



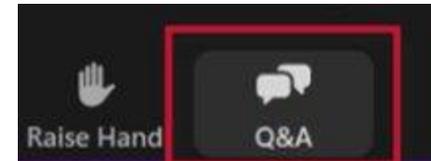
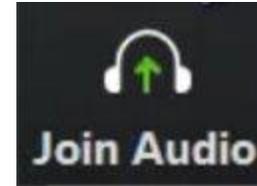
COMMIT TO
Connect

Capturing Data to Measure the Impact of CDSME on Social Connection

February 11, 2026

Housekeeping

- **Audio Options**
 - Use your computer speakers, OR dial in using the phone number in your registration email.
 - All participants are muted.
- **Questions and Answers (Q&A)**
 - On the Zoom module on the bottom of your screen, click the Q&A icon, type your question in the box and submit.
 - For any questions that we aren't able to respond to, you may follow-up at info@committoconnect.org.
- **Chat Feature**
 - The Chat feature allows webinar attendees, the host, co-hosts and panelists to communicate for the duration of the webinar.



Accessibility and Support

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- **CART services are also being provided.**
 - Click on the CC Show Captions button or click on the link in the chat
- **Screen Reader Users: Reduce unwanted chatter**
 - Request speech on demand: Insert, Spacebar, “S”
- **To get our attention if you need tech assistance:**
 - Raise or Lower Hand: Alt + Y



Presenters

Matthew Lee Smith, Professor, Indiana University School of Public Health

Taisha Selby, MPH, Community Health Worker Team Lead, Illinois Pathways to Health AgeOptions

Ann Morgan, Executive Director, The North Country Healthy Heart Network

Morgan Greenwood, MPH, MCH, Program Manager/Senior Public Health Specialist, The North Country Healthy Heart Network

Laura Morris, MHL, MS, CPHQ, Director of Data Analytics & Information Technology, Adirondack Health Institute





Commit to Connect

COMBATting SOCIAL ISOLATION AND LONELINESS IN ALL COMMUNITIES





Commit to Connect

www.committotconnect.org

- **Technical Assistance**
 - Annual National Summit to Increase Social Connections
 - Professional and consumer resources
 - Webinars and Office Hours
- **Communities of Practices on outcome evaluation**
 - Impact of Chronic Disease Self-Management Education programs on social connection
- **“Innovations Hub” to encourage replication**
 - Clearinghouse of 100+ model programs, interventions, and solutions
- **Engage an online Nationwide Network of Champions**
 - 650+ leaders at local, state, and national levels

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Recent Activity

 **RE: Engaging Rural Older Adults**
Posted by: [Robert Lefkowitz](#), 22 hours ago

Posted In: [Open Forum Discussions](#)
Hi Carol, I'm a volunteer for Conversations to Remember. We're using virtual visits to reach seniors all over the country. All the senior needs is a tablet or computer, and they can meet with a set of ...

 **RE: Engaging Rural Older Adults**
Posted by: [Keith Moore](#), 3 days ago

Posted In: [Open Forum Discussions](#)
Blooming Health offers a messaging platform optimized for older adults that can send group texts, emails and voice calls in over 70 languages. It can be used for event reminders, wellness checks, and surveys, ...

 **RE: Engaging Rural Older Adults**
Posted by: [Robert Signore](#), 3 days ago

Posted In: [Open Forum Discussions](#)
Hi Carol, Technology can help with rural older adults since transportation can

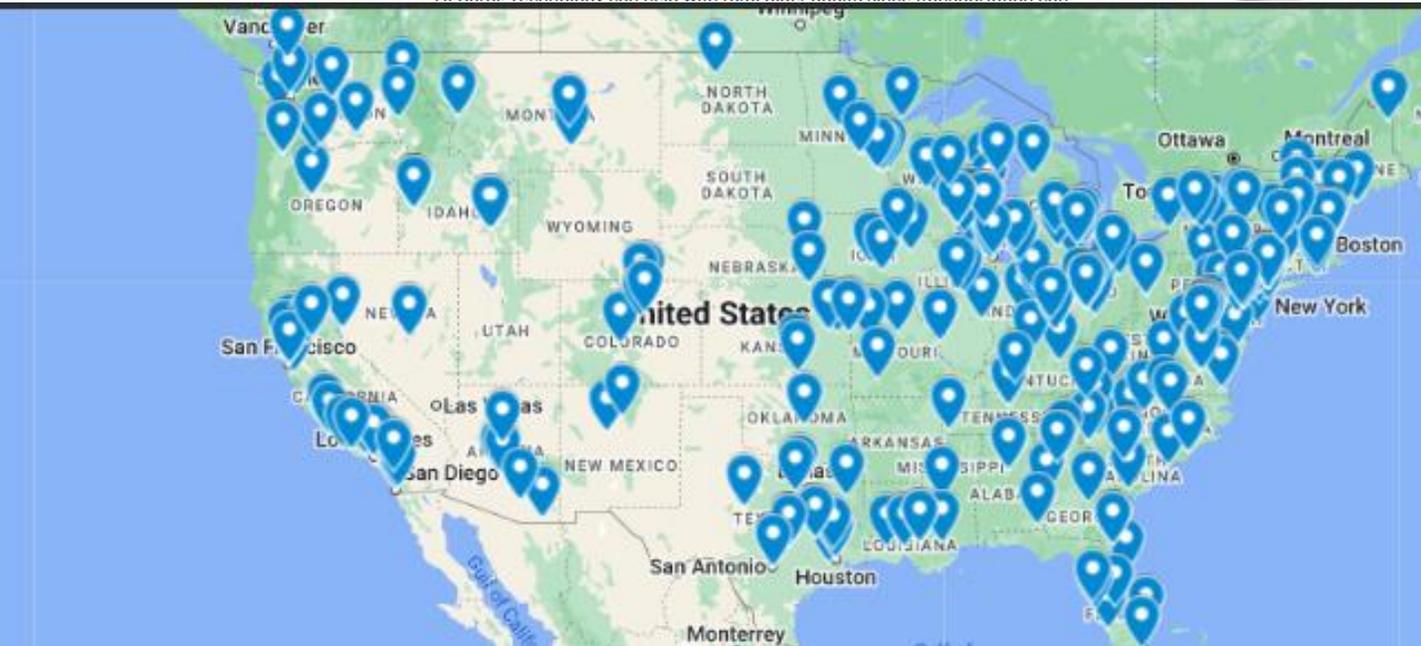
Take Action!



