**Coalition to End Social Isolation and Loneliness**

**Measurement Work Group**

**8/23/22:**

**Present: Cory Steinmetz, Carleigh Olson, Tim Wellens, Emily Hickey, Mikael Snitker, Linda Spitzer, Jill Hanson, Kristine Burke**

* Check-in
  + What class helped you most in school for your job today?
* Group updates
  + We are going to wrap up our frameworks project and transition into the indicators project. Cory and Kristine added a few references related to people with disabilities to round out the framework.
* Finalize purpose statement of frameworks PowerPoint
  + The group spent time revising the purpose statement. Cory will send the revised and final frameworks PowerPoint to the group.
* Select indicators for baseline measurements
  + Earlier this Spring we were compiling possible measures to use to track success.
  + When we say “we are trying to move the needle on loneliness” - which needles are we trying to move?
    - Cory presented a document with possible measures with a criteria rating system. The system included “data power – is the data available on a timely basis”, “proxy power – does the indicator say something about the central importance about the result?”, and “communication power – is it easily understood by a road range of audiences?”. The indicators with the best ratings we can use to track over time. We may also find we are missing data and not measuring what we want to measure.
    - Eventually the group could make a recommendation to the coalition regarding which measurements to track.
    - See the spreadsheet for additional information on how the group rated the measurements.
    - This conversation will continue at the next meeting.
* Future team directions
  + The group reviewed the goals and objectives document.
  + How do we want to spend our time and evolve as a group? What is next after the frameworks initiative?
    - Kristine is interested in working alongside the access and detection work group regarding the pilot to see if they have any data/measurement needs.
    - There is opportunity to help connect what survey data we have for local narratives and grant writing.
    - Mikael shared that there is an opportunity to share what this group is doing with the different councils.
    - We may consider aligning what areas we are working on with what the other work groups are doing to make sure they have the information they need.
    - We could take this conversation to the work group leads meeting to see what kind of needs their work groups have.
    - Carleigh can reach out the Office of Children’s Mental Health data person to see if she is available to present to our work group.

**7/26/22:**

**Present: Cory Steinmetz, Laura Nolan, Carleigh Olson, Kristine Burke, Emily Hickey, Mikael Snitker, Linda Spitzer, Jill Hanson**

* Check-in/ice breaker
  + What is a skill you are working on / what is a skill you wish you knew?
* Review BRFSS findings on social support (Jill, Laura, Cory, Carleigh)
  + A question related to people getting the social and emotional support they need for three years (2015, 2017, 2020).
    - There was a slight decrease from 2015 to 2020 for adults with disabilities (ages 18 – 64). The sometimes increased a lot. Seven percent of people moved down from sometimes to rarely/never.
    - For adults 75+, there was some up and down data, so it is kind of hard to interpret what is going on
    - Participation in the questions went down from 2015 to 2020.
    - The trend is moving in the wrong direction.
  + When looking at all three years data combined, nearly 80% of adults in Wisconsin always/usually get the social and emotional support that they need.
    - 75+ has a bigger changed and they do not get the social and emotional support as well as other age groups
    - Caregivers seem to have less support than non-caregivers, but it isn’t a major finding
    - For folks who identify as LGBTQ have 15 % points lower than the state average. Nearly twice as much rarely or never get the support they need.
    - When it comes to race, non-Hispanic Black has the lowest percent of people receiving the support they need. White is the highest. These are small samples even with combining years.
    - ACE scores show that as you have more ACES, you tend to have less social and emotional support.
    - Those with disabilities have much less social and emotional support versus those who don’t.
    - When looking at intersectionality, you don’t see major differences by sex, but LGBTQ is slightly lower and **Non-Hispanic Black have the lowest social support** in the whole data set.
    - Among disabled adults, those that are married have higher social and emotional support.
    - There is a significant gap with income ($35k)
  + Note: disability is defined as having serious difficulty with one ore more of the following: seeing, walking, or climbing stairs, cognition, self-care, or independent living (does not include deaf or hard of hearing).
  + Our role will be to inform the other work groups but in this current format it would probably be difficult to follow. How should we repackage?
    - We could gather the national trends and the other data sources to tell a bigger story.
    - We could also add some of this data to the models, particularly the social-ecological model on risk factors for loneliness.
* Update framework to reflect disability perspective (Mikael, Emily, Kristine, Linda)
  + The model needs a statement of purpose slide to orient viewers to the content (action item for next meeting)
  + Considered changing the title of the model
  + Considered doing more research but also noted that much of the research focuses on older adults, goal to finish up this model so we have capacity to work on other projects
  + Some people wondered about the historical context of the model and why we created it
* Next steps:
  + Possibly add the orienting slide. This could be saved for next time.
* Adjourn early to tune into webinar on Measuring Social Connectedness in Communities (with presenter from Green Bay!)
  + [Sign up for webinar here](https://us02web.zoom.us/meeting/register/tZcodeiprDwpGNGgAaOdYKHOtj36OIcoBunC?utm_source=Local+Leaders+Learning+Network&utm_campaign=454ffce003-EMAIL_CAMPAIGN_2018_04_25_COPY_01&utm_medium=email&utm_term=0_06a1f1c926-454ffce003-512838404)
  + Or just [Watch webinar at this Link](https://us02web.zoom.us/w/83521127325?tk=5eE2hmNpJ-_ACNR2rh8HelFxQuOCi7CkebMf03PGRjo.DQMAAAATcj9DnRZBUXVjbFJqc1RTU25vZDJxWUFtY3NnAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA)
  + From 2:30 to 3:45 PM

