

Chicago Longitudinal Study



Follow-Up CLS Health Survey

With your participation, for which we are most grateful, the CLS team completed the health exams at Northwestern University in Chicago at the end of December 2019. Since this time, the coronavirus/COVID-19 pandemic that was declared on March 11, 2020 has led to an unprecedented health and economic crisis across the nation that continues to this day. We are greatly concerned for the well-being of everyone affected. The nationwide protests against the murder of George Floyd and racism that began in late May have only increased the urgency to act. In partnership with Chicago schools for 3+ decades, the CLS was founded on the principles of promoting educational and economic well-being for all and ending poverty, racial discrimination, and health disparities.

We would like to ask some follow-up questions about how COVID-19 and the nationwide protests have affected your well-being and that of your family. This is important given the personal and national significance of all that has occurred so recently. Information you provide will help improve the responsiveness and effectiveness of health care providers, communities, and public institutions, including schools, in managing and providing the highest quality of care and support in your community. All that you tell us will remain completely confidential.

Project Participant's Name (First, Last): _____

Date of Birth: ____ / ____ / ____ (mm/dd/yy) Number of adults (include yourself) living in household _____

Today's Date: ____ / ____ / ____ (mm/dd/yy) Number of children under age 18 living in household _____

A. COVID-19 IMPACTS

Q1. Over the PAST FEW MONTHS, how satisfied have you been with the following aspects of the coronavirus/COVID-19 pandemic in your community?

(Please select one BEST answer for each item)	Extremely Satisfied	Somewhat satisfied	Somewhat dissatisfied	Extremely dissatisfied	Not applicable
a. Receiving clear messages from public leaders about the dangers of the virus.	1	2	3	4	5
b. Receiving information on preventing transmission of the virus.	1	2	3	4	5
c. Having access to diagnostic tests for you or immediate family for possible symptoms.	1	2	3	4	5

d. Receiving treatment for the virus and related symptoms.	1	2	3	4	5
e. Receiving any other health/medical services for you or immediate family.	1	2	3	4	5
f. Receiving any mental health services for you or immediate family member.	1	2	3	4	5
g. The commitment by state and local leaders to do all that is possible to protect public safety.	1	2	3	4	5

Q2. COVID-19 EXPOSURE/CHANGES. During the PAST FEW MONTHS:

(Please select one answer for each)	Yes	No	N/A
a. have you been exposed to someone likely to have COVID-19?	1	2	3
b. have you had symptoms (e.g., fever) associated with the virus?	1	2	3
c. have you gone into self-quarantine due to possible exposure?	1	2	3
d. have you been tested for suspected COVID-19 infection?	1	2	3
e. have you received a positive diagnosis of COVID-19 infection?	1	2	3
f. has anyone in your family been diagnosed with the virus?	1	2	3
g. have you been hospitalized due to COVID-19 infection?	1	2	3
h. if hospitalized, have you been put on a ventilator for any time?	1	2	3
i. have any friends or neighbors been diagnosed with the virus?	1	2	3

Q3. Have any of the following happened to anyone in your immediate family because of coronavirus/COVID-19? (check all that apply)

- a. Fallen ill physically
- b. Hospitalized
- c. Put in self-quarantine
- d. Lost job or been laid off
- e. Reduced ability to earn money
- f. Passed away
- g. None of the above

Q4. WORK/SCHOOL CHANGES. As a result of the COVID-19 pandemic in your state:

(Please select one answer for each)	Yes	No	N/A
a. have you been laid off or lost your job?	1	2	3
b. is your job defined as an “essential worker” in your city/state?	1	2	3
c. have you worked throughout the COVID-19 pandemic?	1	2	3
d. has your workplace provided personal protective equipment?	1	2	3
e. have you been able to work remotely from home?	1	2	3

f. have you relied on public transportation to get to work?	1	2	3
g. have you lost productive time at work or in school due to closures?	1	2	3
h. has your children's school or child care been disrupted?	1	2	3
i. have you received state unemployment insurance?	1	2	3
j. have you received a federal stimulus check related to the pandemic (CARES Act)?	1	2	3
k. have you received funds from the federal Paycheck Protection Program?	1	2	3
l. have you had difficulties paying your rent or mortgage?	1	2	3
m. have you recently received federal unemployment insurance related to COVID-19 pandemic?	1	2	3

Q5. During the SHELTER-IN-PLACE ORDERS from your state, how much time did you spend:

<i>(Please select one BEST answer for each item)</i>	None at all/ Never	Sometimes/ 1-2 days a week	A fair amount/ 3-4 days a week	Most of time/ 5-6 days a week	Always/ Every day
	1	2	3	4	5
a. Going outside home (e.g., parks, stores, exercise)?	1	2	3	4	5
b. Wearing a face mask/covering when leaving home?	1	2	3	4	5
c. Practicing social distancing when outdoors?	1	2	3	4	5
d. exercising (increased heart rate of 30 min)?	1	2	3	4	5

Q6. During the PAST FEW MONTHS, how worried have you been about:

<i>(Please select one BEST answer for each)</i>	Often	Sometimes	Rarely	Never
a. Being infected by coronavirus?	1	2	3	4
b. Family members being infected by coronavirus?	1	2	3	4
c. Your physical health being impacted by coronavirus?	1	2	3	4
d. Your mental health being impacted by coronavirus?	1	2	3	4
e. Your financial well-being being impacted by coronavirus?	1	2	3	4
f. Whether your job will remain in place in the future?	1	2	3	4
g. When schools and child care/education will open again?	1	2	3	4

Q7. CHANGES IN HEALTH/MENTAL HEALTH. These questions are about changes in health.

