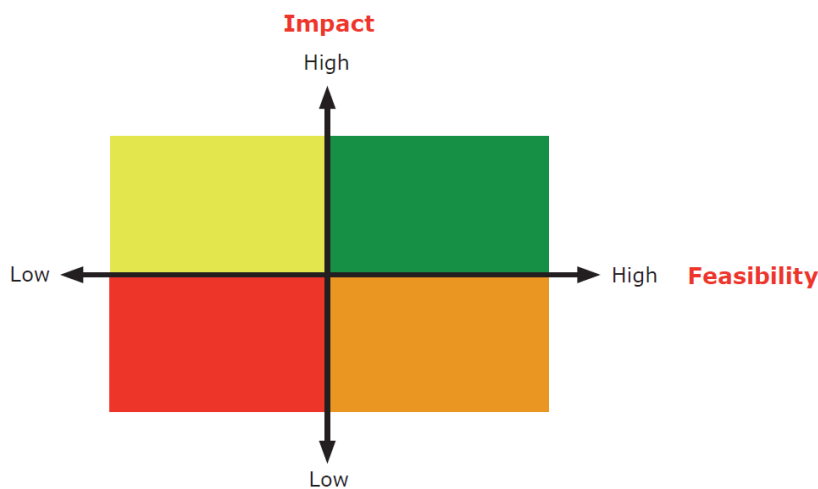
The priority areas were selected with a dot-voting method in which Task Force members were asked to choose the top five priority areas from the 11 community assessment themes that best reflect the priorities of the stakeholders in the community. The community assessment data was printed on cards and laid out on tables by theme (see image below). The data was color-coded by its source: for example, Aging in Community Survey data was printed on orange paper,

whereas senior focus group data was printed on green paper. The Task Force members were given five “dots” (stickers) to place on their top five themes. The five priorities with the most votes (dots) were housing, transportation, social engagement, information / communication, and health / wellness.

COMMUNITY ASSESSMENT DATA CARDS



FIVE PRIORITY AREAS



Once the five priority areas were selected, the Task Force sorted the priority area data into four quadrants based on high / low impact and high / low feasibility. The purpose of this exercise was to identify high impact, high feasibility goals and objectives that could be addressed in a three-year action plan.

Goals and Objectives

The Task Force created two goals per priority area, and up to three objectives per goal. The end result is an Action Plan with 10 goals and 27 objectives. The goals identify the broad, long-term outcomes to achieve, while the objectives identify the methods used to meet the goals. The objectives were drafted following the SMART model:

Specific: Who? (Target population and persons doing the activity) and What? (Action/activity)

Measurable: How will we quantify success?

Achievable: Is this feasible given current resources and constraints?


Relevant: Will this work help make progress toward the goal and strategic priority?

Time-bound: Provides a timeline indicating when the objective will be met.

The Work Groups will break down the objectives into smaller activities and tasks, and further define the ownership of each objective and activity, the time frames for implementation, and the metrics used to quantify success.

Housing


One of the resounding messages from the community assessment is the overwhelming desire of older adults to be able to live independently in their homes as they age and the strong desire to remain in their current community for as long as possible. The Task Force honed in on housing goals that make physical home modifications and home maintenance more attainable and affordable for older adults, thus allowing them to “age in place” more safely and independently.

	HOUSING
Goal 1	Enable older adults to remain in their homes through physical modifications to the structure.
1.1	Create a network of contractors and handymen available to modify homes for older adults.
1.2	Market the network to the public via automated voice response (AVR), newsletter, website, and social media, and through partner organizations.
Goal 2	Enable older adults to remain in their homes by connecting them to affordable and reliable home maintenance services.
2.1	Compile a list of handymen / maintenance companies for simple home maintenance.
2.2	Compile a list of programs, volunteers, and charities to assist with simple home maintenance.
2.3	After lists and networks are created, use newsletter, automated voice response (AVR), website, social media, and partner organizations to market these services.

Transportation


Access to reliable transportation was identified as a key to aging well and it is a critical component to success in other priority areas like social engagement and health and wellness.

One of the key issues is how to get around town if one cannot drive themselves, whether due to age, disability, or finances. The Task Force focused its transportation goals on reducing barriers to using existing public transit and ride-sharing programs, and conducting a transportation study to identify where investment in the transportation system would be most effective.

	TRANSPORTATION
Goal 3	Decrease barriers to transportation for older adults in Mount Prospect.
3.1	Host annual transportation resource fairs in conjunction with educational transportation program for older adults, persons with disabilities, and their families and friends to increase both awareness of and enrollment in existing transportation programs.
3.2	Host an educational program on a quarterly basis for older adults, persons with disabilities, and their family and friends to educate residents on various transportation options and how to navigate these options.
3.3	Develop a mechanism to educate and accompany older adults on their first public transportation ride.
Goal 4	Increase access to all of Mount Prospect via public and other transportation programs.
4.1	Host a transportation discussion with all transportation stakeholders regarding transportation for older adults and persons with disabilities.
4.2	Hire independent firm to conduct a transportation study in Mount Prospect to identify gaps in service and barriers to accessing transportation for community members with a focus on older adults and persons with disabilities.
4.3	Implement the recommendations from the transportation study to eliminate gaps in transportation services for older adults.

Social Engagement


Another resounding message from the community assessment was the desire for more activities, classes, and events for older adults to learn and socialize. The Task Force recognized that many community partners offer programming for older adults but more coordination is needed so that residents are aware of the offerings. Given the shortage in staffing and funding for many community organizations, the Task Force hopes to tap into the talent and time of the older adults to help develop and lead new programs and activities. The Task Force also recognized social isolation as a key issue, however more information is needed to identify effective interventions for the Mount Prospect community.

	SOCIAL ENGAGEMENT
Goal 5	Increase social engagement opportunities for older adults.
5.1	Create a decentralized senior center model for activities.

5.2	Increase the number of older adult-led social events and activities.
5.3	Increase the number of intergenerational programs in the community.
Goal 6	Decrease social isolation in older adults.
6.1	Research best practices, legislation, and funding for addressing social isolation.
6.2	Implement findings from research in Objective 6.1.
6.3	Develop list of places that offer congregate meal opportunities and organizations that offer meals-on-wheels programs for home-bound older adults.


Information / Communication

Information and communication was a cross-cutting theme identified by the Task Force. There is more information available than ever, but finding the right information when you need it can be an overwhelming task as we age. The Task Force identified two objectives to streamline and centralize high level information about resources and events for older adults. The community assessment noted many barriers to accessing information, including digital literacy, language, and social isolation. The Task Force would like to gather more information to identify effective communication methods to reach the older adult community.

	INFORMATION / COMMUNICATION
Goal 7	Reduce barriers for older adults to access information and resources.
7.1	Assess existing methods of communication between local community partners and older adults.
7.2	Identify older adult populations with barriers to accessing information and resources and prioritize barriers to address.
7.3	Reduce the digital divide for older adults by increasing familiarity with smartphones and computers.
Goal 8	Enhance existing methods of communication to connect older adults and their caregivers to resources and events.
8.1	Develop an easy-to-use older adult guidebook in digital and print formats.
8.2	Identify the most efficient way to alert older adults about community events.

Health / Wellness

The community assessment revealed many assets in terms of health and wellness for older adults in Mount Prospect, such as availability of doctors and hospitals, and a population that generally outperforms the US median in health metrics such as smoking and obesity prevalence and preventable hospitalization rates. The Task Force decided to focus on prevention through education; physical activity; and mental health.

	HEALTH / WELLNESS
Goal 9	Increase older adult access to health and wellness resources.
9.1	Increase physical activity among older adults by offering more free events throughout the week.
9.2	Increase awareness of health and wellness topics among older adults by offering workshops and broadcast content.
Goal 10	Increase awareness of mental health issues among older adults.
10.1	Reduce stigma about mental health issues through educational events.
10.2	Identify “dementia-friendly” practices that can be implemented in Mount Prospect.
10.3	Increase the number of older adults and stakeholders who are certified in mental health first aid.

Implementation

The Action Plan will be submitted to the Village Board and then to AARP for approval, however, AARP does not dictate a specific process for implementation. The Task Force will hand off the Action Plan to the Work Groups, who will be responsible for refining, implementing, and evaluating the plan over the next three years. There will be five work groups, each focused on one of the five priority areas.

AGING IN COMMUNITY WORK GROUPS



Work Groups will consist of 5-8 members whom are invited based on their expertise in a specific area, their work with the older adult population, or their affiliation with Mount Prospect. Village staff will assemble the Work Groups with input from Task Force members. Co-chairs will be responsible for meeting logistics, facilitation, and pushing the group to achieve the stated goals and objectives. Ideally, a Task Force member and a Village staff liaison will serve as co-chairs for each Work Group. In the beginning, Work Groups will meet monthly and transition to more or less frequency depending on the activities at hand. Work Group co-chairs will meet on a quarterly basis to report on metrics, evaluate strategies, and obtain feedback from other groups. Community members will be consulted at various stages of implementation and provided with updates on the progress of the plan.



Left: Some of the Age-Friendly Task Force Members were able to attend the Mount Prospect Committee of the Whole Meeting on March 14, 2023.

Right: Julie Kane, Director of Human Services Department, presents the Action Plan to the Village Board at the Mount Prospect Committee of the Whole Meeting on March 14, 2023.





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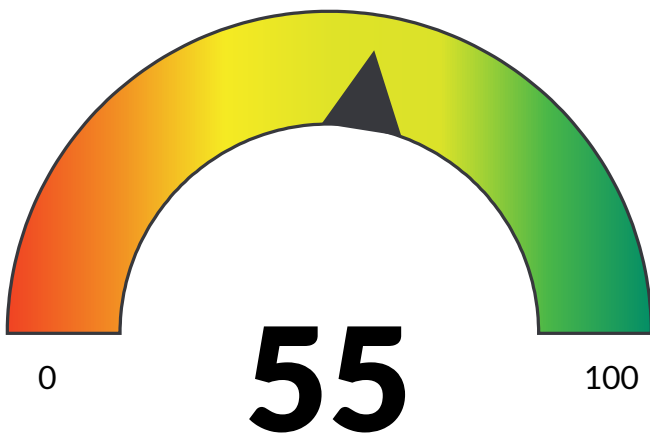
Zip Code 60056

County:

Cook County

State:

Illinois



The overall livability index score for Zip Code 60056 is 55. This is in the top half of communities in the U.S.

Demographics

Total Population:

55,080

African American: 3%

Asian: 12%

Hispanic: 14%

White: 77%

Age 50+: 38%

Age 65+: 18%

Households w/Disabilities: 10%

Life Expectancy: 82 years old

Households Without a Vehicle: 4%

Median Income: \$87,182

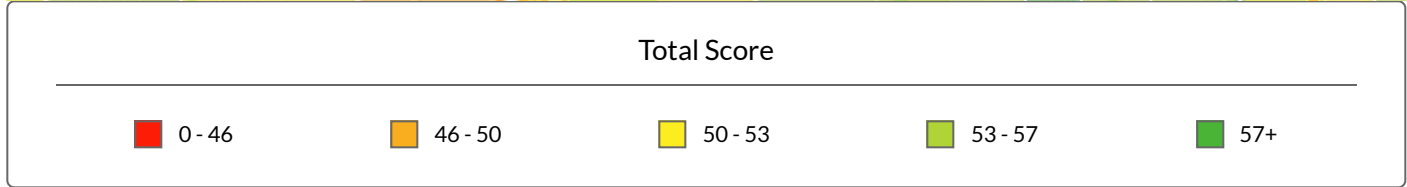
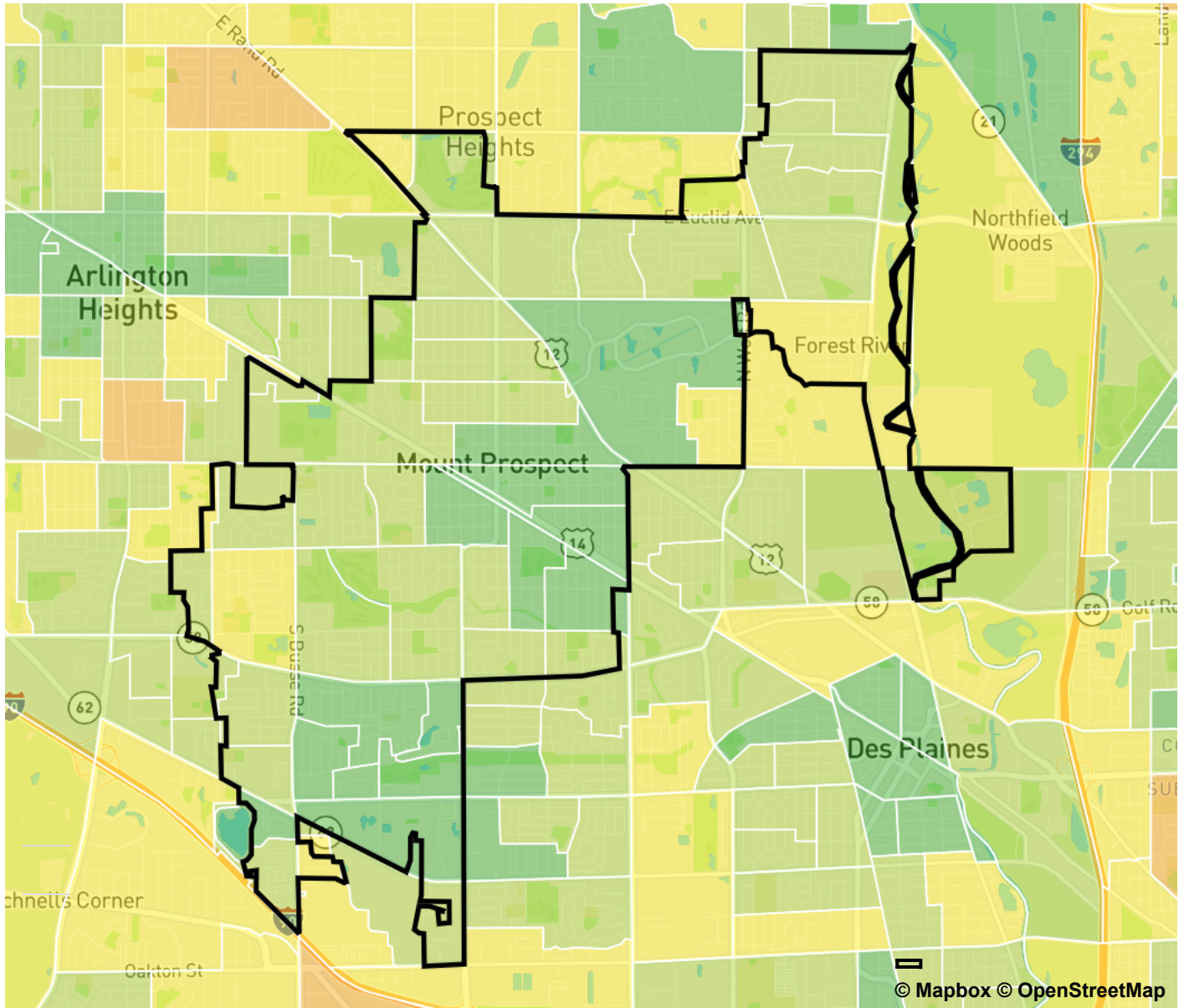
Poverty: 6%

Upward Mobility: 38

Sources for Demographic Data Points

Dive deeper into Zip Code 60056

Take a deeper dive into a neighborhood with our interactive map that includes layers of category scores, metrics and demographic information. See how livability varies from one neighborhood to the next.



Category Scores

These are the category scores for Zip Code 60056. Explore the metrics and policies behind the numbers.

Housing

Range

National Average 50



<u>Housing Metrics</u>	2015		2022	2022 US Median Neighborhood
Zero-step entrances			* 40.6% of units	50.1%
Availability of multi-family housing	42.1% of units are multi-family	↓	39.4% of units are multi-family	18%
Housing costs	\$1,415 per month	↓	\$1,547 per month	\$1,057
Housing cost burden	22.7% of income spent on housing	↑	20.4% of income spent on housing	16.3%
Availability of subsidized housing			164 units per 10,000 people	0

Key: ↑ Getting Better ↓ Getting Worse ⊖ No Change * Imputed Data

<u>Housing Policies</u>	Is there a policy here?
State and local inclusive design laws	✗ No Policy
State and local housing trust funds	✗ No Policy
State manufactured housing protections	✗ No Policy
State foreclosure prevention and protection	✗ No Policy
State accessory dwelling unit support	✗ No Policy
State and local plans to create age-friendly communities	✓ City Policy





 **Neighborhood**

Range

National Average 50



<u>Neighborhood Metrics</u>	2015		2022	2022 US Median Neighborhood
Access to grocery stores and farmers markets			1 stores and markets	0.0
Access to parks			3.3 parks	1
Access to libraries	0.3 libraries	↓	0.2 libraries	0.0
Access to jobs by transit			78,976 jobs	0
Access to jobs by auto			300,080 jobs	44,198
Diversity of destinations	0.83 (Index from 0 to 1)	↓	0.75 (Index from 0 to 1)	0.65
Activity density	8,737 jobs and people per sq. mi.	↓	7,740 jobs and people per sq. mi.	3,056
Crime rate			311 crimes per 10,000 people	217.4
Vacancy rate	5% of units are vacant	↓	6% of units are vacant	8.6%

Key:  Getting Better  Getting Worse  No Change  Imputed Data


<u>Neighborhood Policies</u>	Is there a policy here?
State and local TOD programs	 County Policy
State and local plans to create age-friendly communities	 City Policy





 **Transportation**




Range

National Average 50



<u>Transportation Metrics</u>	2015	2022	2022 US Median Neighborhood
Frequency of local transit service		3 buses and trains per hour	0
ADA-accessible stations and vehicles		75.4% of stations and vehicles are accessible	82.9%
Walk trips		0.96 trips per household per day	0.73
Congestion		40.4 hours per person per year	25.5
Household transportation costs		\$13,884 per year	\$15,331
Speed limits		28.3 miles per hour	28.0
Crash rate	4.6 fatal crashes per 100,000 people per year 	4.4 fatal crashes per 100,000 people per year	7.7

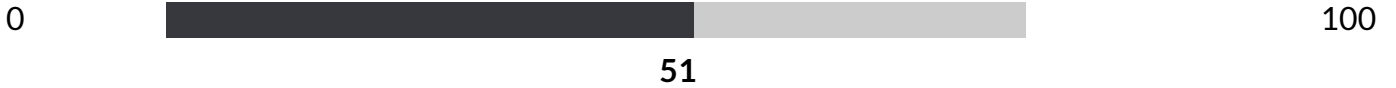
Key:  Getting Better  Getting Worse  No Change  Imputed Data



<u>Transportation Policies</u>	Is there a policy here?
State and local Complete Streets policies	 County Policy, State Policy
State human services transportation coordination	 State Policy
State volunteer driver policies	 No Policy
State and local plans to create age-friendly communities	 City Policy





 **Environment**

Range

National Average 50



<u>Environment Metrics</u>	2015	2022	2022 US Median Neighborhood
Drinking water quality	2.20% of people are exposed to violations 	0.00% of people are exposed to violations	0%
Regional air quality	28.3 unhealthy air quality days per year 	15.7 unhealthy air quality days per year	4.37
Near-roadway pollution		10.90% of people are exposed	0.00%
Local industrial pollution		0 RSEI Score from 0 to 9,070	0.00

Key:  Getting Better  Getting Worse  No Change  Imputed Data

<u>Environment Policies</u>	Is there a policy here?
State utility disconnection policies	 No Policy
Local multi-hazard mitigation plans	 City Policy, County Policy
State energy efficiency scorecard	 No Policy
State and local plans to create age-friendly communities	 City Policy

 **Health**

Range

National Average 50



<u>Health Metrics</u>	2015		2022	2022 US Median Neighborhood
Smoking prevalence			13.9% of people smoke regularly	18%
Obesity prevalence			25.0% of adults are obese	32.2%
Access to exercise opportunities			99.1% of people have access	90.1%
Healthcare professional shortage areas	0 (Index from 0 to 26)	⊖	0 (Index from 0 to 26)	0
Preventable hospitalization rate			37.7 preventable hospitalizations per 100,000 patients	48.5
Patient satisfaction	74.1% of patients are satisfied	↓	74.0% of patients are satisfied	71.8%

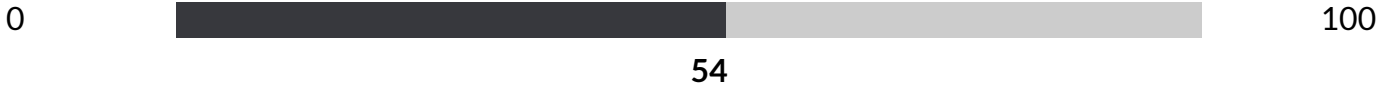
Key: ↑ Getting Better ↓ Getting Worse ⊖ No Change * Imputed Data

<u>Health Policies</u>	Is there a policy here?
State and local smoke-free laws	✓ County Policy, State Policy
State and local plans to create age-friendly communities	✓ City Policy





 Engagement






Range

National Average 50



<u>Engagement Metrics</u>	2015	2022	2022 US Median Neighborhood
Broadband cost and speed		91.7% of residents have high-speed, competitively-priced service	93.7%
Opportunity for civic involvement		5.4 organizations per 10,000 people	1.18
Voting rate		55.6% of people voted	61.9%
Social involvement index		0.97 (Index from 0 to 2.5)	0.96
Cultural, arts, and entertainment institutions		0.2 institutions per 10,000 people	8.01

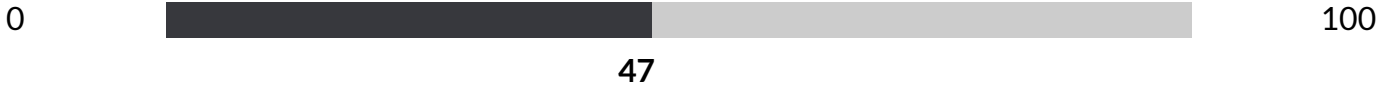
Key:  Getting Better  Getting Worse  No Change  Imputed Data




<u>Engagement Policies</u>	Is there a policy here?
State barriers to community broadband	 No Policy
Early, absentee, or mail-in state voting laws	 State Policy
Local human rights commissions	 No Policy
Municipal LGBTQ+ anti-discrimination laws	 No Policy
State and local plans to create age-friendly communities	 City Policy





 **Opportunity**





Range

National Average 50



<u>Opportunity Metrics</u>	2015		2022	2022 US Median Neighborhood
Income inequality	0.5 (Index from 0 to 1)		0.51 (Index from 0 to 1)	0.46
Jobs per worker	0.77 jobs per person		0.81 jobs per person	0.80
High school graduation rate			94.2% of students graduate	88.5%
Age diversity	0.86 (Index from 0 to 1)		0.82 (Index from 0 to 1)	0.85

Key:  Getting Better  Getting Worse  No Change  Imputed Data

<u>Opportunity Policies</u>	Is there a policy here?
Local government creditworthiness	 No Policy
State and local minimum wage increase	 County Policy
State expansion of the Family and Medical Leave Act	 No Policy
State and local plans to create age-friendly communities	 City Policy



AGING IN COMMUNITY Survey Report

September 2022



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Appendix A: Aging in Community Survey Questions

Executive Summary

The Village of Mount Prospect launched the Aging in Community Initiative in 2019. **The mission of the initiative is to strengthen community infrastructure and systems that enhance the lives of older adults.** The Village has convened an Age-Friendly Task Force to carry out this mission. The Task Force launched the Aging in Community Survey in 2021 to collect information about the current and anticipated needs of older adults in the community. This information will help shape the priorities of a three-year Age-Friendly Action Plan. The Task Force analyzed the survey responses and identified the overall themes, as well as strengths, weaknesses, opportunities, and threats that emerged from the survey data.