Recent Blogs

-  **Meet a Commit to Connect Champion: Lori Murphy**
By Ali Fehlhaber
-  **Meet a Commit to Connect Champion: Jan Amys**
By Ali Fehlhaber

CTC Nationwide Network of Champions





Innovations Hub

committoconnect.org/innovations-hub

Filter Sort

Organization Name	City, State	Brief Description	Intervention Type	Population Served	Geographic Population Served	Organization Type	Partners Involved	Funding Source	Description
Caring Together, Living Better AgeOptions	Oak Park, IL	Partnering with faith-based groups to offer social engagement activities for Black and Hispanic family caregivers.	Intergenerational, Technology	Older Adults, Caregivers	Suburban, Urban	Area Agency on Aging	Aging and Disability Resource Ce...	Private/philanthropic grant	Program Description AgeOptions, an Area Agency on Aging based in Oak Park, IL,
Friendly Phone Calling Decatur Catholic Charities – Faith in...	Decatur, IL	Older adults who are homebound received phone calls from friendly volunteers.	Intergenerational, Volunteerism	Older Adults, People with Disability	Rural, Urban, Suburban	Other Community-Based Organi...	Area Agency on Aging, Faith-base	Older Americans Act, Private/phila	Program Description Faith in Action of Macon County provides friendly phone calling
ONEgeneration Letters to O... ONEgeneration	Van Nuys, CA	This letter writing program allows older adults and students to connect without using technology.	Intergenerational, Arts and Creati	Older Adults	Suburban, Urban	Aging Services Provider	Intergenerational groups, Nutritic	Private/philanthropic grant, Other	Program Description In a world where access to digital resources can improve overall social
COAST-IT (Connecting Olde... University of Colorado Anschutz Mu...	Denver, CO	Pairs college students studying health with older adults for intergenerational social phone calls.	Health and Wellness, Intergenera	Older Adults	Rural, Frontier, Suburban, Urt	University	Aging and Disability Resource Ce...	Other	Program Description The University of Colorado (CU) Anschutz Division of Geriatrics and
Fairfax County Virtual Cent... Fairfax County Department of Neig...	Fairfax, VA	Virtual senior center developed in response to closures of in-person senior centers and adult day health centers due to the COVID-19 ...	Arts and Creative Expression, Heal	Older Adults, People with Disability	Suburban	Senior Center	Aging and Disability Resource Ce...		Program Description At the start of the COVID-19 pandemic, senior centers, adult day

Community of Practice: Assessing the Retrospective Impact of Chronic Disease Self-Management Education Programs on Social Connection

June 2025 – October 2025



Community of Practice: Opportunity

- Commit to Connect's 2025 Community of Practice included six community care hubs (CCHs) serving older adults and people with disabilities and offering chronic disease self-management education (CDSME) programs.
- The Community of Practice worked with members to measure the impact of their CDSME programs on social connection through retrospective data collection.



Community of Practice: Members

Community Care Hub	State	CDSME Programs Evaluated
Get Healthy North Country Community Integrated Health Network*	NY	Chronic Disease Self-Management Program (CDSMP)
Healthy Living for ME	ME	CDSMP
Illinois Pathways to Health - Age Options*	IL	CDSMP
Lumber River Council of Governments	NC	CDSMP
Mid-America Community Support Network	MO	CDSMP, Diabetes Self-Management Program (DSMP), Chronic Pain Self-Management Program (CPSMP)
Partners in Care Foundation	CA	CDSMP, DSMP



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Community of Practice: Goals

Participating organizations:

- Collected data from clients who completed CDSME program workshops using the [Upstream Social Interaction Risk Scale](#) (U-SIRS-13) and Retrospective Assessment of Connection Impact (RACI)
- Received secure data reports, along with technical assistance on how to understand and use the data to learn more about the impact of their program on social connectedness and engage in continuous quality improvement



CDSME COP

Findings & Reflections

Matthew Lee Smith, PhD, MPH, CHES, CHW-I, FGSA, FSBM, FAAHB

Professor: Department of Applied Health Science

Professor: Department of Health and Wellness Design

Director: Center for Health by Design (CHxD)

Director: Healthy Aging Writing Lab (HAWL)