Since the start of COVID-19 pandemic on March 11, 2020, have these behaviors or feelings INCREASED in frequency? <i>(Please select one number for each)</i>		CURRENTLY, how often does this occur or do you feel this way? <i>(Please circle one number for each item)</i>							
		Yes	No	Almost every day	A few times a week	About once a week	Less than weekly	About once a month	Never/N/A
a. Drinking alcohol		1	2	1	2	3	4	5	6
b. Smoking cigarettes		1	2	1	2	3	4	5	6
c. Smoking marijuana		1	2	1	2	3	4	5	6
d. Feeling very sad		1	2	1	2	3	4	5	6
e. Feeling anxious		1	2	1	2	3	4	5	6
f. Worrying in general		1	2	1	2	3	4	5	6
g. Unable to stay focused as normal		1	2	1	2	3	4	5	6
h. Find it hard to control emotions		1	2	1	2	3	4	5	6
i. My children and/or family members have felt very sad		1	2	1	2	3	4	5	6

Q8. LIFE CHANGES. During the PAST FEW MONTHS, HOW STRESSFUL OR HOW MUCH DIFFICULTY have you experienced as a result of COVID-19 pandemic for the following...?

<i>(Please select one BEST answer for each item)</i>		None at all	Some	A moderate amount	Very Much	Extreme amount
a. Restrictions on leaving home		1	2	3	4	5
b. Following recommendations for social distancing		1	2	3	4	5
c. Financial problems for you and your family		1	2	3	4	5
d. The stability of your living situation		1	2	3	4	5
e. Whether your food would run out because of a lack of money		1	2	3	4	5
f. Balancing work and home responsibilities		1	2	3	4	5

Q9. During the PAST FEW MONTHS, has the amount of time that you have used MEDIA IN GENERAL (e.g., digital media such as Netflix, or social media such as Facebook/Twitter) INCREASED?

1 No, Not at all	2 Yes, by a few hours per week (1 to 6)	3 Yes, by many hours per week (7 or more)
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Q10. Has the COVID-19 pandemic in your area led to any positive changes in your life?

1 None	2 Only a few	3 Some	4 Many
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If a few or more, please specify: _____

Q11. How would you describe your health in general? (Select only one)

1 Excellent	2 Very good	3 Good	4 Fair	5 Poor
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Q12. When thinking about the type of news or media you have seen in the past few months, what have you spent the most time reading about, listening to, or watching? (check the one most true for you)

a. The COVID-19 pandemic
 b. Protests and subsequent events following George Floyd's murder
 c. The usual local, state, and national news
 d. Something else: _____

B. PROTESTS AGAINST POLICE BRUTALITY/RACISM

Q13. How satisfied have you been with the following regarding the protests against police brutality and racism in your community?

<i>(Please select one BEST answer for each item)</i>	Extremely Satisfied	Somewhat satisfied	Somewhat dissatisfied	Extremely dissatisfied	Not sure
a. Receiving clear messages that police reform is a top priority.	1	2	3	4	5
b. Receiving clear messages that racial inequalities in the criminal justice system must end.	1	2	3	4	5
c. Receiving clear messages that institutional racism at all levels must end.	1	2	3	4	5
d. That new laws and policies will be PUT IN PLACE to reduce racism and inequalities.	1	2	3	4	5
e. That new laws and policies enacted will be EFFECTIVE in reducing racism and inequalities in society at large.	1	2	3	4	5

Q14. PROTESTS AND DISCRIMINATION. Describe your experiences and attitudes about the following aspects of the protests against police brutality and racism in your community?

<i>(Please select one BEST answer for each item)</i>	Yes	No
a. Have you attended any of the protests in your community?	1	2
b. Have you participated in any community safety planning or events in your neighborhood?	1	2
c. Have the protests in your community been peaceful?	1	2
d. Have you seen acts of violence or damage during protests?	1	2
e. Based on what you've observed, have you been satisfied with police conduct during the protests in your community?	1	2
f. Have you been satisfied with the actions of public leaders (e.g., Governors, Mayors) during and after the protests?	1	2

Q15. REACTIONS TO PROTESTS. These questions are about reactions to the protests against police brutality and racism in response to George Floyd's murder and others.

Since the protests against police brutality and racism began in late-May 2020 I have....?	CURRENTLY, how often does this occur or do you feel this way? (Please circle one number for each item)							
<i>(Please select one number for each item)</i>	Yes	No	Almost every day	A few times a week	About once a week	Less than weekly	About once a month	Never/ N/A
a. Felt very sad	1	2	1	2	3	4	5	6
b. Worried in general	1	2	1	2	3	4	5	6
c. Unable to stay focused as normal	1	2	1	2	3	4	5	6
d. Find it hard to control emotions	1	2	1	2	3	4	5	6
e. My children and/or family members have felt very sad	1	2	1	2	3	4	5	6
f. Thought about how I can contribute to new solutions.	1	2	1	2	3	4	5	6

Q16. Did you vote in the 2020 presidential election?

____ Yes ____ No

Q17. Please describe anything else that concerns you about the impact of the COVID-19 pandemic on you, your family and friends, or for your community.

Q18. Please describe any thoughts or comments you have about the recent protests in Chicago and nationwide to the murder of George Floyd and racism, including possible next steps for your community.

Thank you very much for completing this survey!

Please check one of the options below to receive or donate \$15 for completing the survey:

receive a Target EGift Card, please provide email address: _____

Postal address (optional): _____

donate to a non-profit group or charity of your choice: _____

donate to the Chicago Urban League