Themes from the Survey

Housing	<ul style="list-style-type: none"> • Strong desire to stay in home as long as possible • About half of respondents said a home modification would be needed • Lack of housing options for older adults to transition as they age • Housing affordability 	
Transportation	<ul style="list-style-type: none"> • Heavy dependence on private vehicles for transportation • Few people reported using public transportation and it scored low for its “convenience” 	
Information	<ul style="list-style-type: none"> • Lack of awareness of available resources • Need information in many formats (e.g. print, electronic, phone, multiple languages) 	
Employment	<ul style="list-style-type: none"> • Employment questions scored lowest out of all the categories • Challenges identifying and getting to / from volunteer opportunities 	
Social Engagement	<ul style="list-style-type: none"> • Understand barriers to participating in social opportunities (transportation, cost, age of participants, cultural, etc.) 	
Special Populations	<ul style="list-style-type: none"> • Different strategies for reaching different age cohorts (e.g. pre-retirement vs. post-retirement age) • Collect more information from minority populations about their needs 	

Image Credits: Andrejs Kirma, Icon Solutions, Ricki Tri Putra, Adrien Coquet, and Guilherme Furtado from the Noun Project




Strengths

Overall the respondents thought Mount Prospect was a “very good” place for people to live as they age. Many respondents have lived in the community a long time, conveying a sense of satisfaction and ownership. This is echoed in the overwhelming desire to be able to live independently in their homes as they age and the strong desire to remain in their current community for as long as possible. The physical environment was rated highly for the quality of its sidewalks, hospitals and health care facilities, and well-maintained homes and properties. Questions related to health care professionals were rated “very good” on average. The library, faith community, and park districts were identified as key resources for life-long learning, while the most trusted sources of information were family and friends, senior centers, units of local government, and health care professionals. There was a low response rate about home repair services in the community, but those who did respond rated these categories

“very good.” Few reported using public transportation, but those who do rated the public transit “very good” in terms of safety. At an individual level, most respondents self-reported as being in “very good” health. 90% of respondents have daily or weekly contact with others, and 90% have someone to call any time of day or night if they were in trouble or distress.

Weaknesses

 While most respondents expressed a preference to stay in their homes, data suggests that the community does not have enough facilities to accommodate those that need to move out of their homes. Questions asking about the availability of affordable housing, variety of housing options for older adults, and physically accessible homes received low scores. Personal safety or security concerns were cited as a “major factor” if respondents were to move from their current community, though it was not clear if the concerns were from home safety (e.g. falling hazards) or community safety (e.g. crime). 74% of respondents reported living in single-family homes, and 50% of respondents reported that their home would need major repairs and / or modifications to stay there as long as possible. When asked to rate the community’s home repair and maintenance services, there was a high proportion of “no response,” suggesting that residents may be unfamiliar with these services. In the area of Education, Civic Engagement, and Volunteering, respondents gave a “fair” rating for “activities that offer senior discounts” and “transportation to and from volunteer opportunities.” Village Hall and the local Senior Center appear to be under-utilized as a source for continuing education and self-improvement classes, and there may be a lack of awareness about local service agencies. When asked to rate health and wellness services, accessible mental health services and affordable in-home caregiving scored lowest.



Opportunities

One of the biggest opportunities identified by the Task Force was helping adults plan ahead of time for how they would like to age, rather than waiting for a crisis before decisions are made. There is a great deal of information available but there has to be a strategy to coordinate delivery of and access to the information. Mount Prospect has taken steps to enhance information dissemination through a senior newsletter and could potentially fill additional information gaps through this vehicle. Other ideas such as a directory phone service (e.g. 311) and aging workshops were discussed. Many community organizations and institutions have existing programs and services, and where possible organizations should partner instead of re-creating existing programs. New forms of technology can pose a barrier for older adults, but it can also be an opportunity for greater engagement and connection to family and friends through texting, video calls, and social media. There is an opportunity to help older adults achieve their goals to live safely and independently in their homes for as long as possible by supporting access to affordable home remodeling and maintenance services, and exploring universal housing design. Finally, almost three-quarters of the respondents reported that they were retired, which represents a potential source of volunteers and advocates who may have spare time to support older adult initiatives.

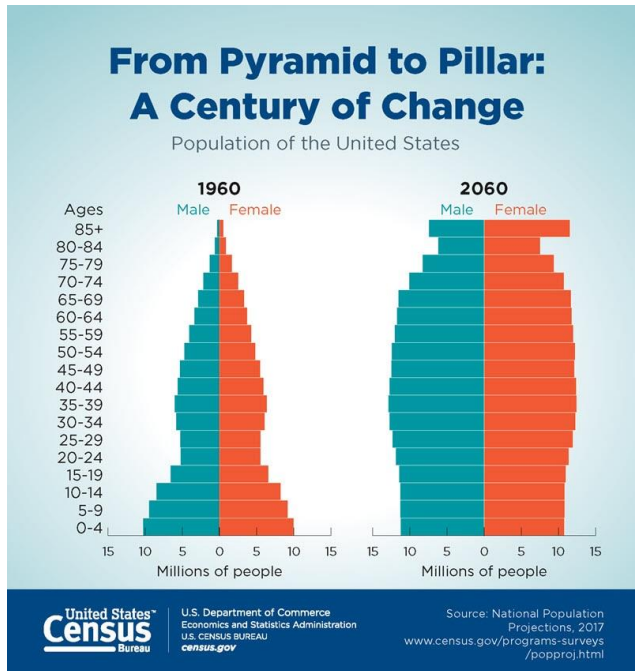


Threats

For some older adults, employment is not optional, but various barriers such as ageism or the need to take care of a loved one can make it difficult to find work. Costs continue to rise for caregiving services and 28% of respondents said they were “very likely” or “extremely likely” to provide unpaid care to an adult loved one in the future. The Covid-19 pandemic was cited as a major threat that greatly impacted many aspects of aging, including increased pressure on the caregiving workforce, reduced access to in-home services, and fewer socialization opportunities. Nearly one-third of the respondents reported that they lived alone. Social media, while a great connector, can also exacerbate feelings of isolation or anxiety. Older adults may be resistant to change and may find it challenging to downsize their belongings, adapt to new technology, or try new ways of doing things. 93% of respondents reported that they drive themselves, but the Task Force found that most people are not prepared for when they can no longer drive, and suburban infrastructure is predominantly car-oriented. The country is facing a severe housing shortage of all types of housing, which has increased housing prices for all demographics. Lastly, many local institutions do not have the capacity to deliver information and services to non-English speakers.

Introduction

Our population is aging – and this demographic shift comes with opportunities and challenges.



17% of Mount Prospect’s population is 65+

24% of suburban Cook older adults are householders that live alone

32% of suburban Cook adults 60+ are still in the labor force

3 in 4 adults age 50+ want to stay in their homes and communities as they age

By 2030, **1 in 5** Americans will be over the age of 65

By 2050, people 50+ will spend **61 cents** out of every retail dollar spent

By 2060, life expectancy for Americans is projected to increase to **85.6 years**¹

Recognizing this trend, the Village of Mount Prospect launched the Aging in Community Initiative in 2019. The mission of the initiative is to strengthen community infrastructure and systems that enhance the lives of older adults.

The Village convened an Age-Friendly Task Force to carry out this mission. The Task Force launched the Aging in Community Survey to collect information about the current and anticipated needs of older adults in the community. This information will help shape the priorities of a three-year Age-Friendly Action Plan.

Survey Methodology

The Task Force adapted the 2020 AARP Age-Friendly Community Survey to create the 2021 Village of Mount Prospect Aging in Community Survey. The survey questions are available in Appendix A. The target population for the survey was Mount Prospect residents ages 55 and over. The survey included 44 multiple choice questions and 1 open-ended question covering the following topics:

Aging in Our Community	Employment and Jobs	Caregiving
Aging in Our Homes	Health and Wellness	Social Isolation
Communication and Information	Physical Environment	Demographics
Education, Civic Engagement, Volunteering	Transportation (Public)	

¹ Fact Sources: 1, 2, 3. American Community Survey 5-year Estimates, 2015-2019; 4. AARP.org; 5. Census.gov; 6. AARP.org; 7. Census.gov; Population Pyramid – Census.gov.

The survey was available in English and Spanish, and the Village offered assistance to other non-English speakers through language line services. Hanul Family Alliance provided a Korean translator for survey events held at some of the senior residences. Respondents could complete the survey online or fill out a paper copy. The survey did not request any identifying information, so all responses were completely anonymous. None of the survey questions were required; participants could elect to skip any questions they did not wish to answer.

The Age-Friendly Task Force employed a variety of marketing strategies to raise awareness of the survey and distributed surveys at numerous locations and events, such as:

- Direct mailing to 65+ year old residents who purchased vehicle sticker with senior discount (over 5,000 households)
- Aging in Community Kick-Off Event at Village Hall
- Aging in Community Workshop at Village Hall
- Community Connections Center Survey Distribution Event
- Fire Department blood drives
- Medicare Part D open enrollment events
- Events at residential buildings where older adults live
- Distribution of surveys at community organizations, such as senior centers and churches
- Spreading the word through digital communications such as social media, press release, and newsletters

The survey was open for approximately 4 months, from September 29, 2021 through January 20, 2022. The Village received 466 surveys, all of which were analyzed to produce this data report. The number of responses (N) for each question is 466 unless otherwise noted. Some questions asked the respondents to rate various characteristics of the community on a scale of 1 to 5, 1 meaning “Poor” and 5 meaning “Excellent.” Each characteristic was designated an overall “score” based on a weighted average of the responses. The scales and scores used for each question are provided in the results.

Community Characteristic Scores

Respondents were asked to score various characteristics of the community on a scale of 1 to 5, 1 meaning “Poor” and 5 meaning “Excellent.” The following chart depicts the characteristics in descending order from highest rated to lowest rated.

#	Community Characteristic	Score	Scale	Category
18	Quality of health care professionals	4.10	Very good	Health and Wellness
15	Conveniently located hospitals, health care facilities, and emergency care centers	4.10	Very good	Physical Environment
18	Availability of health care professionals	4.05	Very good	Health and Wellness
15	Well-maintained homes and properties	3.99	Very good	Physical Environment
18	Diversity of health care professionals	3.87	Very good	Health and Wellness
15	Well-maintained and safe parks	3.76	Very good	Physical Environment
18	Affordability of health care professionals	3.64	Very good	Health and Wellness
3	How would you rate your current community as a place for people to live as they age?	3.61	Very good	Aging in Our Community
14	Sidewalks that are in good condition, safe for pedestrians, and accessible for wheelchairs or other assistive mobility devices	3.56	Very good	Physical Environment
15	Public buildings and spaces, including restrooms, that are accessible to people of different physical abilities	3.53	Very good	Physical Environment
13	Home modification and home repair contractors who are trustworthy, do quality work, and are affordable	3.48	Very good	Aging in Our Homes
15	Conveniently located, affordable public parking and sufficient handicap parking	3.46	Very good	Physical Environment
15	Conveniently located shopping and services for daily needs (grocery, pharmacy, etc.)	3.46	Very good	Physical Environment
13	Seasonal services such as lawn work or snow removal for low-income and older adults	3.40	Very good	Aging in Our Homes
14	Well-lit, accessible, safe streets and intersections for all users	3.37	Good	Physical Environment
30	Free access to computers and the Internet in public places	3.33	Good	Communication and Information
17	Safe	3.22	Good	Transportation (Public)
19	Affordable health and wellness programs and classes like nutrition, diabetic management and weight control	3.20	Good	Health and Wellness
19	Accessible social services	3.20	Good	Health and Wellness
14	Sufficient time for pedestrian crossings	3.19	Good	Physical Environment
15	Enough benches for resting in public areas	3.17	Good	Physical Environment
30	Access to community information in one central source	3.17	Good	Communication and Information
14	Audio and visual pedestrian crossings	3.12	Good	Physical Environment
19	Affordable physical fitness activities for older adults	3.11	Good	Health and Wellness
25	A range of volunteer activities to choose from	3.06	Good	Education, Civic Engagement, Volunteering
23	Continuing education classes or social clubs to pursue new interests and hobbies	3.04	Good	Education, Civic Engagement, Volunteering
15	Well-maintained, safe, affordable housing	3.04	Good	Physical Environment
23	Conveniently located entertainment venues	3.00	Good	Education, Civic Engagement, Volunteering

Appendix B: Aging in Community Survey Report

15	Housing options for older adults such as active adult communities, assisted living, memory care, and skilled nursing	3.00	Good	Physical Environment
30	Clearly displayed printed community information with large lettering	2.99	Good	Communication and Information
17	Affordable	2.98	Good	Transportation (Public)
23	Activities or events that involve both younger and older people	2.93	Good	Education, Civic Engagement, Volunteering
19	Accessible mental health services	2.91	Good	Health and Wellness
30	Community information that is available in a number of different languages	2.88	Good	Communication and Information
19	Affordable in-home services including care giving, personal care, housekeeping, and cooking	2.86	Good	Health and Wellness
23	A variety of cultural activities for diverse populations	2.85	Good	Education, Civic Engagement, Volunteering
17	Accessible	2.81	Good	Transportation (Public)
25	Opportunities for older adults to participate in decision making bodies such as community councils or committees	2.79	Good	Education, Civic Engagement, Volunteering
17	Timely	2.76	Good	Transportation (Public)
25	Easy to find information on available local volunteer opportunities	2.71	Good	Education, Civic Engagement, Volunteering
30	Community information that is delivered in person to people who may have difficulty or may not be able to leave their home	2.70	Good	Communication and Information
17	Convenient	2.68	Good	Transportation (Public)
23	Activities geared specifically towards older adults	2.65	Good	Education, Civic Engagement, Volunteering
15	Homes that are built with things like a no step entrance, wider doorways, and first floor bedrooms and bathrooms	2.64	Good	Physical Environment
14	Separate pathways for bicyclists and pedestrians	2.61	Good	Physical Environment
23	Activities that offer senior discounts	2.56	Fair	Education, Civic Engagement, Volunteering
28	A range of flexible job opportunities for older adults	2.45	Fair	Employment and Jobs
28	Policies that ensure older adults can continue to have equal opportunity to work for as long as they want or need to regardless of their age	2.39	Fair	Employment and Jobs
28	Jobs that are adapted to meet the needs of people with disabilities	2.34	Fair	Employment and Jobs
25	Transportation to and from volunteer activities	2.31	Fair	Education, Civic Engagement, Volunteering
28	Job training opportunities for older adults who want to learn new job skills within their job or get training in a different field of work	2.28	Fair	Employment and Jobs

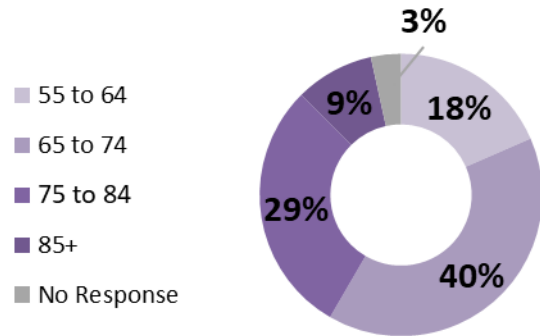
Demographics

Age

The majority of respondents (40%) were between the ages of 65 and 74. The median age of respondents was 72.

What is your age as of your last birthday?	Number	Percent
55 to 59 years	35	8%
60 to 64 years	51	11%
65 to 69 years	87	19%
70 to 74 years	99	21%
75 to 79 years	73	16%
80 to 84 years	63	14%
85 years and over	42	9%
No Response	16	3%
TOTAL	466	100%

What is your age as of your last birthday?

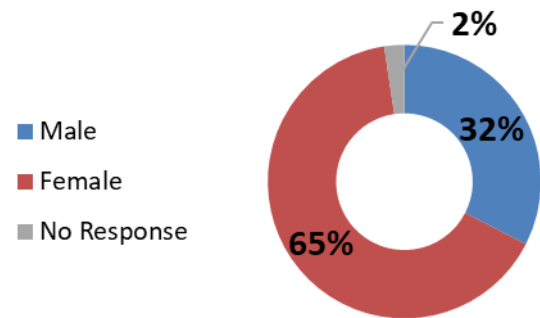


Gender

Two-thirds of respondents were female, and one-third were male.

How do you identify?	Number	Percent
Male	151	32%
Female	302	65%
Other (please specify)	2	0%
No Response	11	2%
TOTAL	466	100%

How do you identify?

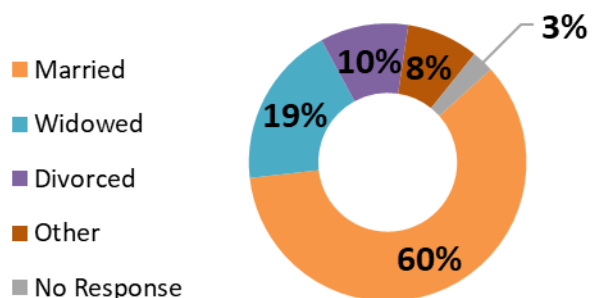


Marital Status

The majority of respondents (60%) were married.

What is your current marital status?	Number	Percent
Married	279	60%
Not married, living together	5	1%
Separated	3	1%
Divorced	48	10%
Widowed	88	19%
Never Married	24	5%
Other (please specify)	7	2%
No Response	12	3%
TOTAL	466	100%

What is your current marital status?

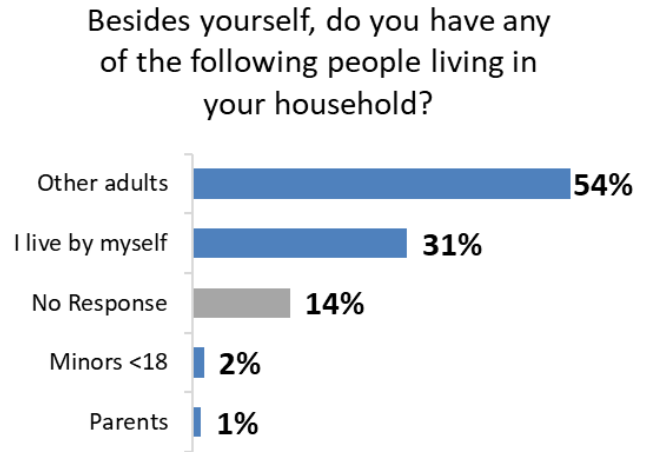


Household Composition

Over half of respondents (54%) lived with other adults in their home, while almost one-third lived by themselves. Few respondents reported living with minors under 18 or with parents.

Besides yourself, do you have any of the following people living in your household? (Check all that apply)	Number	Percent
Other adults	251	54%
I live by myself	143	31%
No Response	65	14%
Minors <18	8	2%
Parents	6	1%
TOTAL	466	*

* Respondents could choose more than one response so the total does not equal 100%

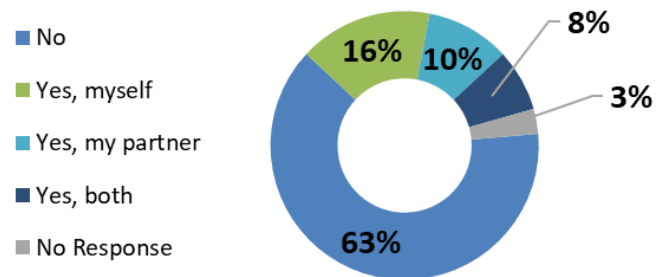


Disability Status

One-third of respondents (34%) reported that themselves or their partner have a disability, handicap, or chronic disease that keeps them from fully participating in various activities.

Does any disability, handicap, or chronic disease keep you or your spouse or partner from participating fully in work, school, housework, or other activities?	Number	Percent
No	295	63%
Yes, myself	75	16%
Yes, my partner	47	10%
Yes, both	35	8%
No Response	14	3%
TOTAL	466	100%

Does any disability, handicap, or chronic disease keep you or your spouse or partner from participating fully in work, school, housework, or other activities?

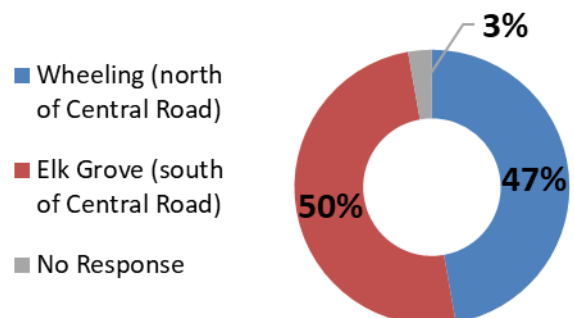


Township

Respondents were split almost evenly between Elk Grove and Wheeling Townships.

What township do you live in?	Number	Percent
Wheeling (north of Central Road)	220	47%
Elk Grove (south of Central Road)	233	50%
No Response	13	3%
TOTAL	466	100%

What township do you live in?

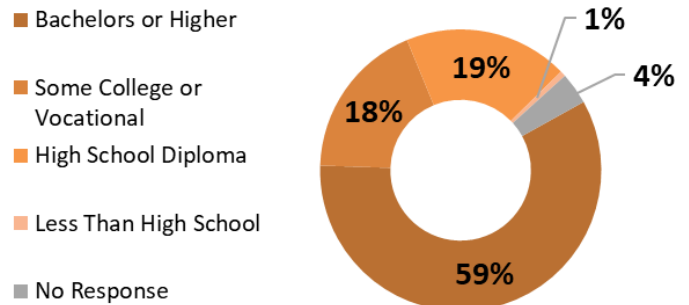


Educational Level

The majority of respondents (60%) completed a 4-year college degree or higher.

What is the highest level of education that you completed?	Number	Percent
Graduate or professional degree(s)	147	32%
4-year college degree	126	27%
2-year college degree	54	12%
Vocational training / certificate	31	7%
High school, GED or equivalent	88	19%
Less than a high school diploma	3	1%
No Response	17	4%
TOTAL	466	100%

What is the highest level of education that you completed?

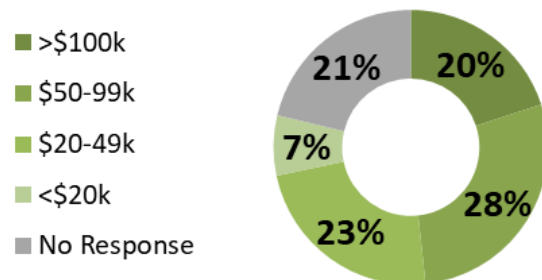


Household Income

Respondents were distributed fairly evenly across income levels, with most households (28%) earning between \$50k and \$99k. 21% of survey participants did not respond to this question.

What was your annual household income before taxes in 2020?	Number	Percent
\$150,000 or more	50	11%
\$100,000 to \$149,999	43	9%
\$75,000 to \$99,999	60	13%
\$50,000 to \$74,999	72	15%
\$30,000 to \$49,999	73	16%
\$20,000 to \$29,999	36	8%
\$10,000 to \$19,999	28	6%
Less than \$10,000	5	1%
No Response	99	21%
TOTAL	466	100%

What was your annual household income before taxes in 2020?