School of Public Health

Indiana University – Bloomington



Community of Practice

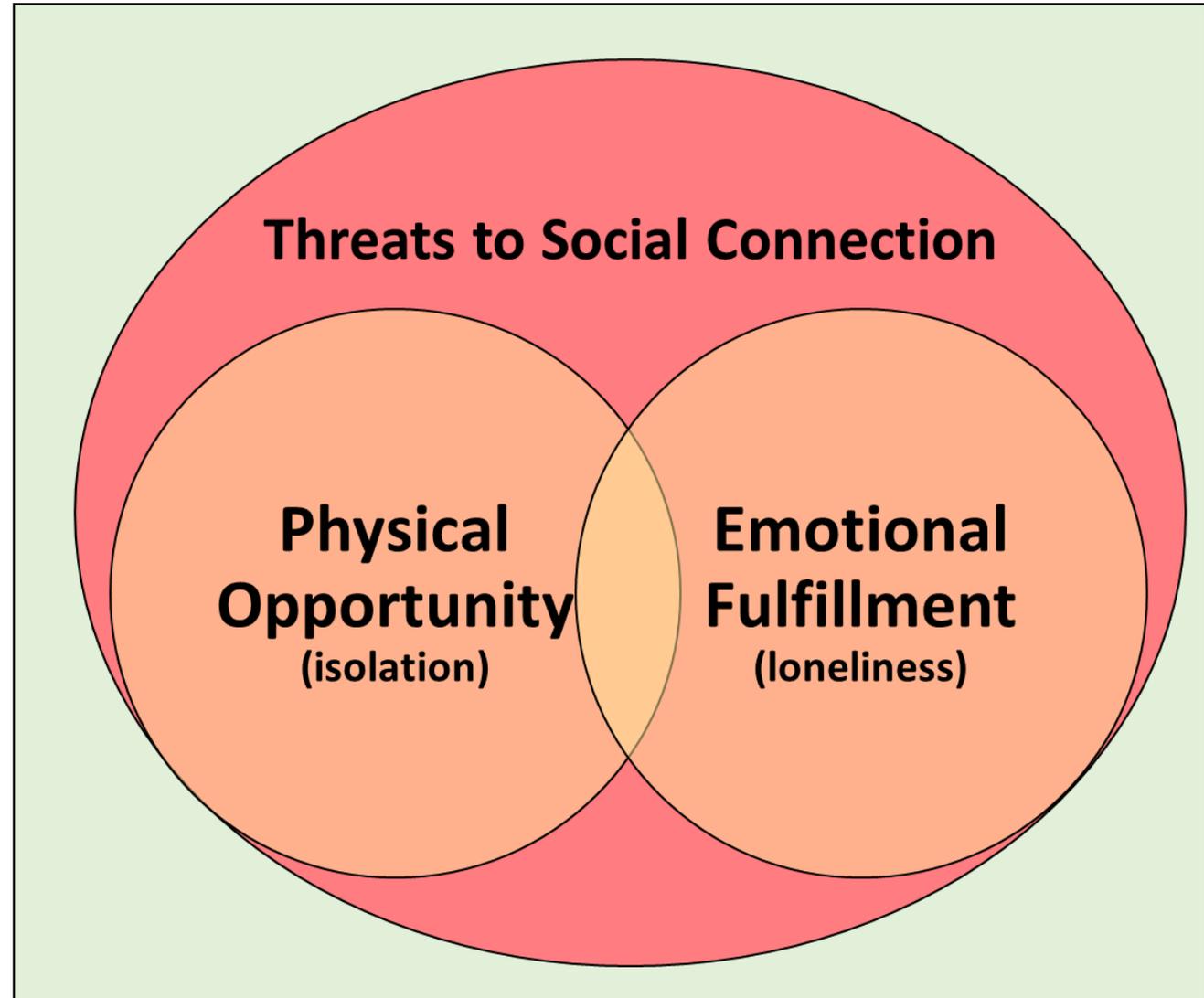
- Chronic Disease Self-Management Education (CDSME) programs
 - Widely available with a long history of effectiveness
 - Documented in randomized and pragmatic trials
- Although the *direct benefits* of CDSME programs are known, less is known about the **indirect benefits** of these workshops
 - Regular, facilitated small group interaction
 - Focus on improving symptom management and social supports
 - Linkage to healthcare providers and other community resources
- Purpose: To *retrospectively* learn about the connection-related impact of CDSME programs that serve older adults and people with disabilities
- Uniform connection measures
 - Upstream Social Interaction Risk Scale (U-SIRS-13) (pronounced “users”)
 - Retrospective Assessment of Connection Impact (RACI)

Each site considered