**6/28/22**

**Present: Cory Steinmetz, Laura Nolan, Carleigh Olson, Kristine Burke, Mikael Snitker, Tim Wellens, Jill Hanson**

* Check-in
* Brief coalition-wide updates
  + How did the full coalition meeting go?
  + Institutional representatives - Organizational membership agreement introduced
  + Laura: Linda and I talked up the measurement/research group might remember names of new people who might be interested in this workgroup
  + Access and detection - UCLA tool piloted in several ADRCs in September
  + WPSA conference - Carleigh and Tim presented
  + Opportunity for us to present the frameworks to full coalition next month
* Incorporating disability perspectives into frameworks
  + How do we want to incorporate disability perspectives into these frameworks?
  + We could modify the point “being aged 75 years and over” to be more broad
  + The order of points in the boxes are not in order of importance
* Exploring data available on SIL and how to share it

**5/31/22**

**Present: Cory Steinmetz, Laura Nolan, Carleigh Olson, LaVerne Jaros, Emily Hickey, Mikael Snitker, Tim Wellens**

* Check-in
* Health Equity Sub Group updates
  + Laura Nolan is our representative on the health equity work group
  + In the health equity group, there was conversation around incorporating disability focused research to contribute to the two frameworks that this group has developed
* Coalition changes and progress with presenting frameworks
  + The coalition will be having a full group meeting in June!
  + We also have a new listserv that everyone will be added to.
* Revisit group purpose, goals, and objectives and progress made so far
  + What’s missing?
    - Add health equity language to be clearer on Objective 1.4
  + What appeals to you?
* Planning a Virtual Data Walk for a future coalition meeting (half-baked idea!)
  + Cory is building a spreadsheet focused on a BRFSS question asked a few surveys ago
  + We could have a data party where each of the data points are displayed. Groups would talk about the data points and consider what it means.
  + Emily can help execute on the vision of this activity

**4/21/22**

**Present: Emily Hickey, Tim Wellens, Julie Schmelzer, Carleigh Olson, Cory Steinmetz**

* Ice breaker: What is something on your bucket list that you want to accomplish in the next 6 months?
* Julie's last meeting :’(
  + Anyone want to step up as the co-chair? Expectations are…
    - Help facilitate meetings, put together the agendas
    - Move projects forward
    - Participate on Steering committee
  + Julie will get a replacement person from CAARN to join the group.
* Changing frequency of meetings – once a month
  + Thursdays work better for Emily, but summer is more flexible.
  + We can send out a doodle poll to see what works for the most people.
  + There might be an opportunity to get additional members.
* Time to work on projects
  + Social ecological model
    - Emily investigated the individual level indicators for the social ecological model. We’ve identified quite a few risk factors and things that are associated. She hasn’t found anything additional to add.
    - The group reviewed the social ecological model and loneliness impact pyramid.
  + Selecting population indicators
    - How to display them? Which demographics?
      * The group discussed leaving the two graphics separate so we can focus one on risk factors and the other on interventions.
    - The group talked about other risk factors that we could look into such as folks who are incarcerated and/or in transition from incarceration as well as people who are using substances.
* Report back
* Action items:
  + Send out a doodle poll
  + Consider if you’d like to be a co-lead of this group
  + Set the next cadence of the meetings

**4/5/22**

**Present:** Cory Steinmetz, Dan DeValve, Linda Spitzer, Cristine Burke, Tim Wellens, Laura Nolan

* Icebreaker: What is your favorite meal to cook for others?
* Recap the Northlakes presentation
  + Joy Briggs and Nate Roberts presented on their initiative where patients are referred based on complex social needs. They are referred to the community health worker where they screen for their needs including social isolation and loneliness. Of the people they screen, nearly half of those screened were affirmative.
  + It was interesting that of the folks they screened, people were okay with talking about their loneliness which was a surprise. From her experience, people were ready to talk about it and could indicate there is less of a stigma.
  + Previously, when they looked at the literature, technology didn’t show up as a risk factor, however, Joy noted that many of those that they worked with really appreciate the face-to-face connection.
  + It seems that there is an opportunity to include this type of screenings on Social Determinants of Health screens in healthcare settings.
  + GWARR has recruited for a Community Health Worker to support some of this work and shared that there could be an opportunity for alignment with the Access and Detection work group.
  + The Access and Detection work group has decided on the three question UCLA tool to recommend out to folks who will be doing screening.
* Social Ecological Model of Social Isolation and Loneliness
  + The Measurement work group has been working to establish the social ecological model with risk factors for Social Isolation.
  + Linda will be reviewing the list already created and figure out which fall under the community level. Emily will be doing the same for the individual level.
  + Cory leveraged the Health Impact Pyramid to align this to interventions for loneliness.
  + Does it make sense to have this in two different models?
    - It could be challenging to combine them into one model because one highlights risk factors and the other is focused on interventions/protective factors
    - This really helps visualize the work of the coalition and expand the conversation around what kinds of interventions we do and how we set priorities
    - Could we change the same type of language as the first to describe the tiers in the pyramid? We could add them to the pyramid to help tie them together so that it looks more like a spectrum efforts and entry points.
  + Can we use these tools to evaluate where the coalition is at?
    - We could present these to the work groups and the work groups could name what they are working on for each level. This could help us measure where we are now and compare it to a future effort.
    - By doing this are we looking to assess coalition work/programmatic work or encourage evaluation by the work groups?
    - We could bring this to the steering committee first to get reactions and/or to the work groups to get a broader reach.
    - It might be best to present to the steering committee first.
    - Would others be interested in facilitating this discussion with the other work groups?
      * Laura is willing to help if available
      * Cory would be interested as well
* Action Items
  + Carleigh/Dan - Connect Linda and Angie
  + Development of the Social Ecological Model with risk factors for Social Isolation
    - Linda will be reviewing the list already created and figure out which fall under the community level. Emily will be doing the same for the individual level.