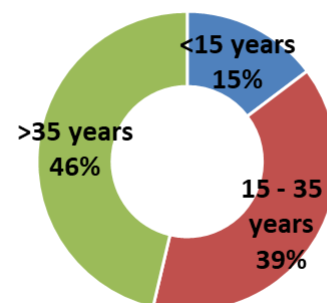


Years Lived in Community

Nearly half of respondents (46%) have lived in the community for over 35 years; a quarter (25%) of respondents have lived here 46 years or more. The Village received the fewest responses (6%) from residents living in the community less than five years.

How long have you lived in your community?	Number	Percent
Less than 5 years	27	6%
5 – 14 years	41	9%
15 - 25 years	86	18%
26 - 35 years	94	20%
36 - 45 years	98	21%
46 years or more	116	25%
No Response	4	1%
TOTAL	466	100%

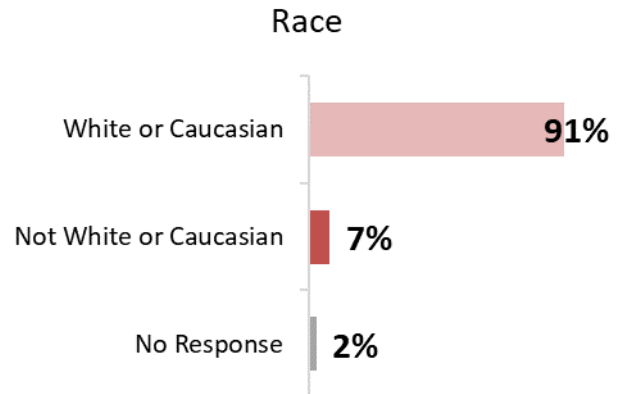
How long have you lived in your community?



Race

Most respondents (91%) identified as White, while 7% identified as non-White. The second most selected race was Asian, or 4% of respondents.

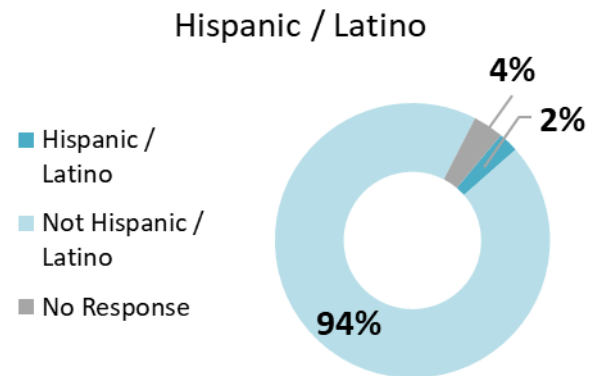
What is your race? (Check all that apply)	Number	Percent
White or Caucasian	424	91%
Asian	20	4%
Multi-racial	5	1%
Other (please specify)	5	1%
Black or African American	2	0%
American Indian or Alaska Native	2	0%
Native Hawaiian or other Pacific Islander	0	0%
No Response	11	2%
TOTAL	466	*



Hispanic Origin

Most respondents (94%) identified as non-Hispanic / Latino, while 2% identified as Hispanic / Latino.

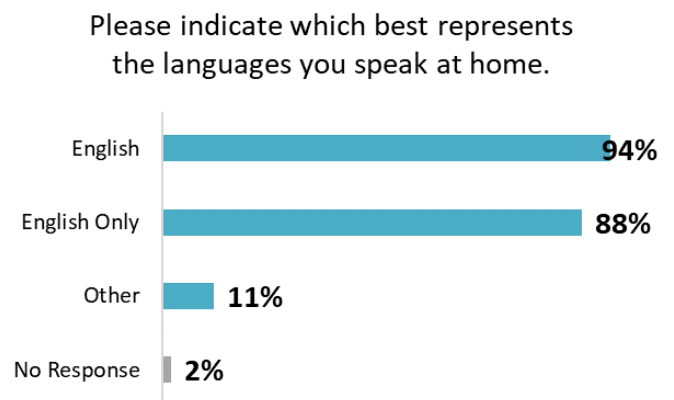
Are you of Hispanic, Spanish, or of Latino origin or descent?	Number	Percent
Hispanic / Latino	14	2%
Not Hispanic / Latino	436	94%
No Response	16	4%
TOTAL	466	100%



Language

Most respondents (94%) speak English at home; 88% of respondents speak only English. 11% of respondents speak other languages alone or in addition to English. The two most spoken languages after English were Spanish (2%) and Korean (2%).

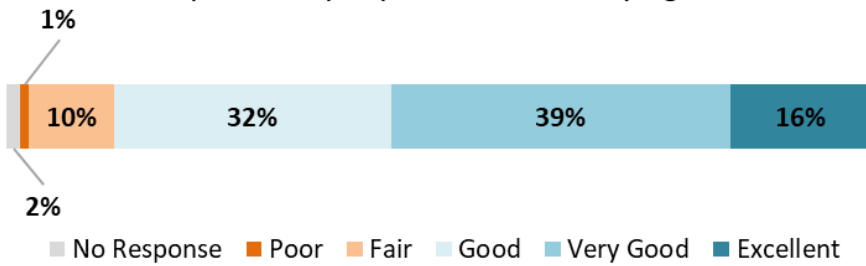
Please indicate which best represents the languages you speak at home. (Check all that apply)	Number	Percent
English	438	94%
Other (please specify)	23	5%
Spanish	9	2%
Korean	9	2%
Polish	7	2%
Gujarati	2	0%
No Response	8	2%
TOTAL	466	*



Aging in Our Community

This section explores the various factors influencing the decision to remain in or depart from the community, and to remain in or depart from their current home. Overall, the Village was rated as a **“Very Good” place for people to live as they age** and most respondents said they were more likely to stay in their current residence and never move. The biggest factor influencing a decision to move out of their current home was **“wanting a home that will help you live independently as you age.”** The biggest factor influencing a decision to move out of their current community was **“personal safety or security concerns.”** Overall, respondents said it was **“Very Important” to remain in their current community as long as possible.**

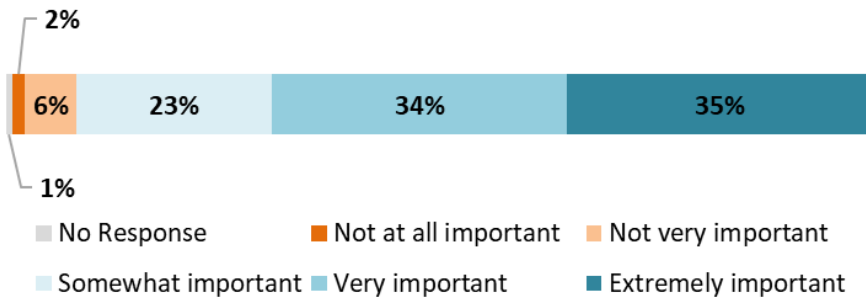
How would you rate your current community as a place for people to live as they age?



Weighted Score
3.61 Very Good

Scale	
4.2 - 5.0	Excellent
3.4 - 4.2	Very Good
2.6 - 3.4	Good
1.8 - 2.6	Fair
1.0 - 1.8	Poor

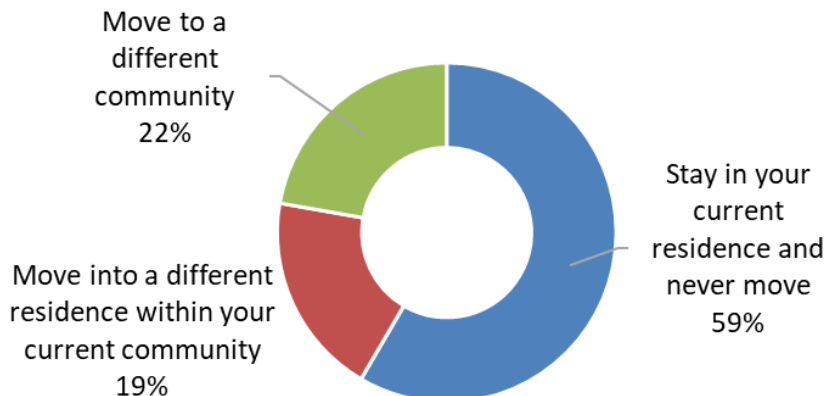
How important is it for you to remain in your current COMMUNITY for as long as possible?



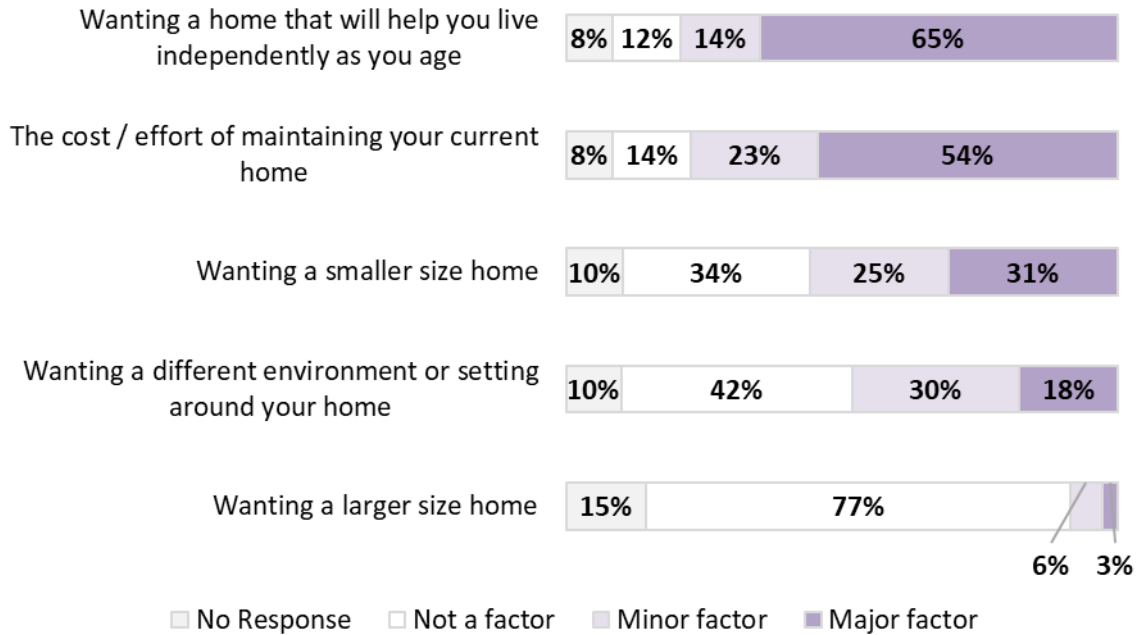
Weighted Score
3.96 Very Important

Scale	
4.2 - 5.0	Extremely important
3.4 - 4.2	Very important
2.6 - 3.4	Somewhat important
1.8 - 2.6	Not very important
1.0 - 1.8	Not at all important

Thinking about your future years, are you more likely to:



If you were to consider moving out of your current HOME, what factors would influence your decision?



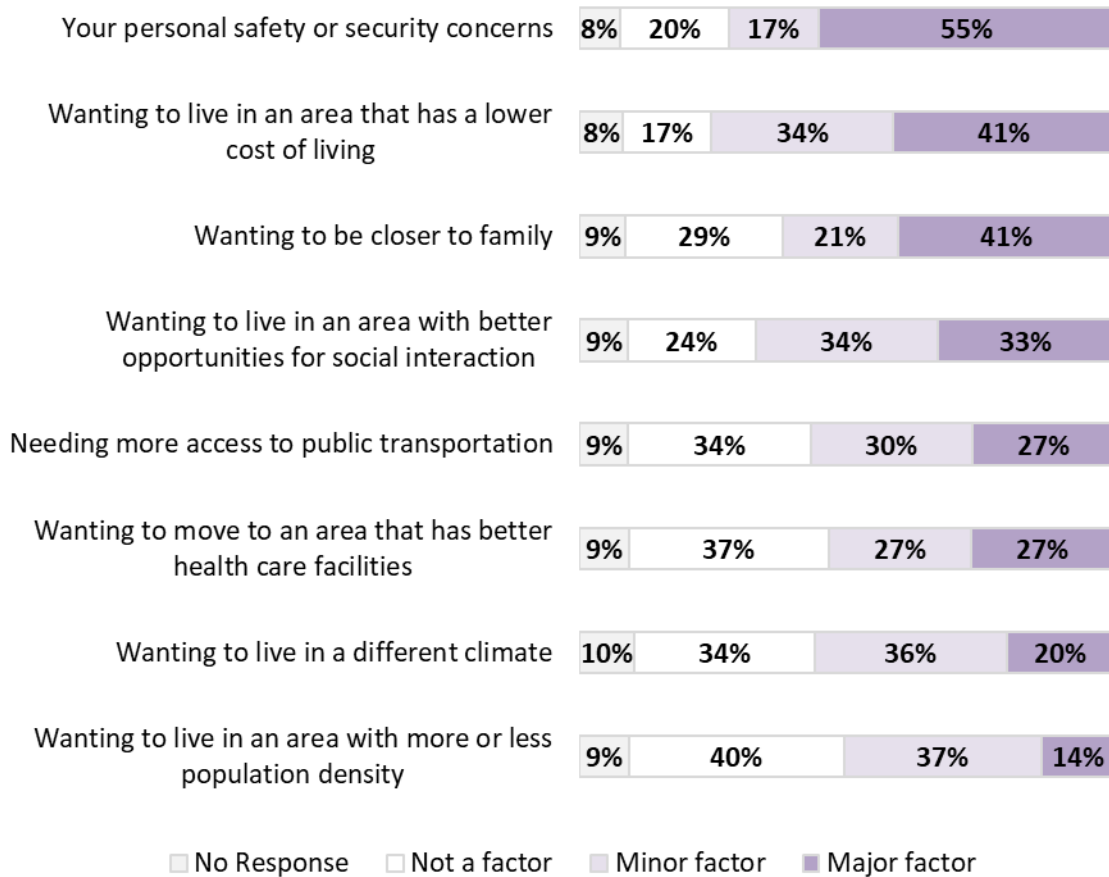
Scale

Major	2.33 - 3.00
Minor	1.66 - 2.33
Not	1.00 - 1.66

Weighted Scores

Wanting a home that will help you live independently as you age	2.57	Major factor
The cost / effort of maintaining your current home	2.44	Major factor
Wanting a smaller size home	1.96	Minor factor
Wanting a different environment or setting around your home	1.73	Minor factor
Wanting a larger size home	1.13	Not a factor

If you were to consider moving out of your current COMMUNITY, what factors would influence your decision?



Scale

Major	2.33 - 3.00
Minor	1.66 - 2.33
Not	1.00 - 1.66

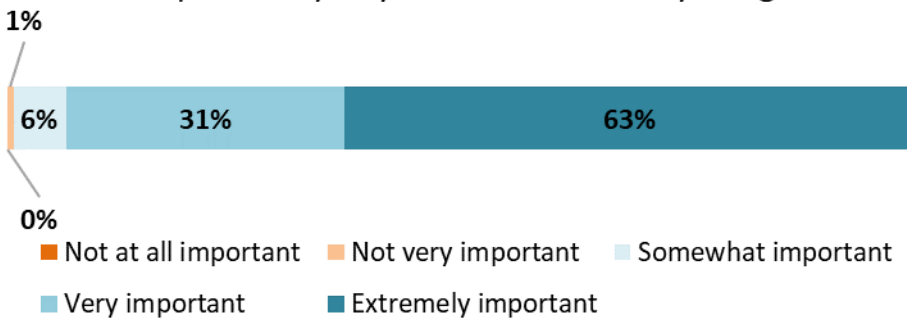
Weighted Scores

Your personal safety or security concerns	2.38	Major factor
Wanting to live in an area that has a lower cost of living	2.27	Minor factor
Wanting to be closer to family	2.12	Minor factor
Wanting to live in an area w/ better opportunities for social interaction	2.10	Minor factor
Needing more access to public transportation	1.92	Minor factor
Wanting to move to an area that has better health care facilities	1.88	Minor factor
Wanting to live in a different climate	1.85	Minor factor
Wanting to live in an area with more or less population density	1.71	Minor factor

Aging in Our Homes

The questions in this section asked respondents to describe the type of housing they live in and evaluate characteristics that may prevent them from staying in the home as they age. Respondents thought it was **“Extremely Important” to be able to live independently in their own homes as they age**; this question received the highest weighted score of all the questions on the survey, suggesting that respondents strongly desire the opportunity to “age in place” with independence. Most respondents live in a **single-family house**, and most respondents **own their home**, regardless of the type. Over three-quarters said they have to use stairs to access a part of their home. **Stairs were the number one area in the home needing major repairs**, modifications, or changes to enable residents to stay in the home as long as possible. Overall, the respondents rated the community’s **home repair and maintenance services as “Very Good.”**

How important is it for you to be able to live independently in your own HOME as you age?



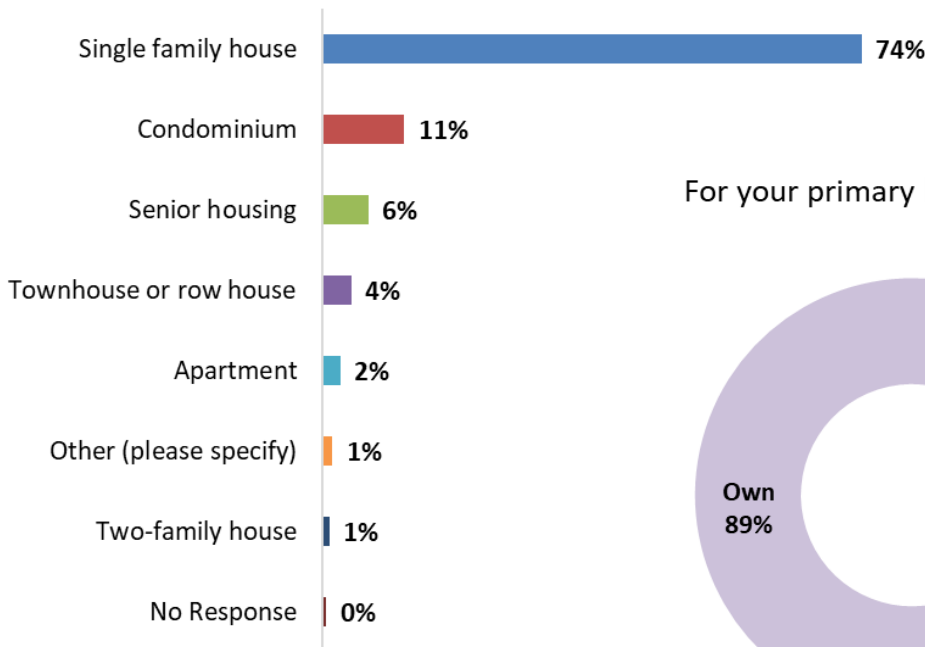
Weighted Score

4.56 Extremely Important

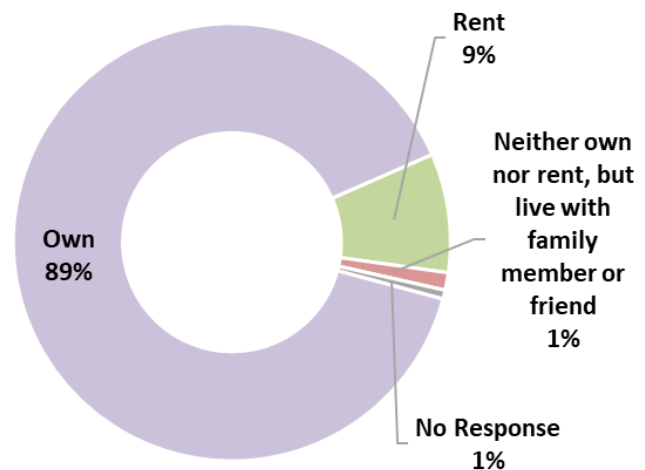
Scale

4.2 - 5.0	Extremely important
3.4 - 4.2	Very important
2.6 - 3.4	Somewhat important
1.8 - 2.6	Not very important
1.0 - 1.8	Not at all important

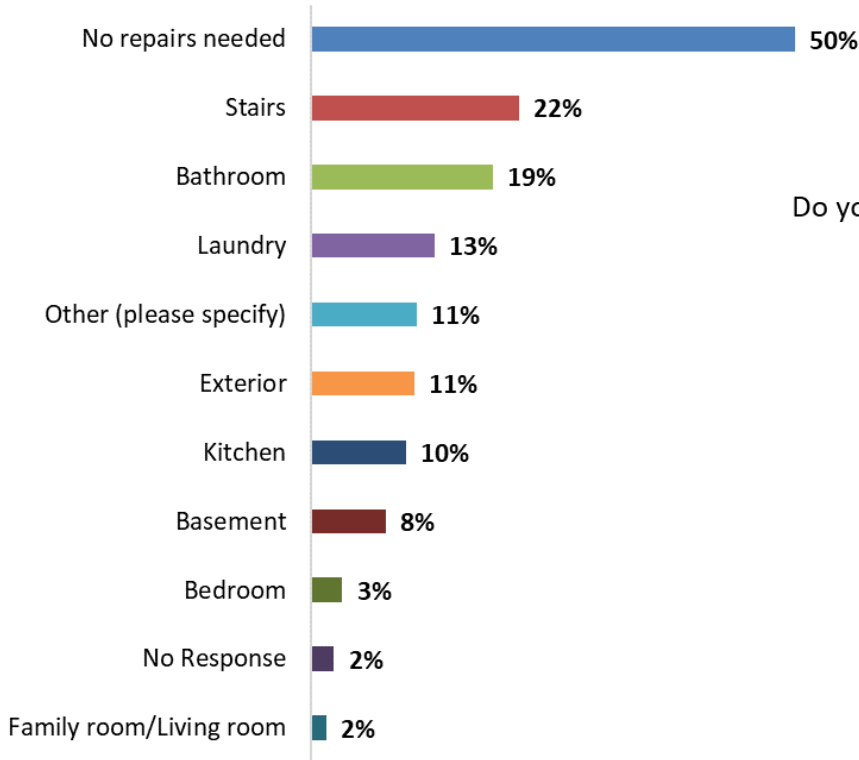
Which of the following types of homes best describes where you currently live?



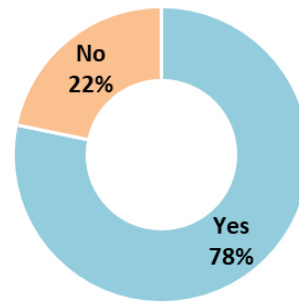
For your primary home, do you...



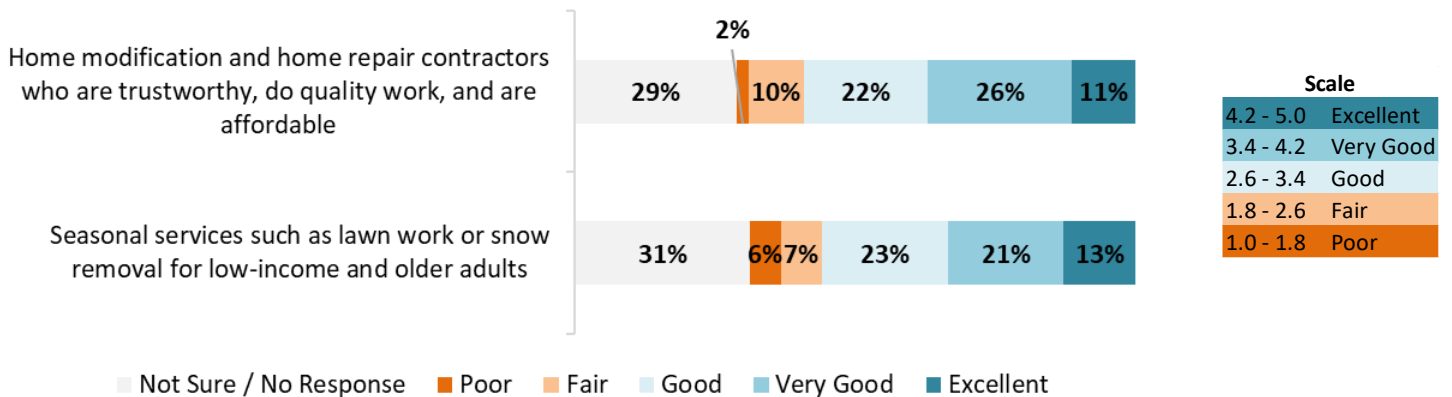
Which areas in your home need major repairs, modifications, or changes to enable you to stay there for as long as possible? [Check all that apply]



Do you have to use stairs to access any part of your home?