logistics of their local
evaluation

Attempted to maintain
apples-to-apples
outcome comparisons
across sites

U-SIRS-13

- I feel isolated from others
- I lack companionship
- I feel no one really knows me well
- I can find companionship when I want it
- Attend social clubs, residents' groups, or committees
- Attend religious groups
- I avoid socializing because it is hard to understand conversations, especially when there is background noise
- I am satisfied with the relationships I have with my family
- I am satisfied with the relationships I have with my friends
- I have as much contact as I would like with people I feel close to and who I can trust and confide
- There are enough people I feel close to and could call for help
- I am content with my friendships and relationships
- I miss having people around me



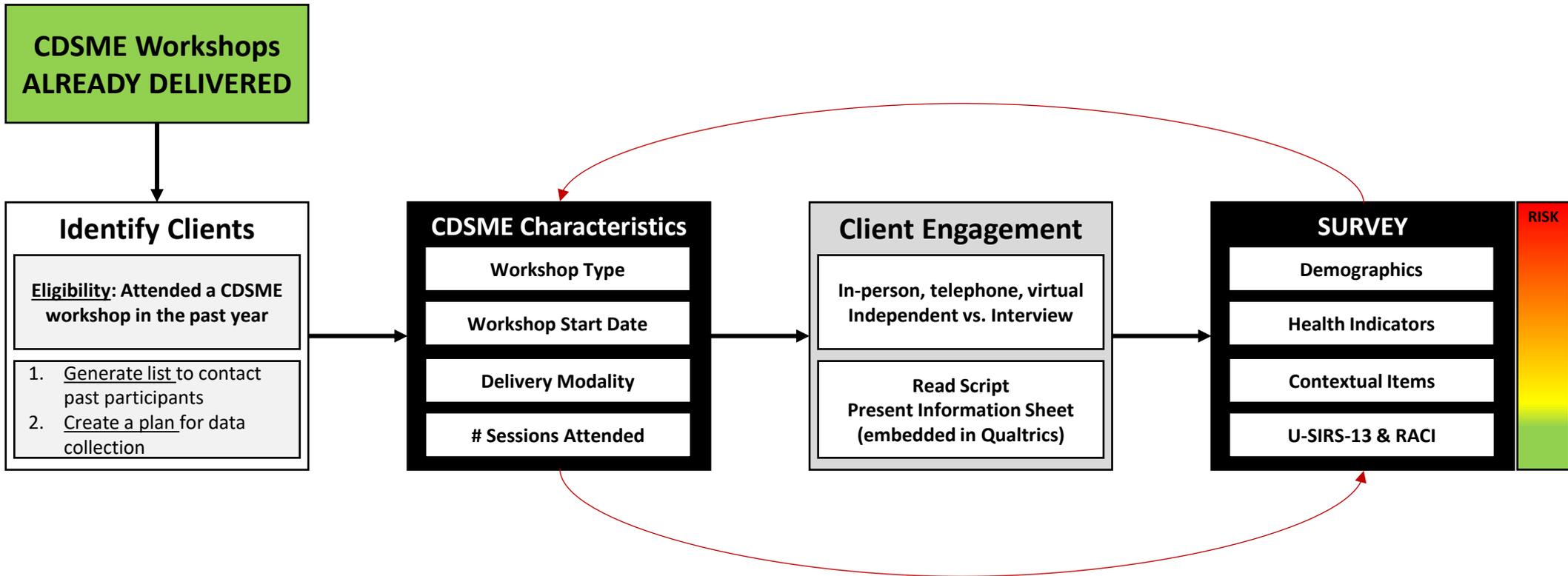
Retrospective Assessment of Connection Impact (RACI)