How would you rate your community's home repair and maintenance services?



Scale	
4.2 - 5.0	Excellent
3.4 - 4.2	Very Good
2.6 - 3.4	Good
1.8 - 2.6	Fair
1.0 - 1.8	Poor

Weighted Scores

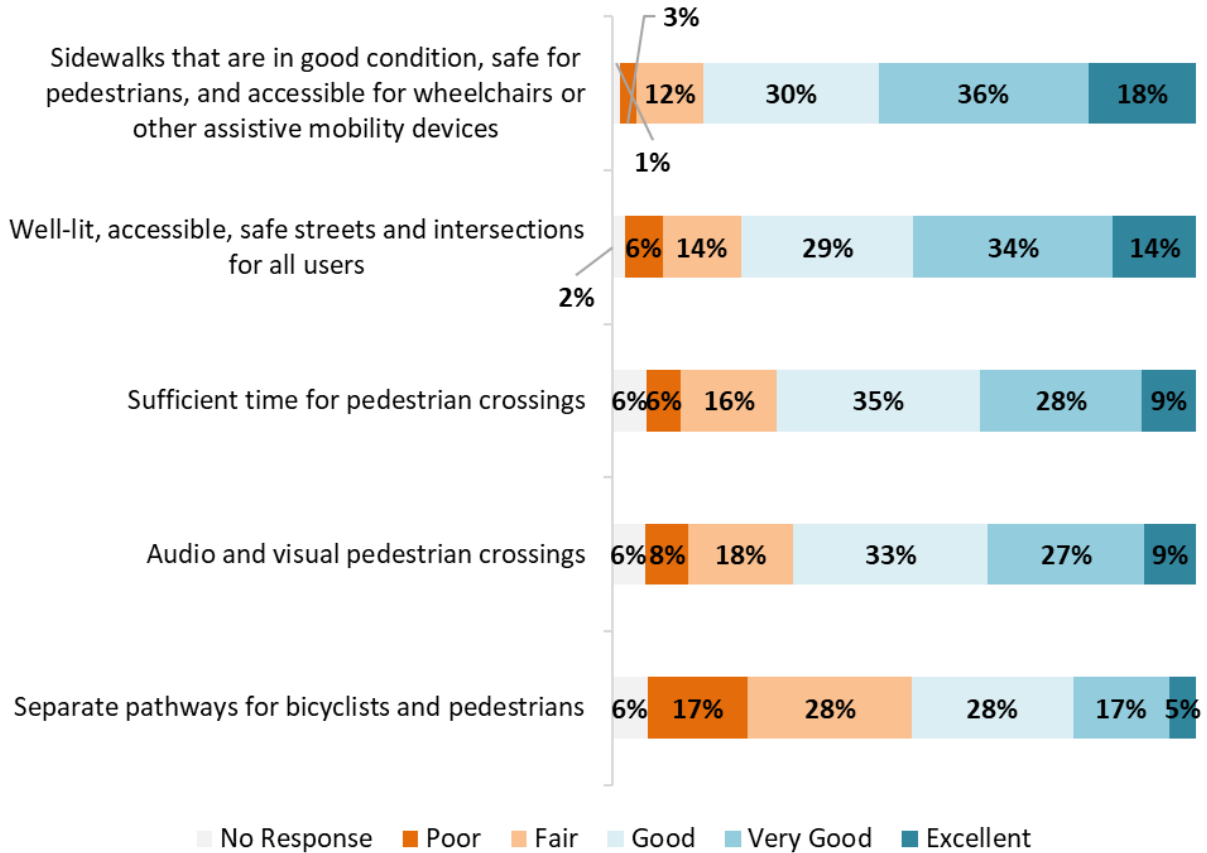
Home modification and home repair contractors who are trustworthy, do quality work, and are affordable
 Seasonal services such as lawn work or snow removal for low-income and older adults

3.48	Very Good
3.40	Very Good

Physical Environment

This set of questions asked respondents to rate the physical environment, such as housing, public spaces, health care facilities, shopping for daily needs, and sidewalks. For public infrastructure, **sidewalks** received the highest rating (**Very Good**) and **separate pathways for bicyclists and pedestrians** received the lowest rating (**Good**). For built environment, **conveniently located health care facilities** and **well-maintained properties** received the highest ratings (**Very Good**) while **housing options for older adults** and **availability of homes with accessible features** received the lowest ratings (**Good**).

How would you rate your community's public infrastructure?



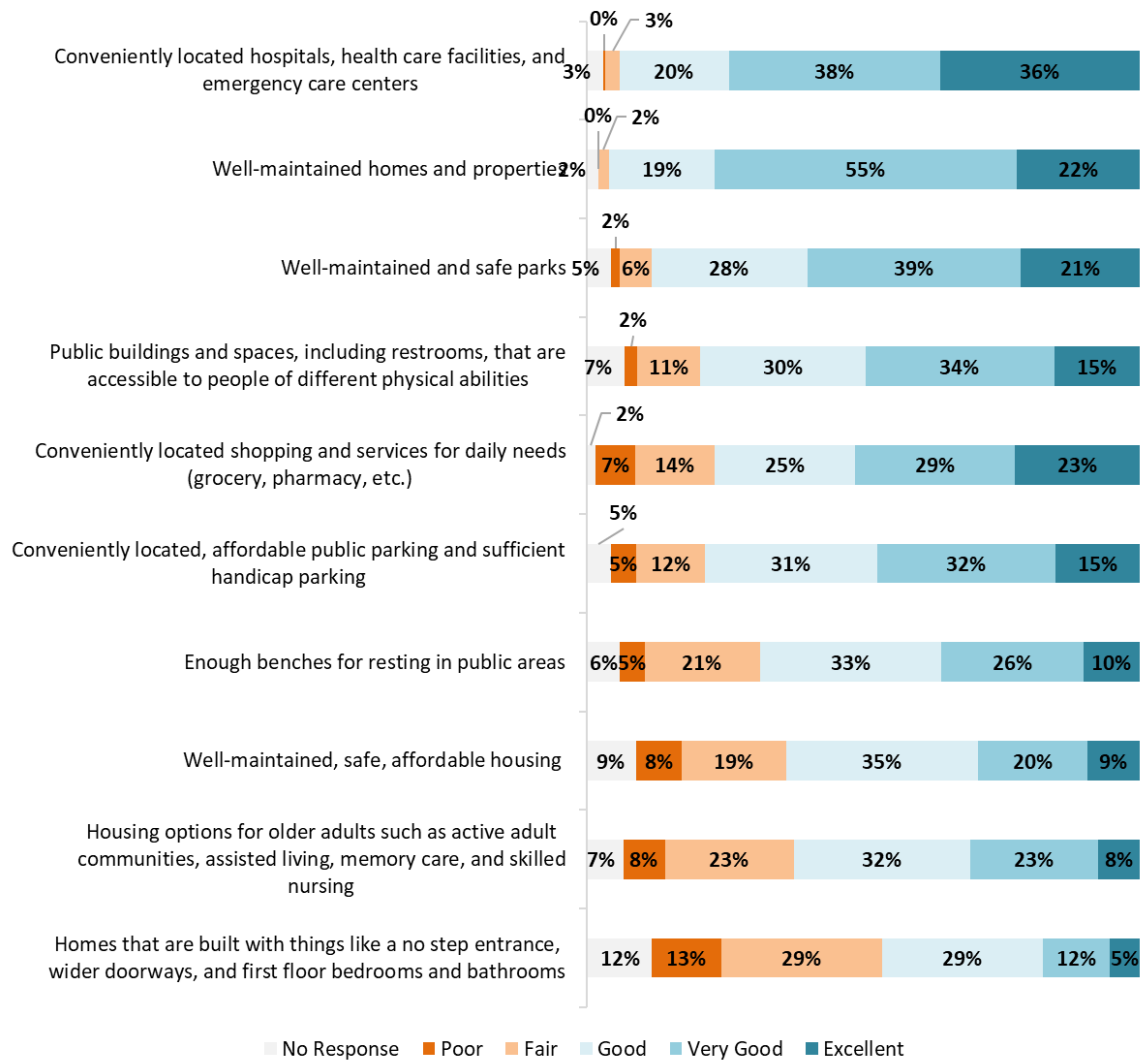
Scale

4.2 - 5.0	Excellent
3.4 - 4.2	Very Good
2.6 - 3.4	Good
1.8 - 2.6	Fair
1.0 - 1.8	Poor

Weighted Scores

Sidewalks that are in good condition, safe for pedestrians, and accessible for wheelchairs or other assistive mobility devices	3.56	Very good
Well-lit, accessible, safe streets and intersections for all users	3.37	Good
Sufficient time for pedestrian crossings	3.19	Good
Audio and visual pedestrian crossings	3.12	Good
Separate pathways for bicyclists and pedestrians	2.61	Good

How would you rate your community's built environment?



Scale

4.2 - 5.0	Excellent
3.4 - 4.2	Very Good
2.6 - 3.4	Good
1.8 - 2.6	Fair
1.0 - 1.8	Poor

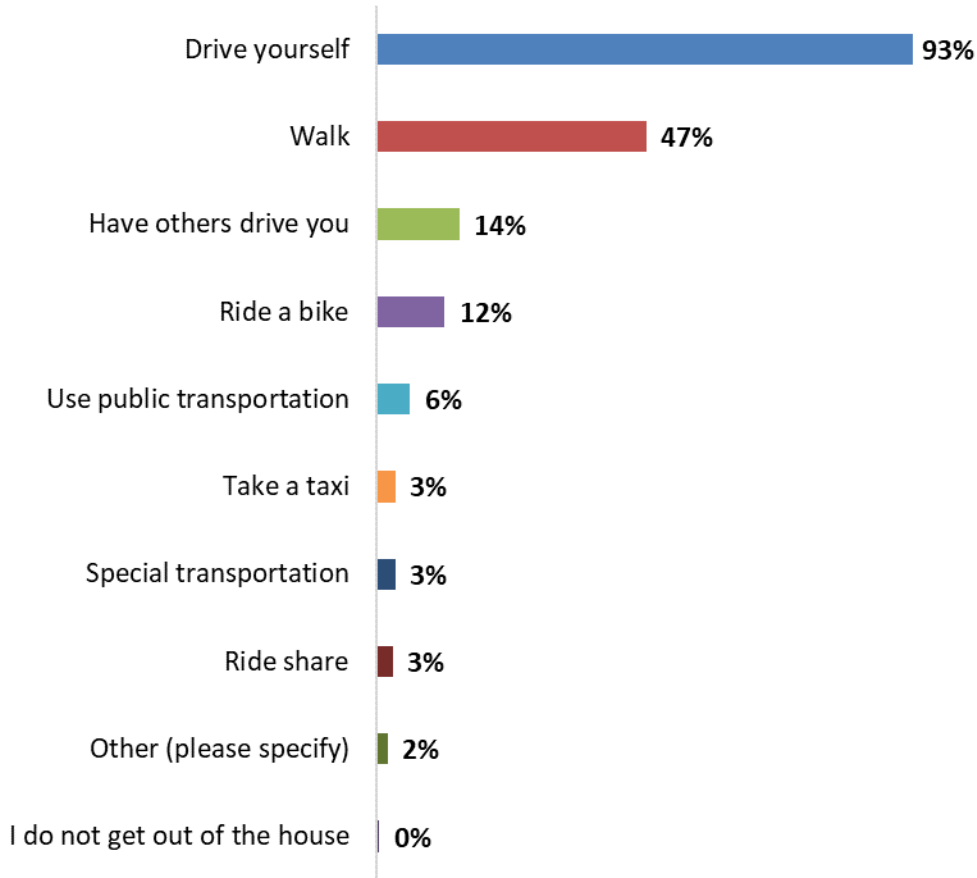
Weighted Scores

Conveniently located hospitals, health care facilities, and emergency care centers	4.10	Very Good
Well-maintained homes and properties	3.99	Very Good
Well-maintained and safe parks	3.76	Very Good
Public buildings and spaces, including restrooms, that are accessible to people of different physical abilities	3.53	Very Good
Conveniently located, affordable public parking and sufficient handicap parking	3.46	Very Good
Conveniently located shopping and services for daily needs (grocery, pharmacy, etc.)	3.46	Very Good
Enough benches for resting in public areas	3.17	Good
Well-maintained, safe, affordable housing	3.04	Good
Housing options for older adults such as active adult communities, assisted living, memory care, and skilled nursing	3.00	Good
Homes that are built with things like a no step entrance, wider doorways, and first floor bedrooms and bathrooms	2.64	Good

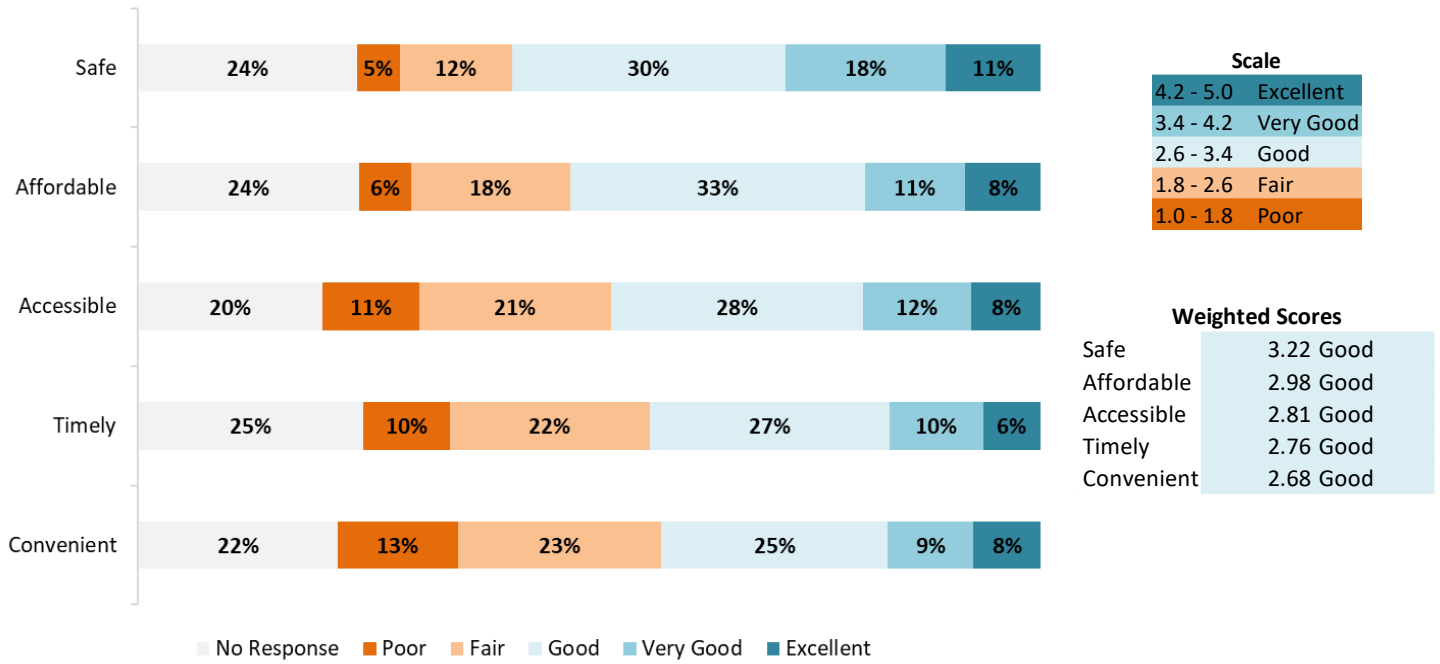
Transportation

This section explores how respondents travel around town and asked respondents to rate public transportation in their community. The most common method of transport was **“Drive yourself” (93%)**, followed by **“Walk” (47%)**. Only 6% of respondents reported using public transportation, which likely explains the high rate of “no response” when asked to rate public transportation. The highest rated category for public transportation was **“safe”** and the lowest was **“convenient.”** The 6% of respondents who reported using public transportation gave overall higher ratings to public transportation.

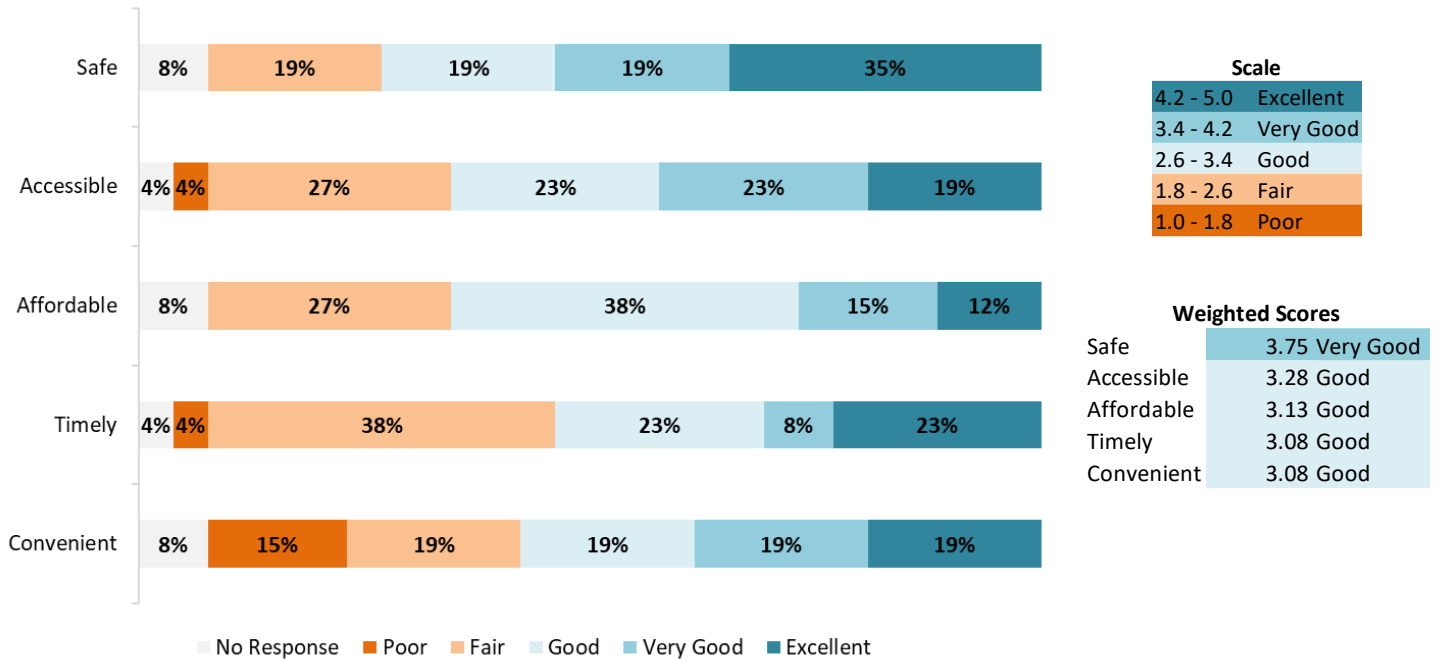
How do you usually get around your community?
(Check all that apply)



How would you rate your community's public transportation in the following categories? [All Responses]



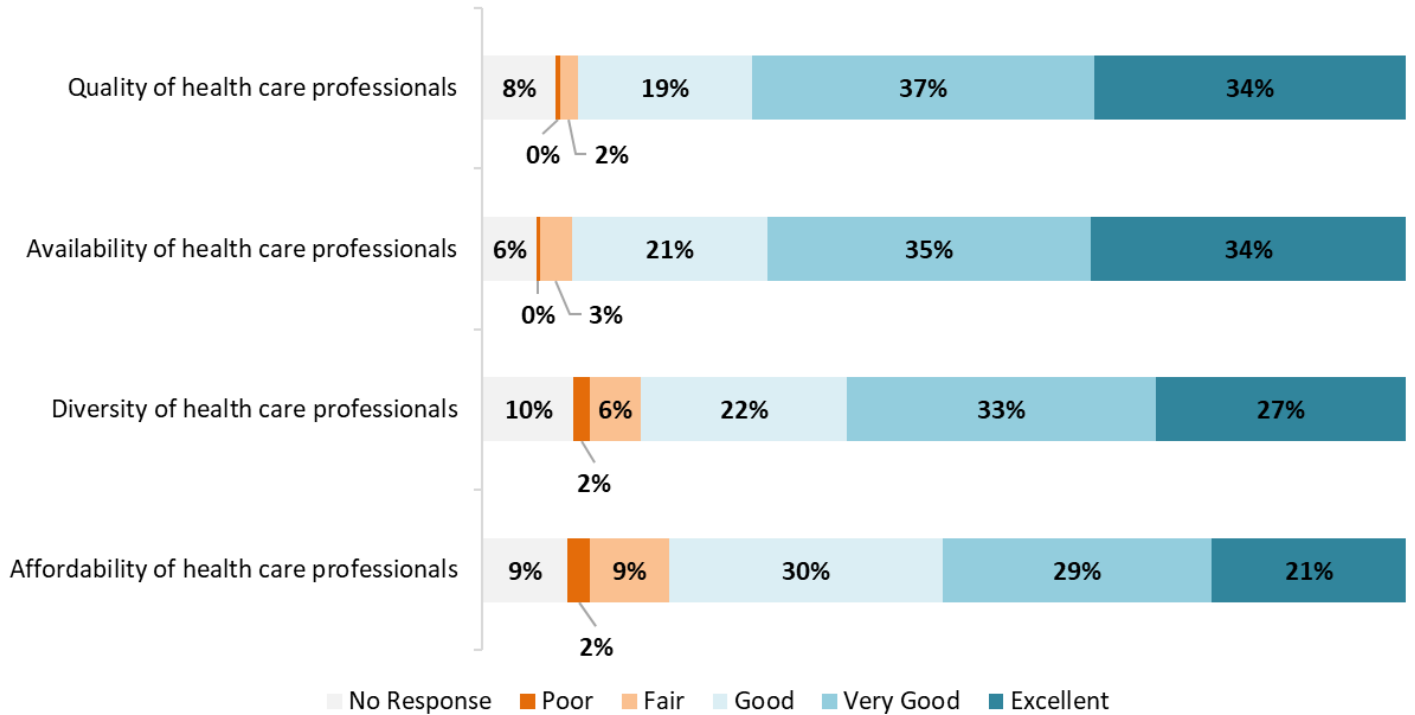
How would you rate your community's public transportation in the following categories? [Respondents who use public transportation]



Health and Wellness

The questions in this section asked respondents to rate health care professionals and health and wellness services in the community. **Health care professionals were rated “Very Good”** and had among the highest ratings on the survey. **Health and wellness services were rated “Good.”**