- Developed to *retrospectively* assess participants' perceptions
- Responses are *directly related to program/service*, not general feelings of connection
- Asks participants, "How much has **XXX** given you opportunity to...?"

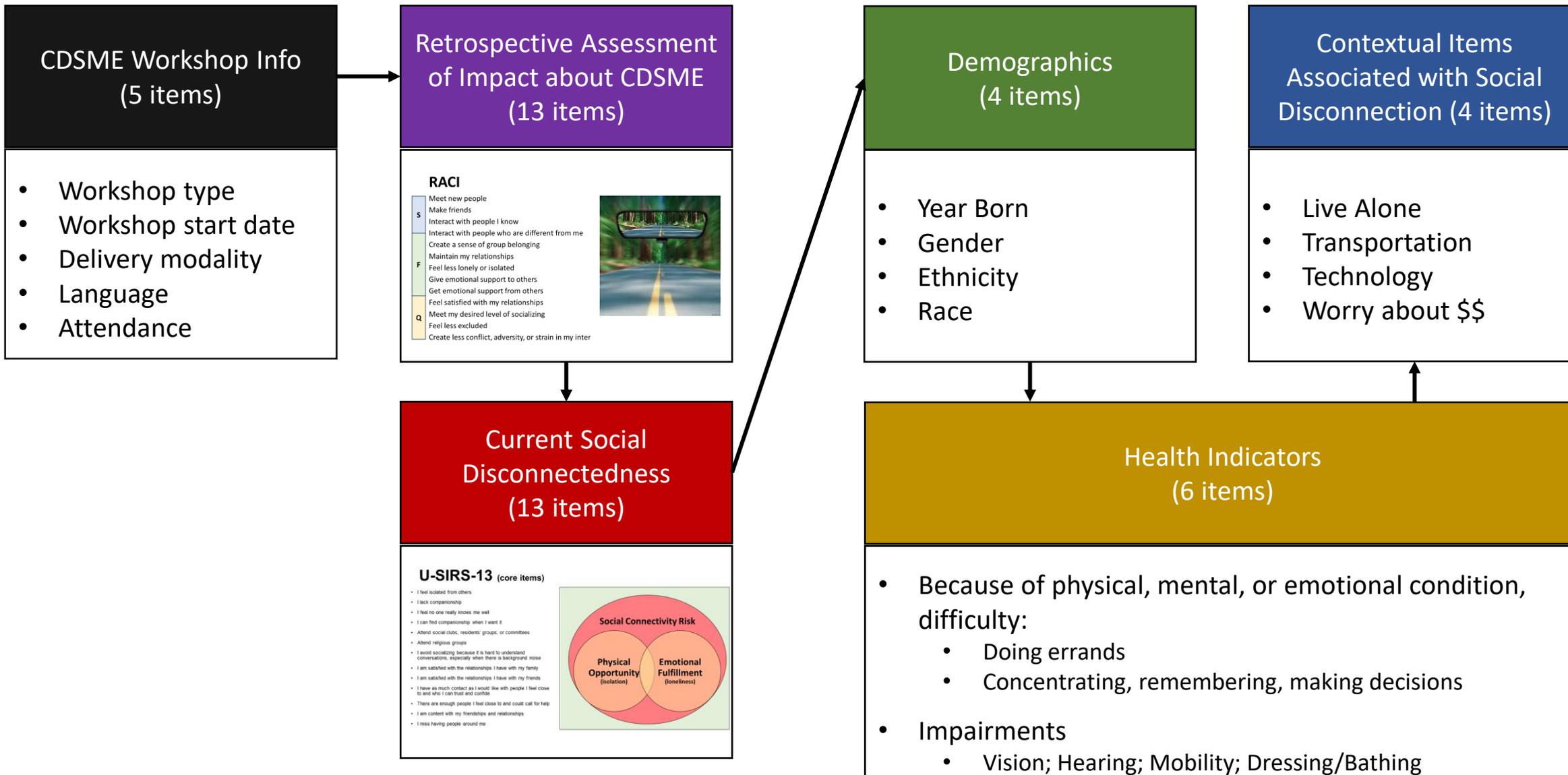
13-ITEM RACI	
S	Meet new people
	Make friends
	Interact with people I know
	Interact with people who are different from me
F	Create a sense of group belonging
	Maintain my relationships
	Feel less lonely or isolated
	Give emotional support to others
Q	Get emotional support from others
	Feel satisfied with my relationships
	Meet my desired level of socializing
	Feel less excluded
	Create less conflict, adversity, or strain in my interactions with others

- 13 items
- Assesses aspects of structure, function, and quality
- Easy to administer (one-time administration; takes ~2 minutes)
- Appropriate across sectors
- Appropriate for participants of age groups

Evaluation Flow



Survey Instrument



Delivery Characteristics

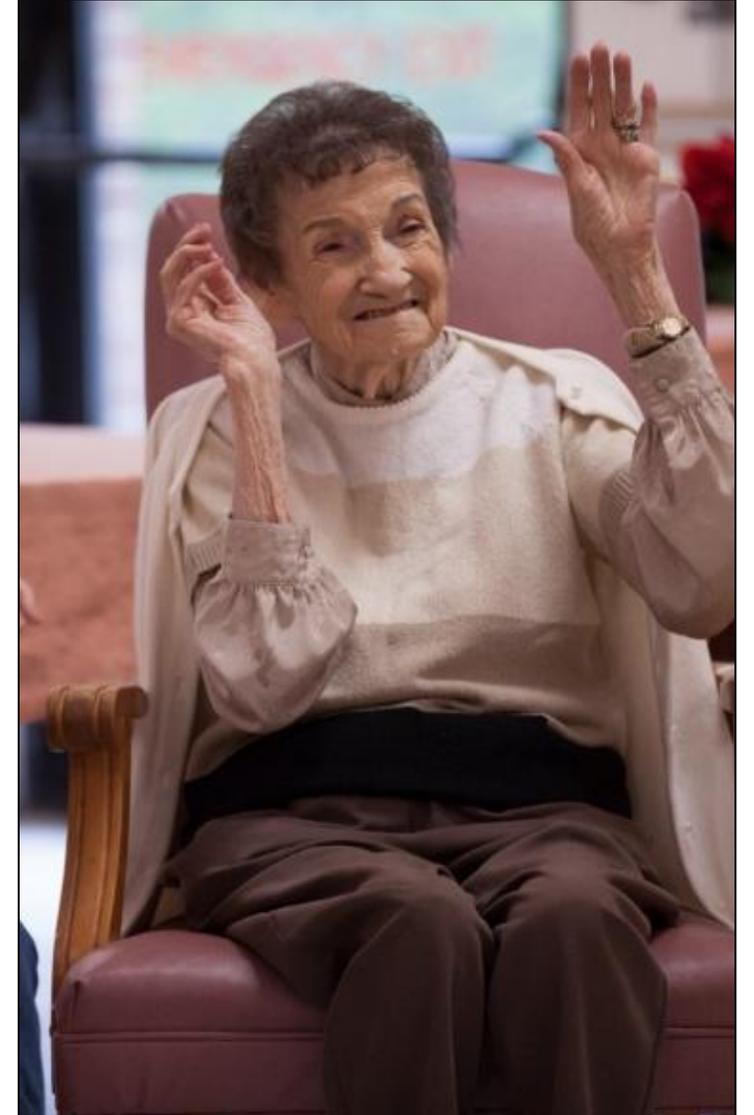
Data Contributions by Site				
	<u>Engaged</u>		<u>In Analyses</u>	
	n	%	n	%
AgeOptions	12	11.7%	11	13.6%
AgeOptions-e	14	13.6%	8	9.9%
HL4ME	6	5.8%	6	7.4%
MARC	1	1.0%	1	1.2%
MARC-e	5	4.9%	1	1.2%
NCCHW	5	4.9%	4	4.9%
NCHHN	41	39.8%	34	42.0%
PICF	19	18.4%	16	19.8%
Total	103		81	

* 18 declined to participate after initiating the survey; 4 had missing data

- Of the 103, 18 declined to participate & 4 had missing data
- 93% CDSMP; 6% DSMP; 1% CPSMP
- 73% in-person; 27% virtual or hybrid
- On average, attended 5.0 (of 6) workshop sessions
 - 92% successful completion (4+ of 6 sessions)

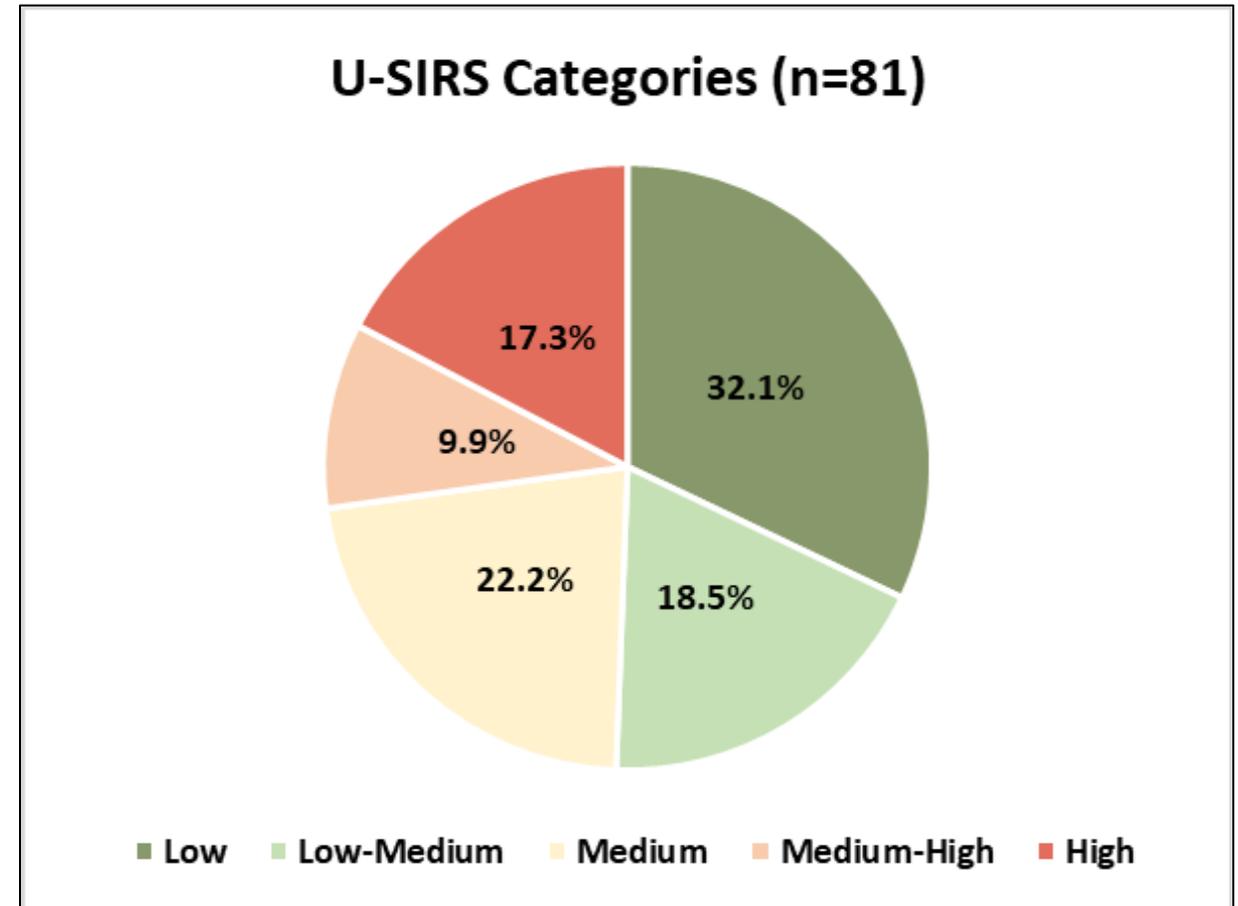
Participant Characteristics (n=81)