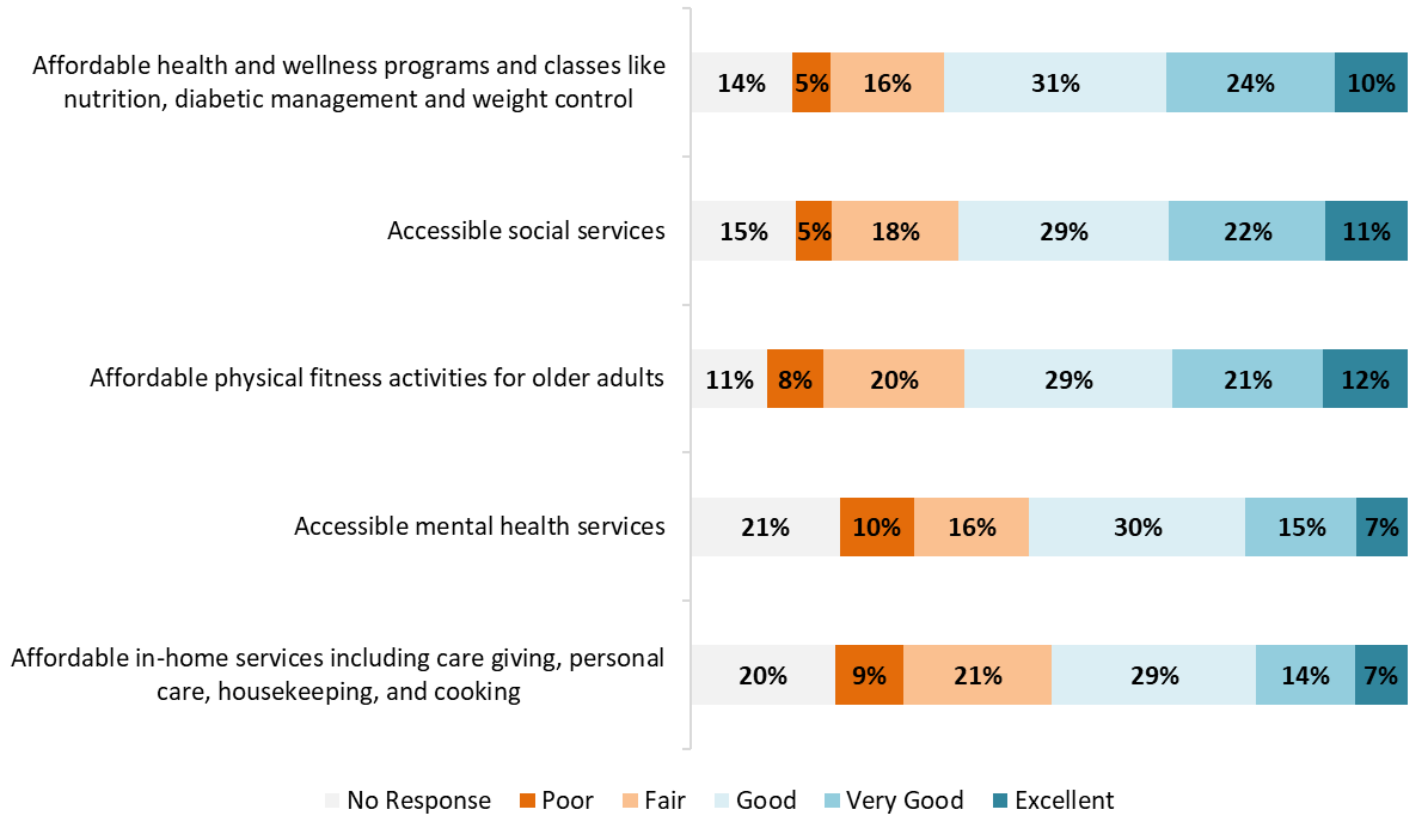
Thinking about health in your community, how would you rate your community on the following?



Scale	
4.2 - 5.0	Excellent
3.4 - 4.2	Very Good
2.6 - 3.4	Good
1.8 - 2.6	Fair
1.0 - 1.8	Poor

Weighted Scores		
Quality of health care professionals	4.10	Very Good
Availability of health care professionals	4.05	Very Good
Diversity of health care professionals	3.87	Very Good
Affordability of health care professionals	3.64	Very Good

How would you rate the health and wellness services in your community?



Scale	
4.2 - 5.0	Excellent
3.4 - 4.2	Very Good
2.6 - 3.4	Good
1.8 - 2.6	Fair
1.0 - 1.8	Poor

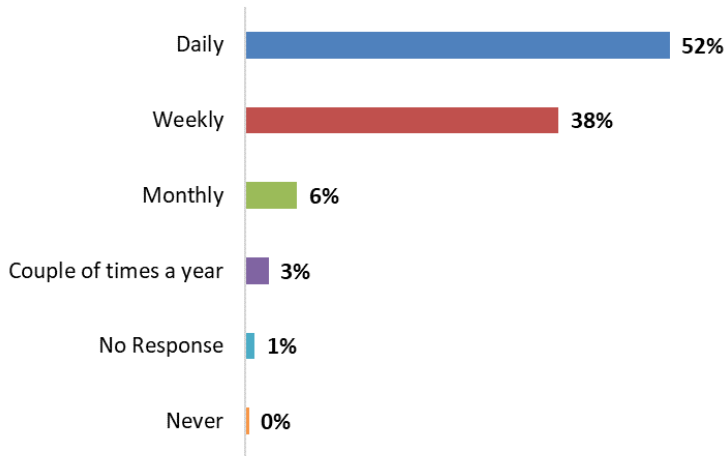
Weighted Scores

Affordable health and wellness programs and classes like nutrition, diabetic management and weight control	3.20	Good
Accessible social services	3.20	Good
Affordable physical fitness activities for older adults	3.11	Good
Accessible mental health services	2.91	Good
Affordable in-home services including care giving, personal care, housekeeping, and cooking	2.86	Good

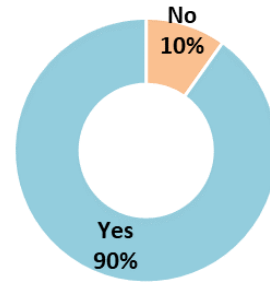
Social Isolation

This set of questions asked participants to evaluate their own level of isolation. **Over half of respondents reported having “Daily” contact with family, friends, or neighbors** who do not live with them, and **90% of respondents have a friend or family member that can help at any time** if they were in trouble or distress. Overall respondents reported that they **“Never” felt isolated from others**, and **“Rarely” felt left out or lacked companionship**. It should be noted that the Village did not have a mechanism for identifying socially isolated individuals and therefore the survey responses may not fully reflect the degree of social isolation found in the community.

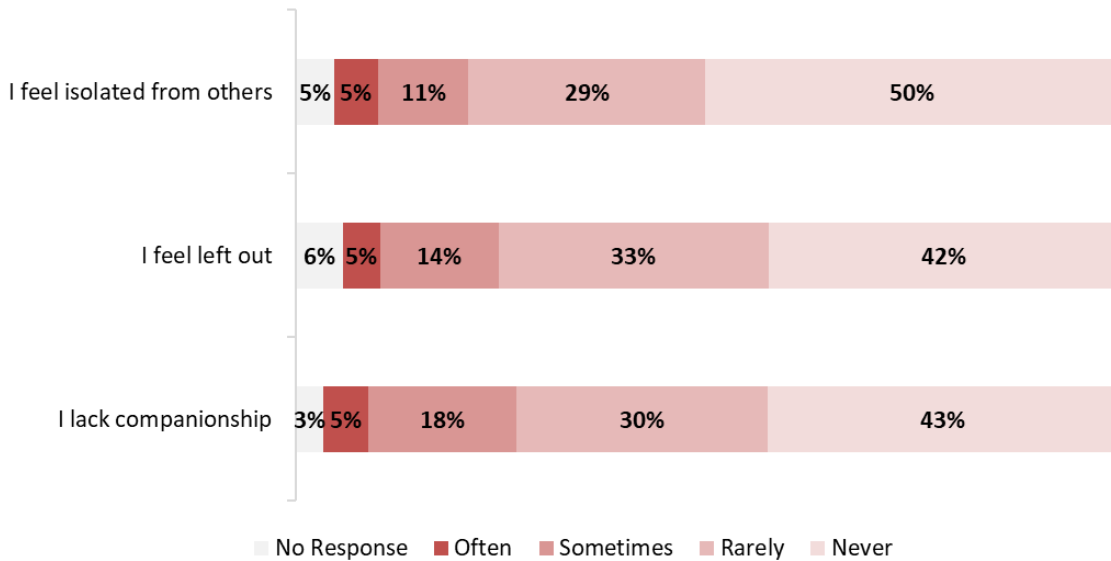
How often do you have contact with family, friends, or neighbors who do not live with you?



If you were in trouble or distress, do you have friends or family who can help you at any time of the day or night?



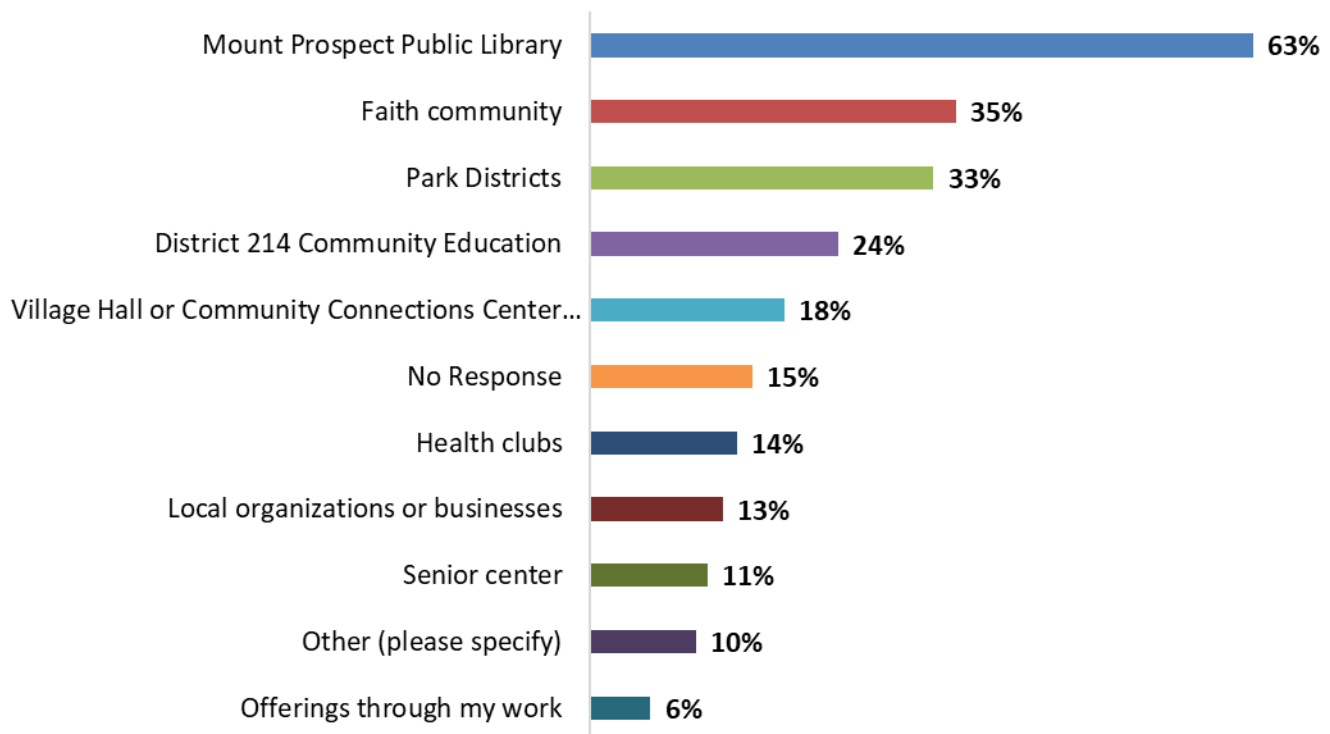
How often do you feel the following?



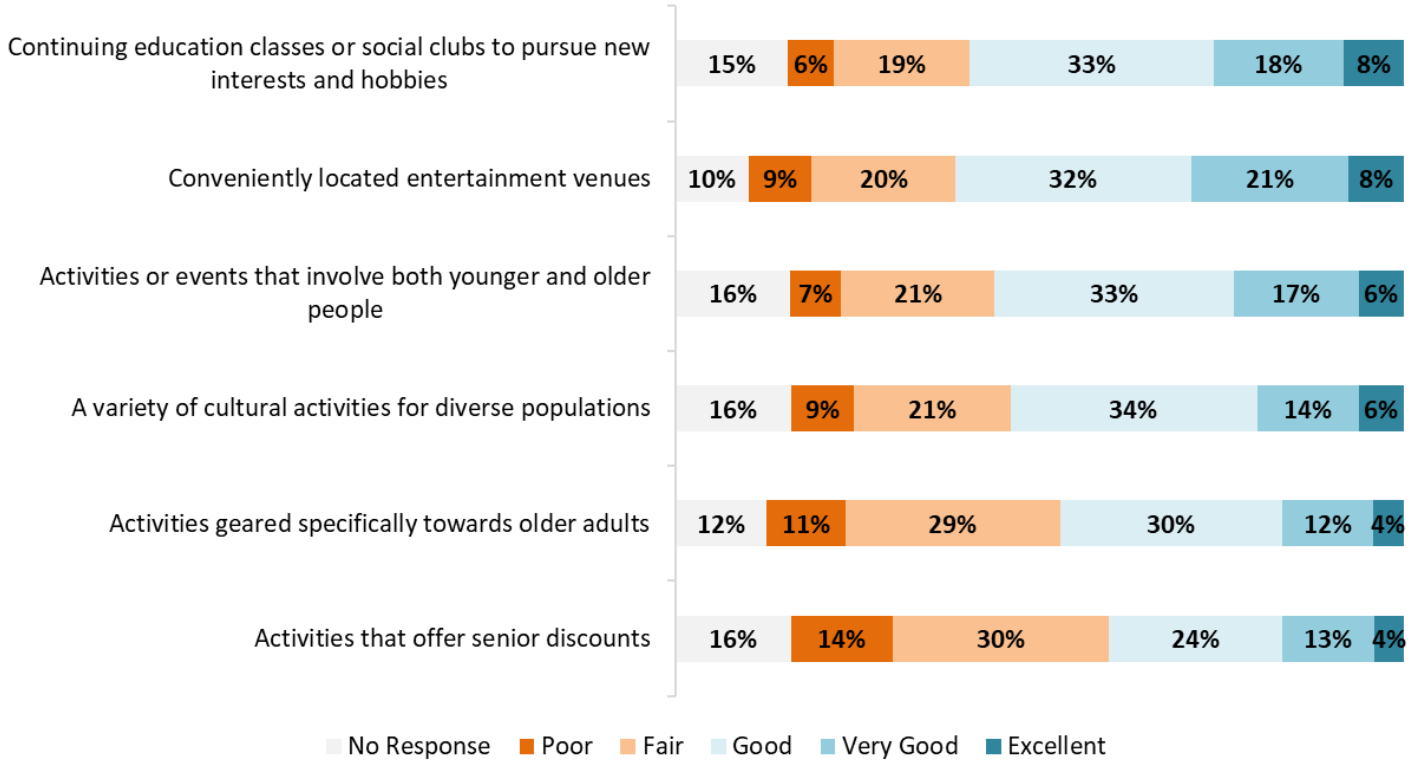
Education, Civic Engagement, and Volunteering

The questions in this section asked participants to rate the community in areas of social participation, education, volunteering, and civic engagement. These areas were rated from “Good” to “Fair.” The most popular sources for educational classes or programs were the **library, faith community, and park districts**. The highest rated social participation category was “**continuing education classes or social clubs to pursue new interests or hobbies,**” while the lowest rated was “**activities that offer senior discounts.**” The highest rated volunteer and civic engagement category was “**a range of volunteer activities to choose from,**” while the lowest rated was “**transportation to and from volunteer activities.**”

Do you use the following sources for continuing education or self-improvement classes or programs? (Check all that apply)



How would you rate your community in the following areas of social participation, inclusion and education?



Scale

4.2 - 5.0	Excellent
3.4 - 4.2	Very Good
2.6 - 3.4	Good
1.8 - 2.6	Fair
1.0 - 1.8	Poor

Weighted Scores

Continuing education classes or social clubs to pursue new interests and hobbies	3.04	Good
Conveniently located entertainment venues	3.00	Good
Activities or events that involve both younger and older people	2.93	Good
A variety of cultural activities for diverse populations	2.85	Good
Activities geared specifically towards older adults	2.65	Good
Activities that offer senior discounts	2.56	Fair

How would you rate your community in the following areas of volunteering and civic engagement?



Scale

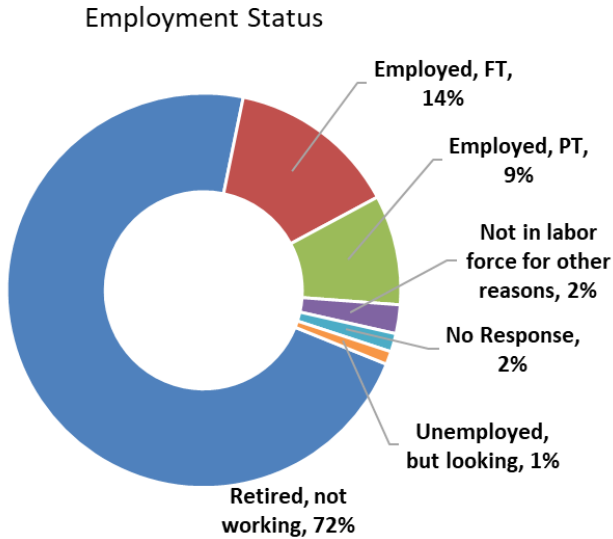
4.2 - 5.0	Excellent
3.4 - 4.2	Very Good
2.6 - 3.4	Good
1.8 - 2.6	Fair
1.0 - 1.8	Poor

Weighted Scores

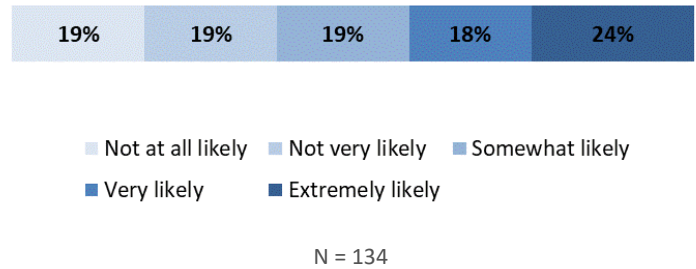
A range of volunteer activities to choose from	3.06	Good
Opportunities for older adults to participate in decision making bodies such as community councils or committees	2.79	Good
Easy to find information on available local volunteer opportunities	2.71	Good
Transportation to and from volunteer activities	2.31	Fair

Employment and Jobs

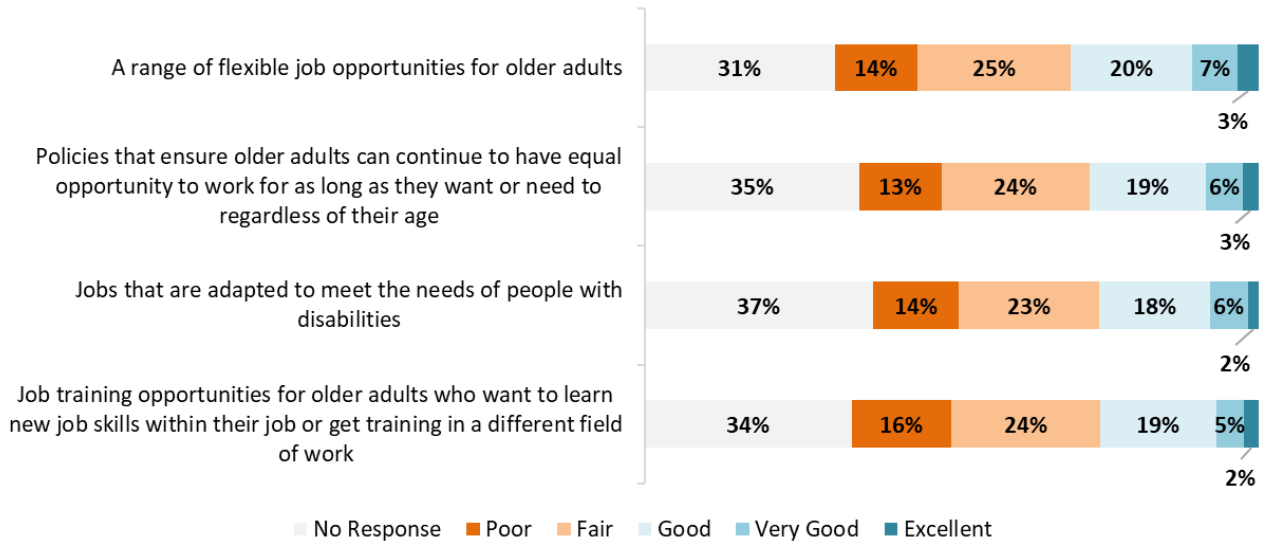
This section explored employment status, retirement, and job opportunities for older adults. A little over **20%** of the respondents indicated they were **employed full- or part-time**, and **42%** of those currently employed said it was “Very Likely” or “Extremely Likely” they would **continue to work for as long as possible**, rather than choosing to retire. The categories related to job opportunities for older adults received the lowest ratings on the survey and the highest number of “no responses.”



How likely is it that you will continue to work as long as possible, rather than choosing to retire and no longer work for pay?



How would you rate your community in terms of job opportunities for older adults?