- Average age 68.9 years
- 76% female
- 3% Hispanic
- 72% White; 20% Black; 3% Asian; 5% Other/Multiple
- 45% live alone
- 33% worry/stress about money to meet basic needs
- *Impairments*: 28% mobility; 9% hearing; 5% vision
- 14% difficulty doing errands

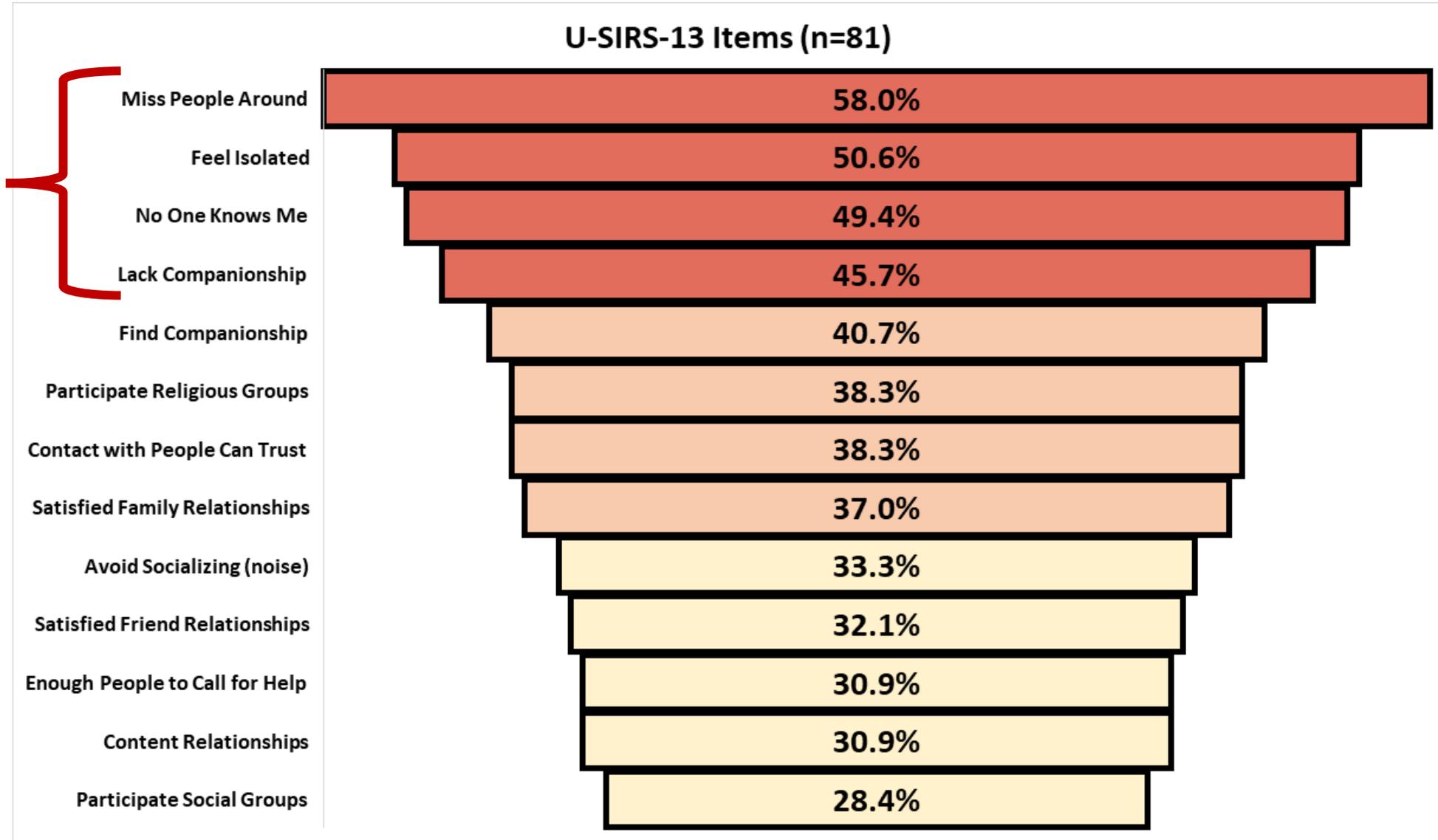


Post-Workshop Social Disconnectedness

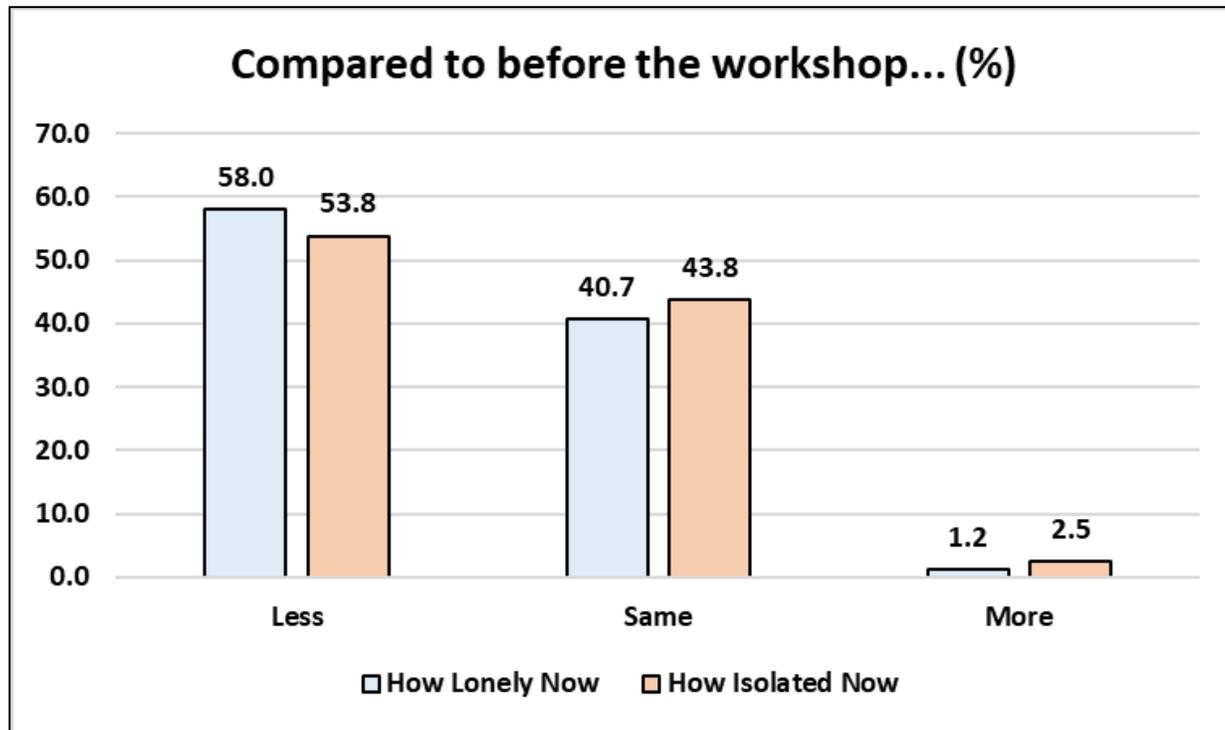
- Average U-SIRS-13 score: 5.14 (of 13)
 - Cronbach's Alpha = 0.88 [strong]
- 49% threats to social connectedness
 - 22% Yellow
 - 10% Orange
 - 17% Red
- Suggests
 - Moderate risk, on average
 - Additional connection opportunities needed post-workshop (may depend on time since workshop occurred)



Social Disconnectedness

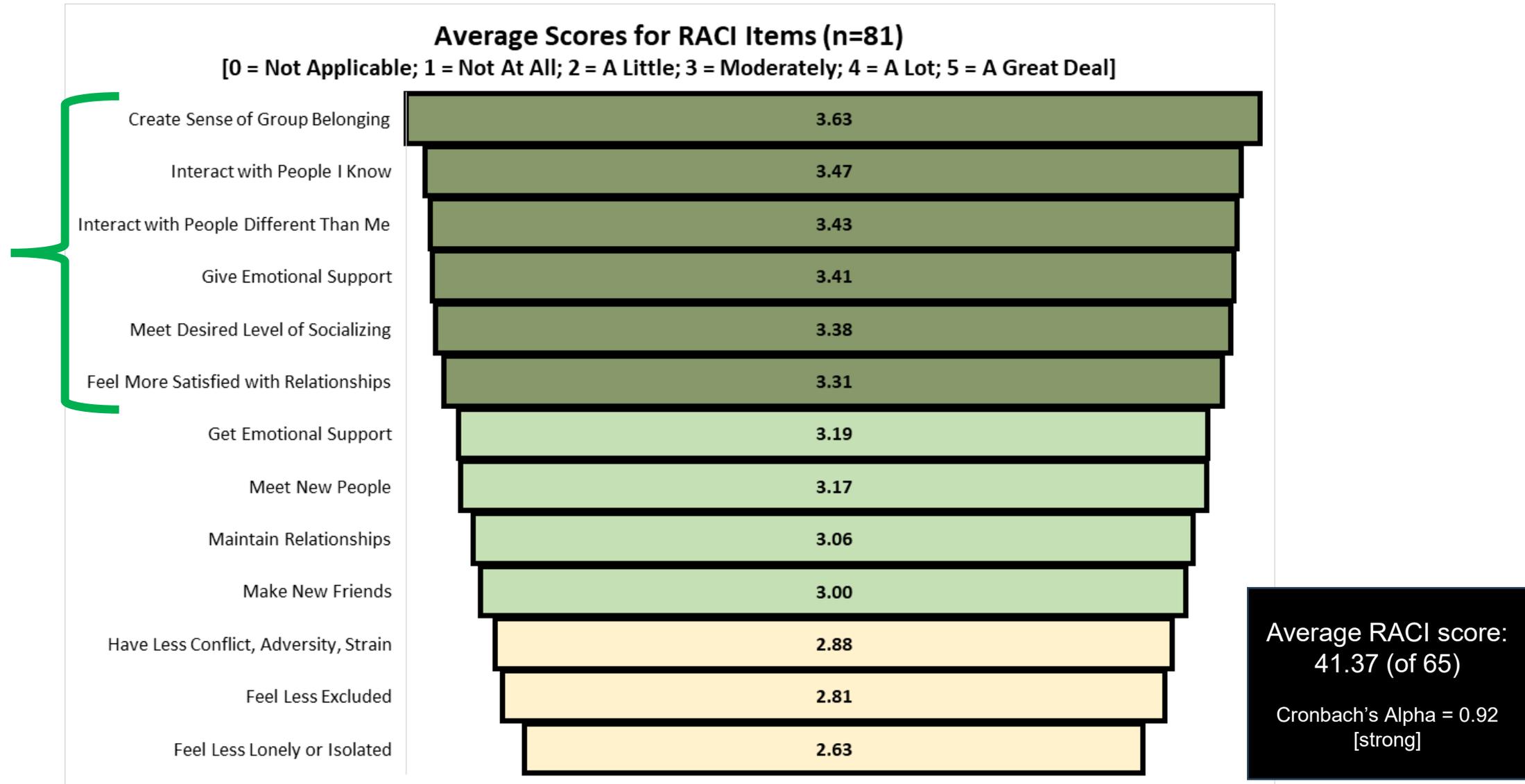


Perceptions about CDSME Workshops



- Compared to before the workshop
 - 58% less lonely; 41% about the same
 - 54% less isolated; 44% about the same
- 73% satisfied with workshop “a lot” or “a great deal”

Social Connection Impact of CDSME



Correlations

Correlations Between Connection Scales, Perceived Improvements, and Workshop Engagement

		1	2	3	4	5	6	7
U-SIRS-13	1	1	-0.463**	-0.576**	0.267*	0.364**	-0.039	0.046
RACI	2		1	0.736**	-0.331**	-0.356**	0.047	-0.140
Workshop help more connected in future	3			1	-0.409**	-0.482**	0.047	0.028
Compared to before, how lonely now	4				1	0.623**	-0.243*	0.004
Compared to before, how isolated now	5					1	-0.040	-0.012
Workshop attendance	6						1	-0.142
Months since starting CDSME workshop	7							1

* P<0.05; ** P<0.01

- Participants who reported higher workshop impact reported lower disconnectedness
- Participants who reported lower disconnectedness reported having the less loneliness and isolation as before workshop
- Participants who reported higher workshop impact reported having the less loneliness and isolation as before workshop
- Participants who reported workshops would help them become more connected in the future reported higher workshop impact and lower disconnectedness
- Participants with higher attendance reported feeling less lonely now compared to before the workshop

Comparisons of Impact

- On average, compared to before the workshop, participants who reported being:

LESS LONELY NOW VS. BEFORE

- Less disconnected
- More workshop connection impact
- Higher belief that workshop will help future connection
- **Attended more workshop sessions**

LESS ISOLATED NOW VS. BEFORE

- Less disconnected
- More workshop connection impact
- Higher belief that workshop will help future connection

LESS LONELY NOW VS. BEFORE

- Make friends
- Interact with people I know
- Create sense of group belonging
- Maintain relationships
- Get emotional support
- Feel satisfied with relationships
- Meet desired level of socializing
- **Feel less lonely or isolated**
- **Less conflict, adversity, strain**

LESS ISOLATED NOW VS. BEFORE

- Make friends
- Interact with people I know
- Create sense of group belonging
- Maintain relationships
- Get emotional support
- Feel satisfied with relationships
- Meet desired level of socializing
- **Meet new people**

Overview of Key Findings

- CDSME workshops create opportunities for connection
 - Impact spans aspects of structure, function, and quality
- Workshops have lasting benefits to decrease feelings of loneliness and isolation
 - Higher attendance as associated with feeling less lonely
- Those perceiving more benefit from workshops:
 - Lower post-workshop disconnection
 - Positive outlook about future connection



Thank you!

Matthew Lee Smith

MATLSMIT@iu.edu





Questions and Discussion

Please share your questions or comments in the Q&A box.

New Opportunity! Apply for the 2026 Community of Practice

- Seeking applications from aging and disability network organizations for a community of practice (COP) focusing on measuring the social connection impact of Chronic Disease Self-Management Education (CDSME) programs through pre- and post-test measures.
- Each COP member will have access to the collection instrument and protocols, technical assistance from the Commit to Connect Resource Center, expertise from an expert evaluator, and five peer-to-peer learning sessions.
- Find more information:

<https://committtoconnect.org/communities-of-practice/>



COP Overview

- Objectives:
 - Work with COP members to collaboratively implement a flexible, yet standardized evaluation process for their CDSME program
 - Build capacity of members by providing training and technical assistance to COP members
 - Use findings to build the social connection evidence-base for CDSME programs
- Audience: Aging and disability network organizations
- **Join us for an informational session on this opportunity tomorrow, February 12, from 2:00-2:30 p.m. ET.**
- Applications are due by Friday, February 27, 2026, at 11:59 p.m. ET.



Upcoming Events

- **Tomorrow! Community of Practice Information Session:**

- February 12, 2:00-2:30 p.m. ET

- **Office Hours:**

Highlighting Innovative Social Connection Programs

- Learn from Julie Burkley, Director of Programs with FriendshipWorks
- February 25 from 1:30 to 2:00 p.m. ET.



Thank you!

- Please complete the survey which will be displayed in your browser after Zoom closes.
- The recording will be available on www.committtoconnect.org/events
- For further questions, contact us at: info@committtoconnect.org