Weighted Scores

A range of flexible job opportunities for older adults
 Policies that ensure older adults can continue to have equal opportunity to work for as long as they want or need to regardless of their age
 Jobs that are adapted to meet the needs of people with disabilities
 Job training opportunities for older adults who want to learn new job skills within their job or get training in a different field of work

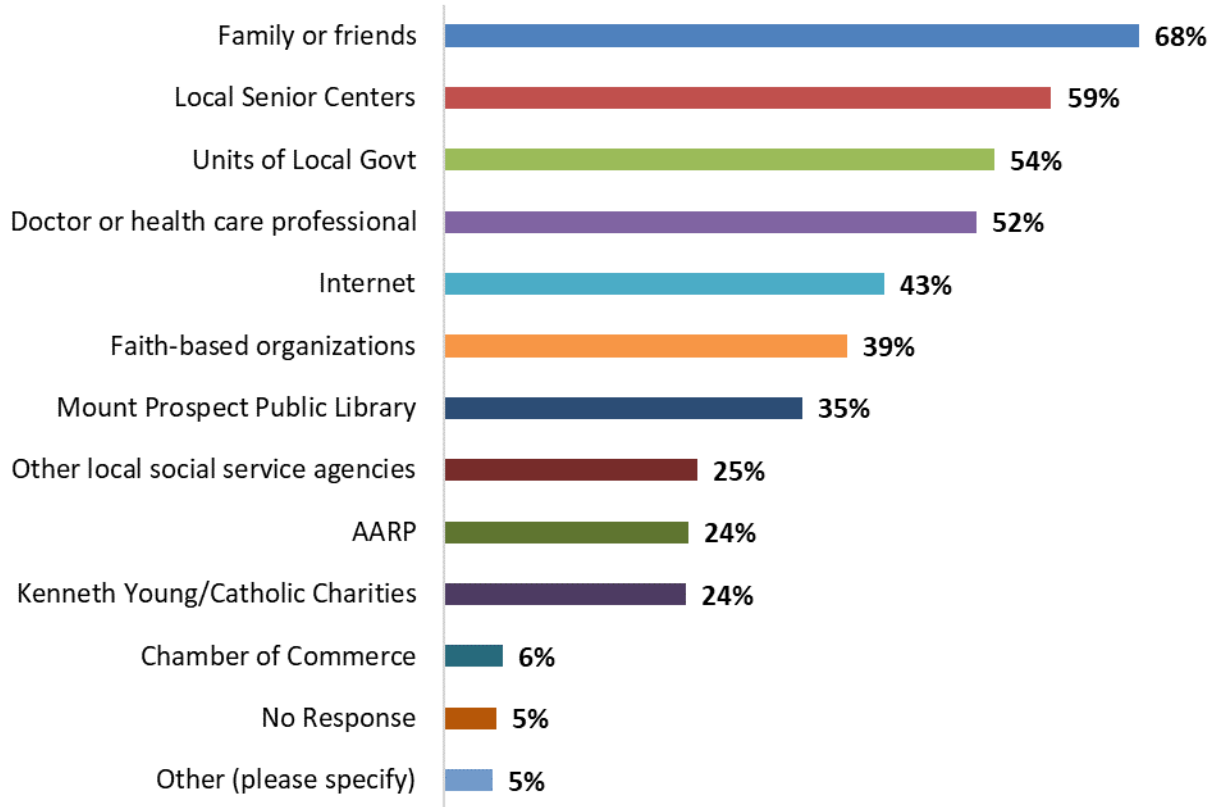
2.45	Fair
2.39	Fair
2.34	Fair
2.28	Fair

4.2 - 5.0	Excellent
3.4 - 4.2	Very Good
2.6 - 3.4	Good
1.8 - 2.6	Fair
1.0 - 1.8	Poor

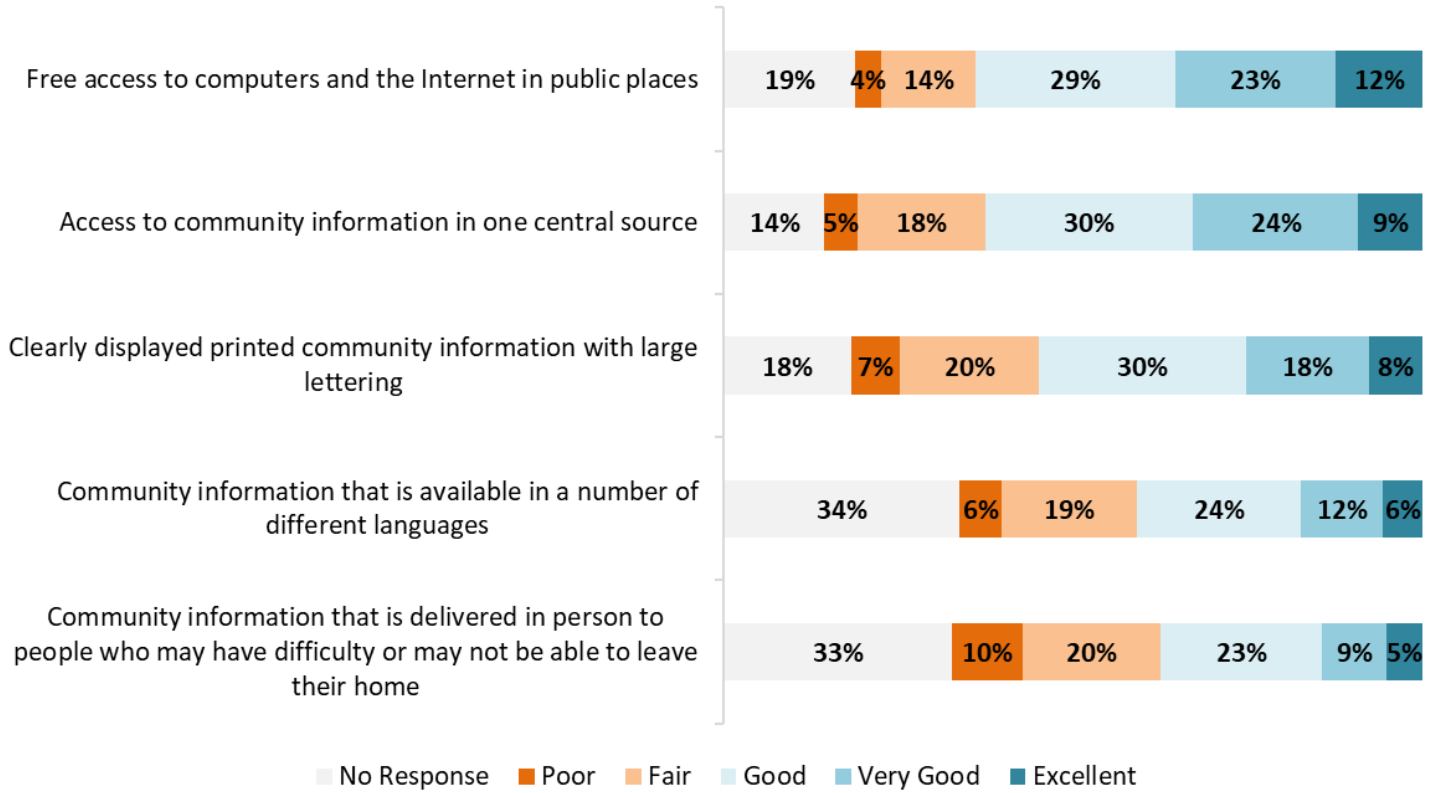
Communication and Information

The questions in this section asked respondents to identify sources of information they use regularly, and to rate the community in the areas of information access and dissemination. The most common source of information was **family or friends** (68%), followed by **local senior centers** (59%). **Information access and dissemination categories were rated “Good.”**

Would you turn to the following resources if you, a family member or friend needed information about services for older adults?



How would you rate your community in the following areas of information access and dissemination?



Scale

4.2 - 5.0	Excellent
3.4 - 4.2	Very Good
2.6 - 3.4	Good
1.8 - 2.6	Fair
1.0 - 1.8	Poor

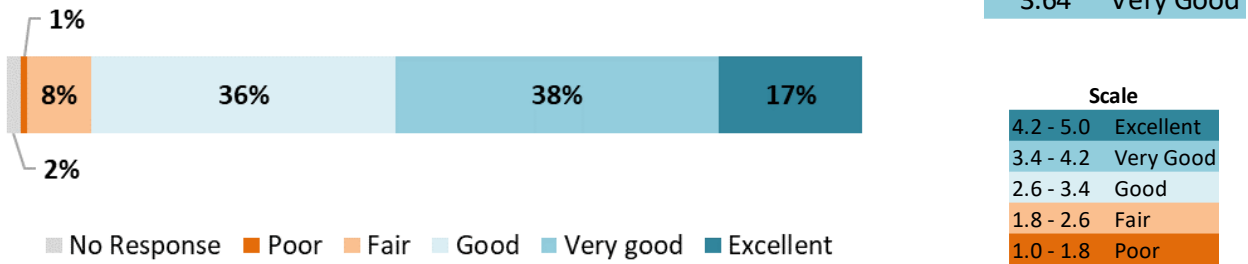
Weighted Scores

Free access to computers and the Internet in public places	3.33	Good
Access to community information in one central source	3.17	Good
Clearly displayed printed community information with large lettering	2.99	Good
Community information that is available in a number of different languages	2.88	Good
Community information that is delivered in person to people who may have difficulty or may not be able to leave their home	2.70	Good

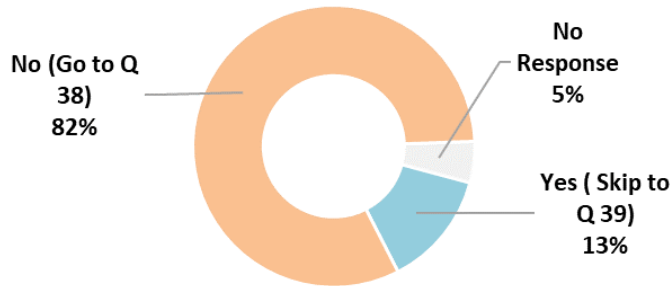
Caregiving

The questions in this section asked about caregiving for adult loved ones and asked respondents to rate their own health. **Over half (55%) of respondents rated their health “Very Good” or “Excellent.”** 13% of respondents reported **providing unpaid care to an adult loved one.** Of those not currently providing care, 28% of respondents reported it was “Very Likely” or “Extremely Likely” that they will provide unpaid care to an adult loved one in the future.

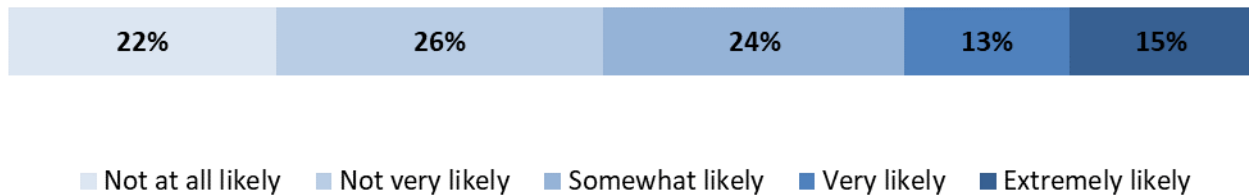
In general how would you rate your health?



Are you currently a family caregiver providing unpaid care to an adult loved one to help them take care of themselves?



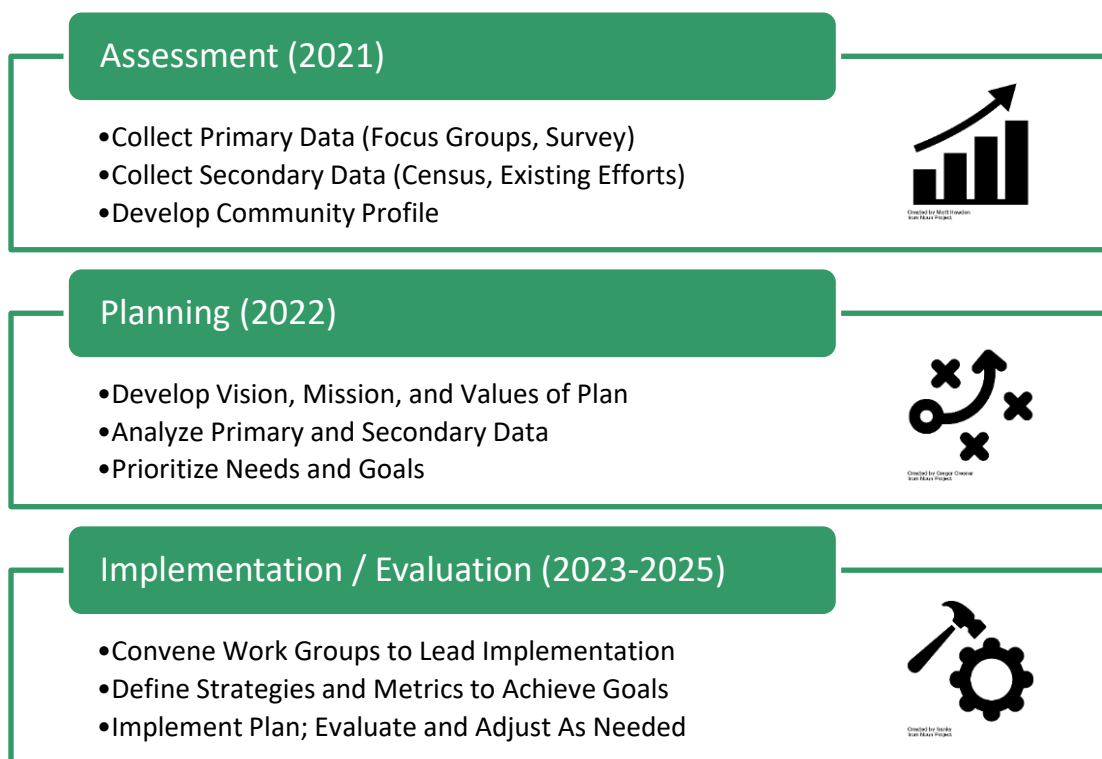
How likely is it that you will provide unpaid care to an adult loved one in the future?



N = 376

Conclusion

The data collected from the Aging in Community Survey will guide the Task Force in its development of a three-year Action Plan, which will ultimately be approved by the Village Board and submitted to the AARP Network of Age-Friendly States and Communities. The survey data will be referenced by the Work Groups as they implement the plan in the coming years. Figure XX depicts the rough timeline for the Action Plan. Community residents will be consulted throughout the process to ensure the plan aligns with the needs of the community.



The survey information provides a useful snapshot of the Village to its residents and community partners and may be used for other aging initiatives outside of the Village's purview. In the future, the Village may release additional appendices showing the data in different formats.

Reflection on Survey Methodology

The Village elected to use the AARP Community Survey² as a template for the Mount Prospect Aging in Community Survey. The Task Force made slight modifications to the AARP survey in an effort to capture information that was most relevant to Mount Prospect. The advantages of using the AARP template included:

- Questions on a wide range of topics;
- Template has been used by other age-friendly communities and allows for some comparisons and benchmarking; and
- Surveys require a minimum time commitment and anonymity for residents compared to attending a focus group or public meeting.

The Task Force identified some challenges based on their own experience developing, disseminating, and analyzing the survey data, as well as feedback from community members who took the survey.

- **Length:** Despite cutting some questions from the template, some community members said the survey was too long. The final survey had 44 questions and many of them were multi-part questions.

² Survey is available at <https://www.aarp.org/livable-communities/info-2014/aarp-community-survey-questionnaire.html>

- **Rating Scale:** Many questions asked respondents to rate community characteristics on a 5-point scale (Poor, Fair, Good, Very Good, or Excellent). The middle choice was labeled “good” rather than “average” or “neutral,” which may have skewed the results toward the positive end of the scale.
- **Open-ended Questions:** The survey did not have any open-ended questions except for the initial question. This limited the ability of respondents to elaborate on their multiple-choice selections. However, the Task Force also had limited ability to analyze a high volume of open-ended responses.
- **Language:** The survey was available in English and Spanish. However, only 3 surveys out of 466 were completed in Spanish. The Village did not have the capacity to translate the survey into other languages to reach a greater number of non-English-speaking older adults.
- **Format:** The survey was provided online and in paper format. It was critical to have a paper survey available for this population. 18% of the surveys (85) submitted were on paper.
- **Population Samples:** The Task Force made a concerted effort to identify and reach out to over- and under-sampled populations in Mount Prospect to the best of its ability, but still fell short of its goals with the following populations:

Under-sampled Populations	Over-Sampled Populations
Ethnicity: Asian Household: Living with parent(s) Education: Less than a high school diploma Language: Non-English speakers Income: Less than \$10,000 Age: 55 to 59 years old Languages Spoken at Home: <ul style="list-style-type: none"> - Spanish - French, Haitian, or Cajun - Russian, Polish, or other Slavic languages - Other Indo-European languages - Korean - Vietnamese - Tagalog (incl. Filipino) - Other Asian and Pacific Island languages - Arabic 	Education: Bachelor’s degree or higher Age: 75 to 84 years old Language: Speak only English Languages Spoken at Home: <ul style="list-style-type: none"> - German - Chinese

These notes are provided as areas for consideration if another aging survey is utilized by the Village or another community. Overall the Task Force found that the survey was successful in its response rate and serves as an important input in the Age-Friendly Action Plan.



Village of Mount Prospect Aging in Community Survey

We are asking you, as a Village of Mount Prospect resident who is 55 years of age or older, to complete our Aging in Community survey. The Village of Mount Prospect identified “Aging in Community” as a high priority in the 2019 strategic plan. In response, the Village joined the AARP Network of Age Friendly States and Communities in February of 2021 as the 512th community to enroll. AARP defines a livable community as one that is safe and secure, has affordable and appropriate housing and transportation options, and has supportive community features and services. Once in place, those resources enhance personal independence; allow residents to age in place; and foster residents’ engagement in the community’s civic, economic and social life.

Your feedback in this survey will help the Village to understand the needs of our residents and will help shape the priorities in a three-year Age-Friendly Action Plan. The Age-Friendly Action Plan will prepare Mount Prospect to be a livable community for all, with a focus on our aging population.

Answer the questions to the best of your ability - there are no right or wrong answers. If you are unsure about a question or it does not apply to you, you can skip the question. Your responses will be reported in an aggregate format and identifying information will be removed to preserve anonymity of respondents.

If you have any questions, please email agingincommunity@mountprospect.org.

1. What would be your number one recommendation for Mount Prospect visitors?

2. How long have you lived in your community?

- Less than 5 years
- 5 – 14 years
- 15 - 25 years
- 26 - 35 years
- 36 - 45 years
- 46 years or more

3. How would you rate your current community as a place for people to live as they age?

- Excellent
- Very good
- Good
- Fair
- Poor

4. Thinking about your future years, are you more likely to

- Move to a different community
- Move into a different residence within your current community
- Stay in your current residence and never move

5. Some people find that they need or want to move out of their home as they get older. If you were to consider moving out of your current home, what factors would influence your decision?

	Major factor	Minor factor	Not a factor
Wanting a smaller size home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wanting a larger size home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The cost / effort of maintaining your current home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wanting a home that will help you live independently as you age, for example a home without stairs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wanting a different environment or setting around your home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. Some people find that they need or want to move out of their community as they get older. If you were to consider moving out of your current community, what factors would influence your decision?

	Major factor	Minor factor	Not a factor
Your personal safety or security concerns	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wanting to move to an area that has better health care facilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wanting to be closer to family	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing more access to public transportation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wanting to live in a different climate	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wanting to live in an area that has a lower cost of living	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wanting to live in an area with better opportunities for social interaction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wanting to live in an area with more or less population density	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. How important is it for you to remain in your current community for as long as possible?

- Extremely important
- Very important
- Somewhat important
- Not very important
- Not at all important

8. Which of the following types of homes best describes where you currently live? (Check only one)

- Single family house
- Two family house that has two separate living units
- Townhouse or row house
- Apartment
- Condominium
- Senior housing
- Other (please specify)

9. Do you have to use stairs to access any part of your home?

- Yes
- No

10. For your primary home, do you...

- Own
- Rent
- Neither own nor rent, but live with family member or friend

11. How important is it for you to be able to live independently in your own home as you age?

- Extremely important
- Very important
- Somewhat important
- Not very important
- Not at all important
- Not sure

12. Which areas in your home need major repairs, modifications, or changes to enable you to stay there for as long as possible? [Check all that apply]

- Kitchen
- Bathroom
- Basement
- Bedroom
- Family room/Living room
- Exterior (entrance, exits, etc.)
- Stairs
- Laundry
- My home does not need major repairs or modifications to enable me to stay
- Other (please specify)

13. How would you rate your community's home repair and maintenance services?

	Excellent	Very Good	Good	Fair	Poor	Not Sure
Home modification and home repair contractors who are trustworthy, do quality work, and are affordable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Seasonal services such as lawn work or snow removal for low-income and older adults	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

14. How would you rate your community's public infrastructure?

	Excellent	Very good	Good	Fair	Poor
Sidewalks that are in good condition, safe for pedestrians, and accessible for wheelchairs or other assistive mobility devices	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Well-lit, accessible, safe streets and intersections for all users	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Audio and visual pedestrian crossings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sufficient time for pedestrian crossings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Separate pathways for bicyclists and pedestrians	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. How would you rate your community's built environment?

	Excellent	Very good	Good	Fair	Poor
Well-maintained homes and properties	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Housing options for older adults such as active adult communities, assisted living, memory care, and skilled nursing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Homes that are built with things like a no step entrance, wider doorways, and first floor bedrooms and bathrooms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Well-maintained, safe, affordable housing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Well-maintained and safe parks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Public buildings and spaces, including restrooms, that are accessible to people of different physical abilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enough benches for resting in public areas	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Conveniently located hospitals, health care facilities, and emergency care centers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Conveniently located, affordable public parking and sufficient handicap parking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Conveniently located shopping and services for daily needs (grocery, pharmacy, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

16. How do you usually get around your community? (Check all that apply)

- Walk
- Drive yourself
- Have others drive you
- Take a taxi
- Use a ride source company such as Uber/Lyft
- Use a special transportation service, such as Township bus or Connections to Care
- Use public transportation
- Ride a bike
- I do not get out of the house
- Other (please specify)

17. How would you rate your community's public transportation in the following categories?

	Excellent	Very good	Good	Fair	Poor
Accessible	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Convenient	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Affordable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Timely	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Safe	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

18. Thinking about health in your community, how would you rate your community on the following?

	Excellent	Very good	Good	Fair	Poor
Availability of health care professionals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quality of health care professionals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Affordability of health care professionals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Diversity of health care professionals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

19. How would you rate the health and wellness services in your community?

	Excellent	Very good	Good	Fair	Poor
Affordable health and wellness programs and classes like nutrition, diabetic management and weight control	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Affordable physical fitness activities for older adults	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accessible social services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accessible mental health services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Affordable in-home services including care giving, personal care, housekeeping, and cooking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

20. How often do you have contact with family, friends, or neighbors who do not live with you?

- Daily
- Weekly
- Monthly
- Couple of times a year
- Never

21. How often do you feel the following?

	Often	Sometimes	Rarely	Never
I lack companionship	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel left out	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel isolated from others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

22. If you were in trouble or distress, do you have friends or family who can help you at any time of the day or night?

- Yes
- No

23. Do you use the following sources for continuing education or self-improvement classes or programs?

(Check all that apply)

- District 214 Community Education
- Faith community
- Local organizations or businesses
- Village Hall or Community Connections Center Programs
- Offerings through my work
- Park Districts
- Health clubs
- Senior center
- Mount Prospect Public Library
- Other (please specify)

24. How would you rate your community in the following areas of social participation, inclusion and education?

	Excellent	Very good	Good	Fair	Poor
Conveniently located entertainment venues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Activities geared specifically towards older adults	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Activities that offer senior discounts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Activities or events that involve both younger and older people	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A variety of cultural activities for diverse populations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Continuing education classes or social clubs to pursue new interests and hobbies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

25. How would you rate your community in the following areas of volunteering and civic engagement?

	Excellent	Very good	Good	Fair	Poor
A range of volunteer activities to choose from	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Opportunities for older adults to participate in decision making bodies such as community councils or committees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Easy to find information on available local volunteer opportunities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Transportation to and from volunteer activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

26. Which of the following best describes your current employment status?

- Employed, part-time - GO TO Question 27
- Employed, full-time - GO TO Question 27
- Unemployed, but looking for work - GO TO Question 27
- Retired, not working at all - SKIP TO Question 28
- Not in labor force for other reasons - SKIP TO Question 28

27. How likely is it that you will continue to work as long as possible, rather than choosing to retire and no longer work for pay?

- Extremely likely
- Very likely
- Somewhat likely
- Not very likely
- Not at all likely

28. How would you rate your community in terms of job opportunities for older adults?

	Excellent	Very good	Good	Fair	Poor
A range of flexible job opportunities for older adults	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Job training opportunities for older adults who want to learn new job skills within their job or get training in a different field of work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Jobs that are adapted to meet the needs of people with disabilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies that ensure older adults can continue to have equal opportunity to work for as long as they want or need to regardless of their age	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

29. Would you turn to the following resources if you, a family member or friend needed information about services for older adults such as caregiving services, home delivered meals, home repair, medical transport, or social activities? (Check all that apply)

- Local Senior Centers
- Kenneth Young/Catholic Charities
- Other local social service agencies
- Family or friends
- AARP
- Faith-based organizations like churches or synagogues
- Internet
- Your doctor or health care professional
- Units of local government such as the Village of Mount Prospect Human Services Department or the Cook County Department of Public Health
- Mount Prospect Public Library
- Chamber of Commerce
- Other (please specify)

30. How would you rate your community in the following areas of information access and dissemination?

	Excellent	Very good	Good	Fair	Poor
Access to community information in one central source	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clearly displayed printed community information with large lettering	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Free access to computers and the Internet in public places	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Community information that is delivered in person to people who may have difficulty or may not be able to leave their home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Community information that is available in a number of different languages	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

31. How do you identify?

- Male
- Female
- Other (please specify)

32. What is your age as of your last birthday? (Age in Years)

33. What is your current marital status?

- Married
- Not married, living together
- Separated
- Divorced
- Widowed
- Never Married
- Other (please specify)

34. Besides yourself, do you have any of the following people living in your household? (Check all that apply)

- Minors under age 18
- Parents
- Other adults, such as relatives or friends 18 and over
- I live by myself

35. In general how would you rate your health?

- Excellent
- Very good
- Good
- Fair
- Poor

36. Does any disability, handicap, or chronic disease keep you or your spouse or partner from participating fully in work, school, housework, or other activities? [CHECK ONLY ONE]

- Yes, myself
- Yes, my spouse or partner
- Yes, both me and my spouse or partner
- No

37. A family caregiver is someone who provides care for an adult loved one who is ill, frail, elderly, or has a physical, mental, or emotional disability. This care may include helping with personal needs like bathing or dressing, meals, household chores, shopping, transportation, managing medical care or finances, or even visiting regularly to see how they are doing. This adult need not live with you.

Are you currently a family caregiver providing unpaid care to an adult loved one to help them take care of themselves?

- Yes (Skip to Q 39)
- No (Go to Q 38)

38. How likely is it that you will provide unpaid care to an adult loved one in the future?

- Extremely likely
- Very likely
- Somewhat likely
- Not very likely
- Not at all likely

39. What is the highest level of education that you completed?

- Less than a high school diploma
- High school diploma, GED or equivalent
- Vocational training or certificate program
- 2-year college degree
- 4-year college degree
- Graduate or professional degree(s)

40. Please indicate which best represents the languages you speak at home. Check all that apply.

- English
- Spanish
- Korean
- Polish
- Gujarati
- Other (please specify)

41. Are you of Hispanic, Spanish, or of Latino origin or descent?

- Yes
- No

42. What is your race? (Check all that apply)

- Black or African American
- White or Caucasian
- Asian
- American Indian or Alaska Native
- Native Hawaiian or other Pacific Islander
- Multi-racial
- Other (please specify)

43. What was your annual household income before taxes in 2020?

- Less than \$10,000
- \$10,000 to \$19,999
- \$20,000 to \$29,999
- \$30,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$99,999
- \$100,000 to \$149,999
- \$150,000 or more

44. What township do you live in?

- Elk Grove (south of Central Road)
- Wheeling (north of Central Road)

Elevating Aging-in-Community *in* Mount Prospect

A Strategic Guide



*Content developed by Planning/Aging
in partnership with the Aging in a Changing Region
program of the Metropolitan Mayors Caucus*

April 2022

Executive Summary

Mount Prospect was one of five municipalities that participated during 2021 in the “Aging in a Changing Region” (*AiaCR*) program, run by the Metropolitan Mayors Caucus, the Chicago Metropolitan Agency for Planning (CMAP) and Planning/Aging, and funded by a grant from the RRF Foundation for Aging.

Planning/Aging led two public workshops and reviewed input to identify strategies which the Age-Friendly Task Force can incorporate into its Action Plan to elevate support of aging-in-community. The following recommendations are divided into two categories: Policy Recommendations dealing with Mount Prospect’s approach to and handling of its support for aging-in-community, and Programmatic Recommendations which address Mount Prospect’s key aging-in-community challenge or opportunity areas.

Policy Recommendations

- Continue to take a ‘whole of government’ approach to supporting aging-in-community
- Continue to practice anti-ageism in all municipal communications and behavior
- Incorporate aging-in-community into key municipal conversations and initiatives
- Integrate aging-in-community with diversity efforts, and vice versa
- Evolve the Task Force into (*or establish a separate*) Aging-in-Community Commission to play an ongoing policy advising and review role
- Designate a staff person in each Village department as the aging-in-community liaison
- Continue to regularly attend the MMC’s Age-Friendly Communities Collaborative and other regional aging-in-community activities
- Look to play a significant role in regional aging-in-community and livable/healthy communities collaboratives

Programmatic Recommendations

- Continue to establish the Farley Community Room as a “one-stop” resource center for information on existing older adult services and programming
- Regularly evaluate existing plans, programs, facilities, and operations for their aging-in-community consistency
- Rethink and potentially ramp up the Village’s volunteer programs and opportunities
- Consider developing an aging-in-community handbook to help residents navigate issues and connect with available resources
- Conduct a focused study of Mount Prospect’s older adult housing market
- Explore creative ways to leverage the Village’s existing housing stock to grow affordable aging-in-community options
- Do a real assessment of all existing Village transportation assets and develop strategies for better leveraging them

This document completes Mount Prospect’s involvement with the AiaCR program. It is now up to the Age-Friendly Task Force and the Village to review, select and prioritize strategic recommendations for inclusion in its Age-Friendly Action Plan. As the aging-in-community conversation remains robust, additional ideas and strategies can and should be added.

WHAT IS AGING IN COMMUNITY?

Aging-in-community refers to a coordinated municipality-wide “whole of government” effort to support the evolving needs and interests of its aging population.

Aging-in-community is inclusive of the narrower term “aging-in-place” which focuses on one’s dwelling, using a broader, community-level lens to identify a set of plans, programs, procedures, and services that in combination help support a municipality’s older residents.

Aging-in-community is an important component of ‘livable community’ efforts that address the needs and interests of residents throughout their lifespans.

Communities that support **aging-in-community** are by definition ‘age-friendly’ and ‘dementia-friendly’ communities.

Evidence from notable **aging-in-community** programs throughout the United States identifies several key indicators of the likely success of a municipality’s **aging-in-community** program: issue champions amongst (but not overreliance upon) its elected officials, staff leadership, and the overall community; dedicated human and financial resources; collaborations with key aging network and other municipal stakeholders; and mindful coordination between **aging-in-community** and other key municipal priorities.

The “Aging in a Changing Region” Program

Municipalities throughout the metropolitan Chicago region – as in regions throughout the country – are experiencing substantial growth in the number and percentage share of their older adult populations and are looking for strategies to address these shifts.

In 2021, three partner organizations – the Metropolitan Mayors Caucus (*an organization of the Chicago region’s 275 cities, towns and villages*), the Chicago Metropolitan Agency for Planning (*the regional planning organization for Cook, DuPage, Kane, Kendall, Lake, McHenry, and Will counties*), and Planning/Aging (a

consultancy focused on the intersection between community planning and the growing aging population) received funding from the RRF Foundation for Aging to support selected municipalities with these efforts. This program – called “Aging in a Changing Region” (*AiaCR*) – is based on the idea that regardless of where a municipality is at in its discussions, planning, and implementing of strategies to support aging-in-community – providing them with targeted guidance can help advance their efforts.

In March 2021, MMC put out a call for municipalities to apply to participate in the

AiaCR program. Interested municipalities submitted applications that combined a self-assessment of their aging-in-community work to date, their aging-in-community goals, and assistance they envisioned to help advance their goals. In June 2021, the AiaCR partners unveiled a 2021 Cohort of municipalities – Bensenville, Calumet City, Hawthorn Woods, Mount Prospect and Park Forest – that reflect the region's diversity in terms of community geography, socio-economic factors, community type, and aging-in-community experience.



Village Trustee Colleen Saccotelli welcoming attendees to the September 29, 2021 workshop

Municipal Workshops

A key element of AiaCR was a pair of educational and strategic workshops in each selected municipality. Once the 2021 Cohort was selected, Planning/Aging engaged a core team of municipal point persons to identify their aging-in-community goals and develop strategies for their workshops. While certain aspects of the workshops bore similarities between municipalities, many aspects such as timing, target audiences and structure were unique to each municipality, due to each community's specific preferences.

At workshops, Planning/Aging provided background to build understanding and support for aging-in-community, which

was framed as consistent with “livable communities for all ages” as values held by older adults – accessible and affordable housing options, reliable transportation services, convenient goods and services, safe places to gather and access to information and engagement opportunities – are identical to values held by younger adults.

Planning engagements typically include an assessment of a community's assets and challenges. The limited AiaCR scope required a more streamlined assessment process. Prior to each first workshop, Planning/Aging spoke with community stakeholders, reviewed guidance

documents such as the community's Comprehensive, Housing, Transportation and other plans, and reviewed available surveys on residents' perceptions about their communities. Each community was asked to have key internal stakeholders complete an assessment of the degree to which their agency or department supports the growing older adult population and offer insights as to challenges or opportunities.

The highlights from this input were presented at the workshops, leading to a facilitated discussion engaging participants to drill down on their aging-in-community experiences – residents sharing how they perceive the community will be able to support them going forward, and internal stakeholders considering ways they might be able to augment or modify their services to better support aging-in-community in the future.

The workshops were documented with notes and photographs. Some workshops – including in Mount Prospect – were recorded and are available on municipal websites. All workshop presentations were given to the municipalities so they could be made widely available.



WHAT THIS DOCUMENT ISN'T

- ✘ **ISN'T** a detailed physical plan document with specific infrastructure or other capital projects identified and costed out, and their implementation details outlined
- ✘ **ISN'T** a compendium of 'best practices' from other local or non-local municipalities – while approaches from elsewhere can be valuable as references, anything planned for Mount Prospect should be tailored to the specifics of Mount Prospect
- ✘ **ISN'T** a write-up of a rigorous, data-driven assessment, as Mount Prospect's involvement with the AiaCR program was rather a qualitative assessment of current conditions, and included a review of available assessments and community input



WHAT THIS DOCUMENT IS

- ✔ **IS** a practical strategic guide tailored to Mount Prospect on how to elevate the current support for aging-in-community – designed to be used as an ongoing resource, not gather dust on shelves due to its unreadability or impracticality
- ✔ **IS** specific recommendations of further actions Mount Prospect may choose to take, either through utilization of its existing resources, joining with other entities in collaborative activities, or by engaging external partners
- ✔ **IS** a set of action steps that Mount Prospect can take to elevate its support of aging-in-community, and which can be incorporated into the Age-Friendly Task Force's Action Plan

Mount Prospect's Aging-in-Community Context

In its AiaCR application, the core team – led by Director of Human Services Julie Kane – self-assessed that Mount Prospect was at the 'Advanced Involvement' stage in its commitment to aging-in-community, as it was identified as a high priority in the 2019 Strategic Plan, and in 2021 gained entry into the AARP Network of Age Friendly States and Communities (*the United States affiliate of the World Health Organization [WHO] Global Network for Age-Friendly Cities and Communities*). Mount Prospect's extensive aging-in-community efforts stood out among the 2021 AiaCR Cohort of municipalities and provided a unique opportunity.

Simultaneous with participation in the AiaCR program, Mount Prospect was

convening an Age-Friendly Task Force, charged with leading the Assessment and Planning components of the AARP age-friendly process. The core team determined that the goals for the AiaCR Workshops – in addition to helping educate about and broaden support for aging-in-community and soliciting and receiving input from the community – would include identification of strategic recommendations to assist the Task Force as it develops its required Age-Friendly Action Plan.

As should surprise no one, Mount Prospect is aging, and at a rate above Cook County and the CMAP region – its 65 and older population is 17.5 percent vs. Cook County's 14.3 percent and CMAP's 14.1 percent, and its 35- to 64-year-old population is 41.0

Mount Prospect is Steadily Aging

	Mount Prospect		Cook County		CMAP Region	
	Count	Percent	Count	Percent	Count	Percent
Under 5	3,982	7.3%	322,193	6.2%	518,065	6.1%
5 to 19	9,720	17.8%	946,085	18.2%	1,644,152	19.4%
20 to 34	9,050	16.6%	1,191,506	22.9%	1,794,152	21.1%
35 to 49	11,786	21.6%	1,032,143	19.9%	1,701,494	20.1%
50 to 64	10,582	19.4%	965,178	18.6%	1,635,766	19.3%
65 to 74	5,070	9.3%	421,947	8.1%	691,947	8.2%
75 to 84	3,135	5.7%	221,513	4.3%	346,833	4.1%
85 and Over	1,279	2.3%	97,710	1.9%	150,858	1.8%
Median Age	40.4		36.8		37.5	

Source: 2015-2019 American Community Survey five-year estimates

[CMAP Community Data Snapshot | Mount Prospect \(illinois.gov\)](https://illinois.gov/cmap-community-data-snapshot/mount-prospect)

percent vs. Cook's 38.5 percent and CMAP's 39.4 percent. Mount Prospect is on track with Census Bureau predictions that by 2030, 1 in 5 of its residents will be 65 or older, and that in terms of percentage, the 85 and older sub-cohort will continue to be the fastest growing portion of this

Mount Prospect's Comprehensive Plan and other long-range plans and guidance documents, while not placing a specific focus on aging-in-community, all promoted policies consistent with it. In addition, the last several Strategic Plans have all positioned aging-in-community as a high priority municipal agenda item.



A Metra Union Pacific Northwest Line train at the downtown Mount Prospect station

Mount Prospect's Key Stakeholder and Community Survey Input

The input from the key stakeholder assessments done as part of this AiaCR project, and the resident input received from the 2021 Aging in Community Survey distributed by the Task Force provided valuable insights in preparation for the workshops.

Key observations from the stakeholder assessments included:

- Mount Prospect is fortunate to have a wide range of stakeholders committed to supporting older adults and aging-in-community now and in the foreseeable future

- Many assessments conveyed a pervasive sense of empathy, conveying compassion rather than frustration with older adult concerns

Key challenges identified in the stakeholder assessments included:

- A shortage of accessible transportation and affordable and appropriate housing
- A lack of community and older adult awareness of the various programs offered
- A misfit between older adult technical aptitude and programs that require technical abilities

*Looking southeast through
downtown Mount Prospect*



- Language and communication issues
- A lack of volunteers and/or difficulties with volunteer coordination
- Some facility accessibility issues
- Funding shortages leading to staff and service shortfalls

Key general observations from the Aging in Community Survey included:

- There were many respondents, disproportionately white English speakers
- ~ 90 percent of the respondents were positive about aging-in-community in Mount Prospect
- ~ 58 percent of responders hope to stay in their current residence, while 42 percent hope to move into easier-to-maintain, one-level, likely smaller, homes
- While 92 percent said staying was important, safety/security issues, more affordability and social interactions chances were reasons mentioned for considering leaving Mount Prospect
- 52 percent said their homes needed no major modifications to allow them

to stay, while 48 percent indicated modification needs, mostly dealing with access or egress issues

Key takeaways from the Aging in Community Survey were:

- Mount Prospect's public infrastructure and built environment are generally perceived as adequate, as were public transportation options, although very few respondents indicated that they use public transportation
- While Mount Prospect's availability of health care professionals was rated highly, access to related health care services was only rated in the mid-range
- Mount Prospect's activities and opportunities for older adults were rated as mid-range
- Respondents rated the Village's information dissemination as adequate, and they seek out specific older adult-related information from various sources

Mount Prospect's AiaCR Public Workshops

- Mount Prospect staged their AiaCR workshops on Wednesdays, the first on September 29th and the second on December 1st
- The workshops were well-attended, about 60 people at each, with Workshop #1 attendees primarily internal and community stakeholders, and Workshop #2 attendees primarily residents
- The Village's core team led the publicity and outreach efforts, and Planning/Aging led the workshops themselves and made short presentations on aging-in-community
- The workshop highlights were facilitated discussions in which attendees discussed their experiences living and aging in, and serving, Mount Prospect, and identified aging-in-community issues and challenges they have experienced or envision
- Overall, the input from the workshops – both the appreciated Village attributes and the identified areas of concern – mirrored input from the stakeholder assessments, the 2019 Senior Focus Groups and the 2021 Aging in Community Survey conducted as part of the Age-Friendly process, the 2020 Community Survey, and other community input opportunities



Brad Winick of Planning/Aging addressing stakeholders at Workshop #1



Brad Winick addressing resident attendees at Workshop #2

Recommendations for Elevating Aging-in-Community in Mount Prospect

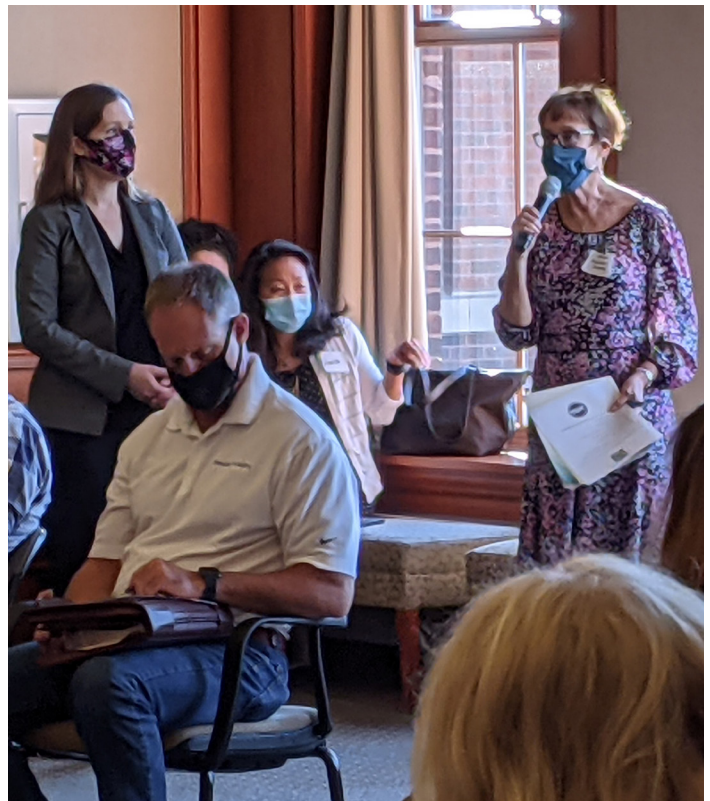
Due to its substantial efforts developing aging-in-community support strategies prior to engagement with the AiaCR program, Mount Prospect had a unique and advanced starting point as compared to the other 2021 Cohort municipalities. Therefore, the following recommendations do not call for some of the more fundamental activities more befitting an early involvement municipality. The recommendations are divided into two categories: Policy and Programmatic. The Policy Recommendations primarily deal with Mount Prospect's approach to, handling of, and expression of its support for aging-in-community. The Programmatic Recommendation are topical and address Mount Prospect's key specific aging-in-community challenges or opportunities.

Policy Recommendations

Consistent with Mount Prospect's advanced aging-in-community involvement, the first two recommendations are simply to maintain important aspects of aging-in-community support:

Continue to take a 'whole of government' approach to supporting aging-in-community Mount Prospect already follows and should continue to follow the best practice learned elsewhere which indicates that a key success factor for building and maintaining a robust aging-in-community program is positioning it within a whole of government framework, wherein diverse governmental

departments and sister agencies coordinate in addressing shared issues or challenges, rather than delegating aging-in-community to a single department or agency. As part of this, the Village could express its support for aging-in-community even more visibly, beginning with the Village website's home page, on which a clear statement such as "We actively support aging-in-community!" can set a tone, followed by a continuity of commitment and purpose on appropriate following or linked pages.



Key stakeholders sharing their aging-in-community perspectives at Workshop #1



Residents sharing their personal lived experiences at Workshop #2

Continue to practice anti-ageism in all municipal communications and behavior
Ageism is discrimination against older people due to negative and inaccurate stereotypes. Just as anti-racism is the practice of actively identifying and opposing racism, anti-ageism seeks out, calls out, and looks to change anything that perpetuates ageist ideas or behavior. Continue to ensure that all references to Mount Prospect's older adults characterizes them as civic assets and resources to be leveraged, rather than viewing them primarily through a needs-based or a medical lens. Most of Mount Prospect's older adults live independently among the general population, rather than in buildings that specifically cater to and support older adults, so they should be celebrated for their independence and the Village's interdependence.

Incorporate aging-in-community into key municipal conversations and initiatives
Aging-in-community should be a lens through which all proposed or existing Village projects, programs or strategies are viewed and evaluated – regardless of whether the initiatives are seen as primarily

benefitting Mount Prospect's economic development, affordability, infrastructure, sustainability, public safety, or other Village agendas. This evaluation should ask: how do or how would these plans, programs or strategies impact our older adult population? In doing this, the Village will likely find that impacts on older adults will often be consistent with impacts on the overall population – underscoring the notion that support for aging-in-community is an important component of being a livable community for all ages.

Evolve the Task Force into (or establish a separate) Aging-in-Community Commission to play an ongoing policy advising and review role

A wide swath of Mount Prospect should collectively “own” aging-in-community, and an ongoing entity would be invaluable to playing a key aging-in-community policy role. This entity could grow out of the Task Force once its work is complete, or it could be a separate entity, and should include a broad range of members representing the public and private sectors, including key stakeholders (*e.g. faith communities, sister agencies such as the library, park districts*



Stakeholders engaging with one another at Workshop #1

and school districts, and other community organizations), and residents including – but not limited to – older adults, who (*with Village staff support*) might be charged with: reviewing development/redevelopment proposals as to their impacts on aging-in-community; preparing and presenting to the Village Board an annual 'State of Aging-in-Community' type report; sponsoring aging-in-community events; and playing an ongoing role in overseeing the Farley Community Room (*discussed further below*).

Integrate the Village's aging-in-community efforts with its diversity efforts, and vice versa

The Village recognizes the ongoing need to better engage with its minority population, as underscored by the Aging in Community Survey's disproportionate response rates. This was brought home by workshop comments about older

adults' lack of trust outside of their own communities, statements such as "it takes the entire community to identify needs" and "diverse input starts with getting to know neighbors", and a suggested "Neighbor Awareness Program". Everyone ages, although their aging experiences are impacted by their cultural traditions, and aging-in-community can be creatively used as a means by which Mount Prospect can both support its older adults and reach out to engage with all components of its diverse population. Techniques can include ensuring diverse participation on the Aging-in-Community Commission and leveraging multi-cultural events and festivals as ways to draw people together, and as a two-way portal to ongoing and robust conversations about aging-in-community in the shared community.

Designate a staff person in each Village department as the aging-in-community liaison

While certain individuals already play such a role for the overall Mount Prospect municipal government, it is likely that not all residents know this and may search for who to contact on a department-by-department basis. Designating and publicizing a specific staff person in each key public-facing department as their aging-in-community liaison would make the government more accessible to older adults and more efficient, as a resident wanting to report an issue or concern would be able to contact the designated aging-in-community liaison within the Public Works, Community Development, Village Administration or Finance Departments rather than search various departments for the appropriate way to do so. The aging-in-community liaisons should meet periodically to learn from one another, and address issues or training needs proactively in a coordinated manner.

Continue to regularly attend the MMC's Age-Friendly Communities Collaborative and other regional aging-in-community activities

The quarterly Age-Friendly Communities Collaborative meetings typically include representatives of several dozen regional municipalities involved with aging-in-community activities and provide topical knowledge and peer-to-peer learning opportunities. Mount Prospect's experiences with and lessons learned from the AiaCR program, and the coordination between the AiaCR program and its integration with the development of its Age-Friendly Action Plan will likely be of interest to other municipalities. Involvement with the Collaborative also serves as a good portal to other regional aging-in-community activities sponsored by a range of stakeholder entities, such as the bi-monthly American Society on Aging topical roundtables (*see the Appendix for resource information*).

Look to play a significant role with regional aging-in-community and livable/healthy communities collaboratives

Key Mount Prospect staff are already involved with certain regional aging network, public health and other assessment or planning collaboratives, and this is to be commended and continued. As the metropolitan Chicago region is behind many peer regions in working on some of these important topics in a truly multi-sectoral manner, communities with a significant whole-of-government aging-in-community story to tell should look to share its experiences and provide an inspiring example. (*Doing so may also bring attention to Mount Prospect as a practice leader, with potential institutional and/or fiscal support benefits*).

Programmatic Recommendations

Continue to establish the Farley Community Room as a "one-stop" resource center for information on existing older adult services and programming

The workshops underscored that key municipal stakeholders and residents lacked comprehensive knowledge of existing older adult services and programming available in the Mount Prospect region. This lack of knowledge restricts the ability of older adult residents to avail themselves of valuable resources and hampers the ability of municipal stakeholders to make referrals to these resources. The Village already has begun establishing the Farley Community Room in Village Hall as a "one-stop" resource center at which residents and stakeholders could learn about and access existing resources. Protocols for the center's ongoing oversight, maintenance and updating should be established and agreed upon upfront, and identified roles for the Aging-in-Community Commission, with staff support. The Farley Community Room would leverage and augment the work performed for years by the Community Connections Center in "providing a pathway to Village services, social services.....and other services for all residents."



Decorative signage along the downtown Mount Prospect mixed-use rail corridor



Elected officials and key municipal staff participated in the two workshops

Regularly evaluate existing plans, programs, facilities, and operations for their aging-in-community consistency
 Building upon the internal assessments done in preparation for the workshops, Village and sister agency staff should regularly evaluate their plans, programs, facilities and operations to identify any wording, technical or other requirements, or physical conditions that explicitly or unintentionally undercut support for aging-in-community, and work with the Aging-in-Community Commission to remedy any findings. Even if this review does not unearth barriers, it may reveal opportunities for enhancements to foster broader and more diverse (*not limited just to older adults*) community participation.

Rethink and potentially ramp up the Village's volunteer programs and opportunities

Among the civic damage caused by the COVID pandemic were diminished engagement opportunities and increased social isolation experienced by many older adults, and this was articulated in comments at the workshops – with stakeholders expressing their difficulties in finding volunteers and residents expressing their desire for increased volunteering or engagement opportunities. Perhaps as COVID diminishes the time is right to rethink and possibly ramp up village-wide

volunteer programs and opportunities, and how they are communicated, not just for older adults, but for all residents. As part of this rethinking, creative partnerships with educational and other sister agencies may identify potential multi- and inter-generational opportunities.

Consider developing an aging-in-community handbook-style document to help residents navigate issues and connect with available resources

At the workshops, residents expressed questions and concerns about issues – ranging from infrastructure maintenance to transportation to available supportive services and programs for older adults – that highlight a lack of understanding about existing municipal and external programs and services that can impact their aging-in-community experiences. These questions and uncertainties can translate into resident frustrations, and some residents suggested that an aging-in-community guide would help them navigate aging-in-community. As part of the AiaCR program, CMAP is currently providing technical assistance and developing an aging-in-community handbook template to be customized in interested municipalities. Mount Prospect should keep an eye on this development and consider indicating interest in learning how to be engaged as a future handbook-style document community.



There was an educational component to the two workshops

So much for the low-hanging fruit! Much of the workshop conversation -- consistent with the 2019 Focus Groups, the 2020 Community Development Block Grant (CDBG) Community Survey, the 2021 Aging in Community Survey and other community input opportunities -- centered on the challenges of finding and maintaining affordable housing and transportation options, which are addressed below:

Conduct a focused study of Mount Prospect's older adult housing market
Mount Prospect already has several policy plans and documents that call for more housing options to support older adults aging-in-community. Yet residents and stakeholders at the workshops continue to indicate concerns that their current housing situation will not appropriately support their desire to age well and safely, primarily due to the need to navigate stairs to access fundamental living or support spaces such as bathrooms or laundries. Much of Mount Prospect's current housing inventory consists of multi-level homes and it is not clear whether there are enough single-level units -- particularly affordable units -- to meet the demand

of current older adult residents looking to relocate within Mount Prospect in the future. Performing or commissioning an older adult housing market study -- with a sharp focus on "Missing Middle Housing" and other affordable and appropriate options -- would help quantify market gaps and inform housing-related decisions, including preferred use mixes for potential redevelopment sites.

Explore creative ways to leverage the Village's existing housing stock to grow affordable aging-in-community options
The previous recommendation referred largely to potential new housing, whereas the Village should also work to harvest the existing housing stock, as many older adult residents wish to remain in their current homes and/or neighborhoods. As stated above, many multi-level Mount Prospect homes are not a good fit for aging residents, while some homes and lots are larger than needed. The Village might conduct a thorough exploration of potential options such as developing or participating with an existing home-sharing program, and/or permitting the development and operation of small Accessory Dwelling Units on existing developed parcels. In addition, existing housing and aging network organization partners (*including but not limited to AgeOptions, the Northwest Housing Partnership [NWHP], the Illinois Housing Development Authority and others*) may be receptive to developing a home modification program that would perform more substantial work than NWHP's existing handyman program, making them a better/safer fit for their residents. Also, as an entitlement community the Village receives an annual allocation of federal Community Development Block Grant (CDBG) funding and has latitude in how it can spend these funds, including on supporting affordable aging-in-community housing.



The most valuable part of the workshops was attendee input received during facilitated discussions

Do a real assessment of all existing Village transportation assets and develop strategies for better leveraging them

The workshops yielded many concerns about older adult transportation within Mount Prospect, including: the limited nature and lack of adequate and reliable scheduling for public and township-provided transportation; difficulties of managing technologically-based ride share or on-demand services; a shortage of volunteer drivers (*including drivers who can speak languages other than English*); the expense of maintaining a vehicle and insurance; and the danger

of certain roads. It will not be easy – particularly with multiple providers and township jurisdictions – but the Village could make a deep dive assessment of the benefits and shortfalls of all existing rolling transportation stock in the Village and thinking through strategies to better link and leverage them for the benefit of community – including but not limited to – older adult residents. Part of this assessment should be the identification of potential additional partners within sectors such as health care and business.

Aging-in-Community Resources

Some excellent centralized document repositories at which to find aging-in-community resources are listed below – Mount Prospect is likely already familiar with many of them. There may be some redundancies as certain documents may be included in multiple repositories. Some of these repositories will provide links to additional resources. Carefully evaluate any resources found for their applicability to Mount Prospect's specific interests and needs.

Aging in a Changing Region Partner Organization Resources

[AFCC REPOSITORY - Google Drive](#)

This repository is maintained by the Metropolitan Mayors Caucus and includes both resource materials and documents developed for its Age-Friendly Communities Collaborative.

[Home - CMAP \(illinois.gov\)](#)

The Chicagoland Metropolitan Agency for Planning (CMAP) is the federally designated metropolitan planning organization for the seven-county metropolitan Chicago region, and develops and provides plans, programs, and other initiatives.

[Aging in Place - CMAP \(illinois.gov\)](#)

CMAP developed this Aging in Place white paper in 2016.

[Planning Aging-Supportive Communities](#)

This 2015 American Planning Association (APA) Planners Advisory Service report was primarily authored by Brad Winick of Planning/Aging. APA members can download the report for free, others are required to purchase it for \$25.

Local/Regional Aging-in-Community Aging Network Organizations Serving Mount Prospect

[Home - AgeOptions](#)

AgeOptions (*formerly known as the Suburban Cook County Area Agency on Aging*) is designated by the federal Older Americans Act and the Illinois Department on Aging as the planning and service agency for the 30 townships surrounding Chicago and supports partner agencies to provide a wide range of aging-in-community services.

[Catholic Charities summary of services 2019.pdf](#)

Catholic Charities North/Northwest Regional Services provides various services for older adults – including those who live in Mount Prospect – and it provides a wide range of home and community-based services.

[Senior Services – Elk Grove Township](#)

Elk Grove Township provides a range of services – including the Dial-A-Bus service – for Mount Prospect older adults who reside south of Central Road.

[Older Adult Services | Kenneth Young Center](#)

The Elk Grove Village-based Kenneth Young Center provides comprehensive in-home assessments and services to Mount Prospect older adults who reside in Elk Grove Township, and operates a Mount Prospect office and drop-in center at 1585 W. Dempster St., Suite 110.

[Welcome to Wheeling Township](#)

Wheeling Township provides a range of services – including Medical Van and Dial-A-Bus services – for Mount Prospect older adults who reside north of Central Road.

[North West Housing Partnership - Affordable Housing, IL \(nwhp.net\)](#)

This northwest metropolitan Chicago area suburban five-town collaborative runs several housing programs, including their Handyman Program which helps support aging-in-place and aging-in-community.

[Home Sharing | Center of Concern](#)

Des Plaines-based Center of Concern provides a broad range of services to support its mission “...to provide housing solutions, support services, and counseling for older adults, people with disabilities, and others in need, enabling them to live with dignity and independence.” It manages a longstanding home sharing program throughout Cook County.

Aging-in-Community General Resources

ASA Roundtables

The local chapter of the American Society on Aging stages free bi-monthly topical Roundtables, often on aging-in-community topics. Currently being staged virtually due to COVID-19, they had previously been presented at Rush University Medical

Center in Chicago. Bonnie Ewald (Bonnie_Ewald@rush.edu) serves as the roundtable coordinator.

[AARP Livable Communities Publications and Resources](#)

This repository is the best location at which to explore AARP's many resources, including its Livable Communities and Public Policy Institute initiatives and publications, and the AARP Network of Age-Friendly States and Communities.

[AARP Illinois](#)

While the AARP-Illinois office is in flux due to its current efforts to replace both the State Director and the volunteer State President, they have a number of staff persons involved with advocacy and community engagement.

[Resources for Age-Friendly Communities | The Henry and Marilyn Taub Foundation](#)

The New Jersey-based Taub Foundation includes aging-in-community as one of its primary focus topics, and maintains a comprehensive and well-organized aging-in-community library.

[Age-Friendly Resources | Grantmakers in Aging \(giaging.org\)](#)

New York City-based Grantmakers-in-Aging is the preeminent membership organization for philanthropies focused on aging issues. It maintains a resource center full of GIA-funded and other resources.

[Publications \(usaging.org\)](#)

Washington DC-based USAging (formerly the National Association of Area Agencies on Aging – “n4a”) maintains an extensive searchable database of primarily n4a-sponsored reports and other documents.

[Research \(ncoa.org\)](#)

The Washington DC-based National Council on Aging (ncoa) provides research articles and other materials for older

adults, caregivers, aging professionals and advocates, primarily developed by ncoa staff and its partners.

Planning Resources

[Search \(planning.org\)](#) (*American Planning Association resources search results for “aging-in-community”*)

The American Planning Association maintains a resource library searchable by topic, including this link to aging-in-community resources.

Transportation Resources

[Aging and Disability Transportation Overview | NADTC](#) (*National Aging and Disability Transportation Center*)

The National Aging and Disability Transportation Center (NADTC) is a program initially funded in 2015 by the Federal Transit Administration and administered by Easterseals and the National Association of Area Agencies on Aging (n4a). Its resource center provides information on transportation for older adults and people with disabilities.

[Home - National Center for Mobility Management](#)

The National Center for Mobility Management is a program of NADTC that focuses on and maintains resources on person-centered transportation services.

Housing/Aging-in-Place Resources

[Missing Middle Housing: Diverse choices for walkable neighborhood living](#)

Opticos Design founder Daniel Parolek coined the term “Missing Middle Housing” to convey the provision of enhanced housing options for sustainable, walkable communities. This link provides examples and resources for consideration.

[IHDA - Illinois Housing Development Authority](#)

This state agency’s mission is “to finance the creation and preservation of affordable housing in Illinois” and administers numerous programs to support lenders, developers, local government, nonprofits, community groups, homeowners and renters in delivering and maintaining affordable housing.

[Aging in Place Resources | Aging In Place Resources for Seniors Living at Home](#)

Aginginplace.com is maintained by its Oregon-based founder Patrick Roden, a nurse by training, and it maintains a comprehensive set of resources dedicated to supporting older adults aging in place.

[Welcome - HomesRenewed™ Resource Center](#)

HomesRenewed was founded by Maryland-based contractor and aging-in-place advocate Louis Tenenbaum and its website provides various aging-in-place materials and resources.

[Aging in Place: Growing Older at Home | National Institute on Aging \(nih.gov\)](#)

The National Institute on Aging is a program of the U.S. Department of Health & Human Services, and has developed a database of aging-in-place resources.

Ageism Resources

[Home \(reframingaging.org\)](http://reframingaging.org)

The Reframing Aging Initiative began in 2012 as a shared initiative of eight national aging organizations to find out how the American public perceives of aging, and once it was determined that this perception was negative, developing an infrastructure of strategies and techniques to convey more positive and supportive messaging. This website offers many tools and resources.

[Old School: Anti-Ageism Clearinghouse](#)

This clearing house was established by anti-ageism activist Ashton Applewhite and her colleagues, and it provides free and vetted resources to help educate people about ageism and how to dismantle it.

Intergenerational Resources

[Resources - Generations United \(gu.org\)](http://generationsunited.org)

Generations United is the preeminent national advocacy and informational organization supporting intergenerational collaborations, programs, and policies. Established by a group of organizations that focused on different portions of the lifespan, it maintains a resource library.

Acknowledgements

Mount Prospect Resident Attendees

Gayle Abrams • Carol Kopp • Kenneth & Nancy Arndt • Hedwig Kuehn • Linda & Gerald Askeland • Harriet Malinowski • Les & Edith Bencsics • Florence Organ • Carol Blatnick • Joyce Raygor • Keith Brennar • Andrea Rosen • Robert Bruckner • Hilde Rossier • Dutch DeGroot • David Schein • Cathy Dunnington • Jerome & Patricia Thomas • Judy Gerth • Diane Turner-Hurns • William & Inette Godman • Barbara Vertucci • Veronica Grimpe • Linda Waycie • Maureen Groh • Les Weber • Constance Grossman • Vanessa Williams • John Hadfield • Liz & John Zulaski • Jane Holmstrom

Representatives from Stakeholder Organizations

Lynne O'Malley, *Right at Home* • Maureen Centeno, *Northwest Community Hospital* • Stephen Samuelson, *Frisbie Senior Center* • Andres Valencia, *St. Paul Lutheran Church* • Russ Bechtold, *Interfaith Council* • Les Durov, *Veterans of Foreign Wars Post 1337* • Brian Mulcrone, *American Legion #525* • Robyn Sandys, *Northwest Housing Partnership* • Christine Lawrence, *Mount Prospect Senior Living* • Shelley Barros, *Mount Prospect Senior Living* • Claudia Cook, *Arosa Care* • Cynthia Gunderson, *Catholic Charities Senior Services* • Sandra McClain, *Kenneth Young Center* • Joe Gambsnay, *Freidrichs Funeral Home* • Claudia Boyle, *Van Driel's Medical Supply* • Sonia Ivanov, *Northwest Compass* • Anna Klimkowicz, *Northwest Compass* • John Eilering, *Busey Bank* • Sylvia Arreola & Monica Hong, *Kenzie Senior Residences* • Dari Hartmann, *St. Paul Lutheran Church* • Shihwan Chung, *Medtec Health Care* • Cathy Veller, *District 214 Community Education* • Laura Lapp, *Hands on Suburban* • Corey Dewey, *Elk Grove Township* • Henry Sanchez, *A Homecare Service LLC/ Allcare Medical Equipment and Supply LLC* • Ruth Yueill, *Mount Prospect Park District* • Jim Whittington, *Lifeway Mobility Chicago* • Rachel Nagengast, *Access Community Health Network*

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Report Designer

Kathrine Nichols

ABOUT THIS DOCUMENT

This document itself was produced to be supportive of aging-in-community. All of the graphic details – font selection, a minimum 12-point font size, page layouts, the inclusion of graphics, avoiding the use of reversed-out text on light colored backgrounds, etc. – were made to make this document easily legible for anyone with visual sensitivity issues. Just as the body of this document makes the case that municipal decisions supportive of aging-in-community are innately supportive of livable communities for all ages, this document itself should be seen as innately supportive of readers of all ages.

One final aging-in-community recommendation is that all municipal documents, websites, social media postings, etc. should consciously strive to be easily legible for all viewers, including – but not limited to – older adults.

Surveys



- Community Survey (2020)
- Senior Opportunities Survey (2021)
- Aging in Community Survey (2021)

Plans

- Comprehensive Plan (2017)
- Strategic Plan (2021)
- IDOA – State Plan on Aging (2022)
- AgeOptions – Area Agency on Aging Plan (2022)
- Human Services Needs Assessment (2022)

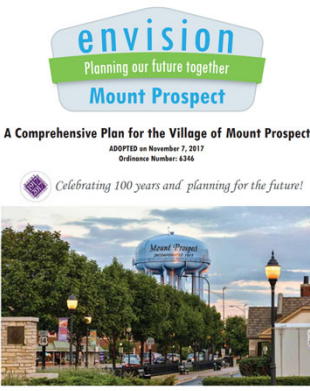
Other



- Senior Focus Groups (2019)
- MMC AFCC Strategic Planning Survey (2022)
- Aging in a Changing Region (2022)

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Comprehensive Plan for VOMP (2017)

- A Comprehensive Plan guides planning and development policy in a community and is generally updated every ten years. As a community’s primary planning document, it describes goals and objectives for existing and future development, as well as outlines the steps necessary to achieve these goals.
 - <https://www.mountprospect.org/home/showpublisheddocument/8663/636485967713330000>



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Senior Focus Groups (2019)

- In 2019, the Village partnered with the Mount Prospect Library, Mount Prospect Park District, and River Trails Park District to conduct focus groups.
- The focus groups had three age groups in the focus groups: 50-67, 68-77, and 78 years and older. There were 11 in the 50-67 age group. There were 15 in the 68-77 age group. There were 19 people in the 78 years and older age group.
- The focus groups were the initial step in getting feedback and ideas from our older adult residents as part of the Aging in Community initiative.

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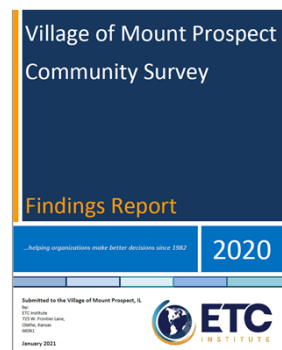
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VOMP Community Survey (2020)

- The survey was designed to gather resident input and produce feedback on Village programs and services.
- The information collected will be used to improve existing programs and services and give the Village a better foundation for long-range planning and investment decisions.
 - <https://www.mountprospect.org/community/2020-community-survey>



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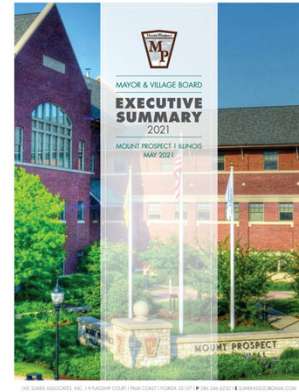
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VOMP Strategic Plan (2021)

- Each year since 2015, Village staff and Village Board work together with a hired consultant (Lyle Sumak Associates, Inc.) to complete a Strategic Plan. Short and long-term goals are identified and help ensure the board, staff, and public are each working toward consistent and measurable goals.
- 2022-2023 plan currently under development
 - <https://www.mountprospect.org/home/showpublisheddocument/17692/637702410670370000>



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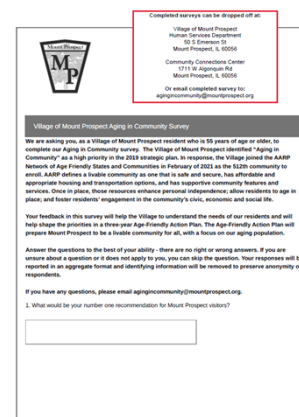
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Aging In Community Survey (2021)

- In 2021, the Human Services Department conducted a survey to get to know the needs and wants of the older adults in the community. Total completed: 466 surveys.



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Senior Opportunities Survey (2021)

- In 2021, the Human Services Department conducted a survey to help expand programming for older adults in the Farley Community Room.
- Total completed: 188 surveys

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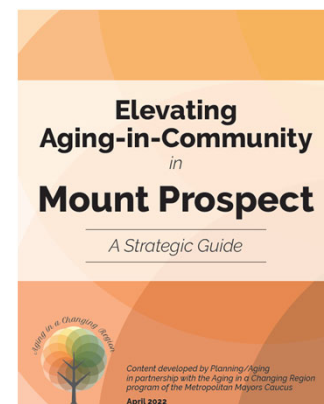
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Aging In a Changing Region (2022)

- Mount Prospect was one of five municipalities that participated during 2021 in the “Aging in a Changing Region” (AiaCR) program, run by the Metropolitan Mayors Caucus, the Chicago Metropolitan Agency for Planning (CMAP) and Planning/Aging (Brad Winick).
- Planning/Aging led two public workshops and reviewed input to identify strategies which the Age-Friendly Task Force can incorporate into its Action Plan to elevate support of aging in community.



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IL Dept on Aging State Plan (2022)

- The Illinois State Plan on Aging is the planning document that the Illinois Department on Aging (IDoA) produces in collaboration with stakeholders to guide Older Americans Act-related programmatic activities and services for older adults.
- In 2020, over 300 people participated and provide feedback in this process.
 - https://www2.illinois.gov/aging/Documents/State-Plan_2022-2024_July2021_FINAL-VERSION.pdf
 - https://www2.illinois.gov/aging/Documents/2022-2024-State-Plan-on-Aging_SummaryOfComments_12.28.20.asd.pdf



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AgeOptions Area Plan on Aging (2022)

- The AgeOptions' Area Plan on Aging is a planning, management and grant award document. It encompasses service delivery plans and priority issues for FY 2023 for Planning and Service Area 13.
- The purpose of this Public Information Document is to present an outline of our plan to distribute federal and state funding to deliver services to older adults, people with disabilities and caregivers in suburban Cook County.
 - <https://www.ageoptions.org/download/area-plan-on-aging/>



**Fiscal Years 2022-2024
Area Plan on Aging**

Fiscal Year 2022 Public Information Document

At AgeOptions, we believe that...

Quality of life is essential to everyone
Communities that care make a difference
Knowledge is powerful
Good choices depend on reliable resources

That's why we connect aging with options for living well.

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AFCC Strategic Planning Survey (2022)

- 2022 strategic planning survey to assess regional interests and strategic priorities for 2022 – 2023 for the AFCC.
- Survey sent to all MMC Mayors & Managers (275 municipalities in Chicago region) and members of the MMC Age Friendly Communities Collaborative.
- Received 65 responses representing 59 communities.



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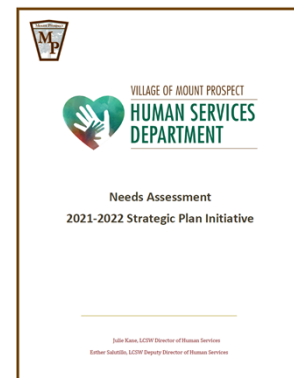
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Human Services Needs Assessment (2022)

- During the 2021 strategic planning session, the Village Board requested a needs assessment be completed by the Human Service Department.
- The needs assessment was comprised of four parts; obtaining community feedback through a department survey, a review of the 2021 Community Health Needs Assessment conducted by Northwest Community Hospital (NCH), interviews with all department team members and a review of department service statistics from 2018-2021.



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