

MPHI/DASH

Social Network Analysis Report

2025

VisibleNetworkLabs

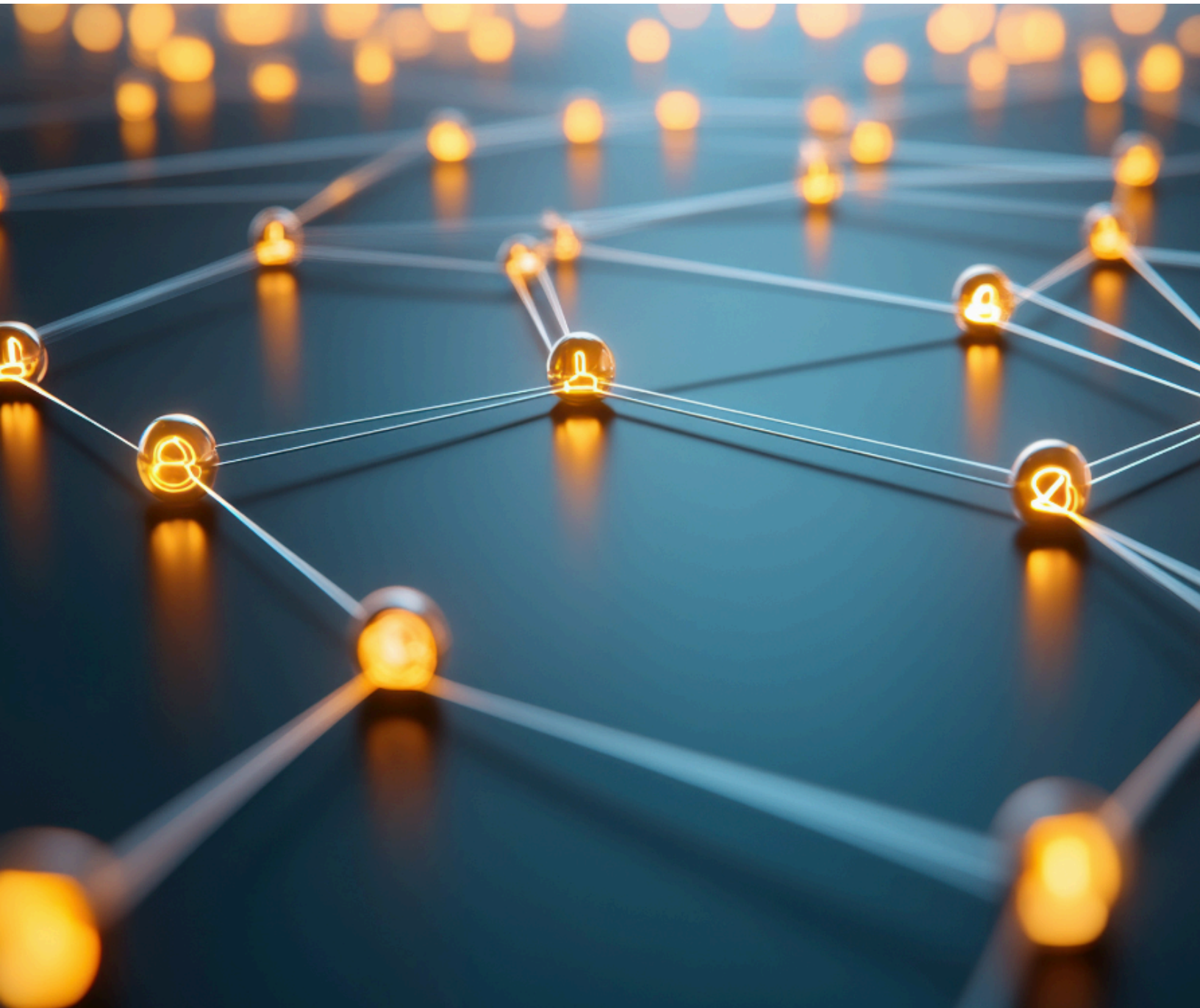


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The social network analysis was conducted using **PARTNER CPRM™** by Visible Network Labs. For more information about Visible Network Labs and the tools and resources available, please visit www.visiblenetworklabs.com.

VISIBLE NETWORK LABS is a data science company developing tools and technology to help people measure, understand and evolve the personal and professional networks that influence the communities where they live.

PARTNER CPRM™ leverages network science to visualize, manage, and track your collaborative community ecosystem. It is a scientifically validated way to design data-driven network strategies that generate social impact.

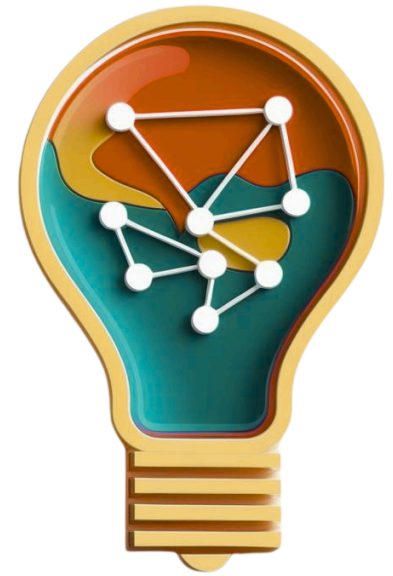
Executive Summary

This project, conducted by the Michigan Public Health Institute (MPHI) and Data Across Sectors for Health (DASH) in partnership with Visible Network Labs, to better understand how organizations working with community health data are navigating today's funding and policy landscape. Data will be used to identify opportunities for collaboration that address current challenges and support future, multi-sector, data-driven efforts to promote thriving communities. The project also seeks to explore the formation of a learning advisory group to help focus collective energy and resources where they can have the greatest impact.

A survey was sent to 537 organizations that have engaged with DASH—whether through Robert Wood Johnson Foundation-funded programs (via the Michigan or Illinois Public Health Institutes) or through collaborative efforts like All In: Data for Community Health, the Health+Housing Summit, or New Jersey Health Initiatives' Small but Mighty program. A total of 68 respondents indicated having 243 relationships, with an average of 5.5 relationships.

Key Findings

- **Trust and Collaboration Built:** The DASH initiative has established strong trust, data governance practices, and cross-sector collaboration across participating organizations.
- **Sustainability Gaps Identified:** Sustainable financing and shared power remain key challenges, highlighting the need for continued investment and equitable leadership.
- **Progress Toward Health Goals:** Most respondents (86%) identified improved community health as their primary goal, with about two-thirds reporting meaningful progress in addressing health needs and strengthening partnerships.
- **Policy and Funding Pressures:** Nearly 70% of organizations reported that recent shifts in policy and funding priorities have significantly affected their data-driven work.
- **Commitment to Equity:** Organizations remain focused on addressing health disparities (71%) and health-related social needs (70%) as central to their ongoing success.
- **Path Forward:** Community organizations are viewed as essential partners in sustaining data-driven progress, with strong interest in advocacy, data support, and participation in peer or technical assistance networks.



Total Respondents:

68

Total Relationships:

243

Average Relationships:

5.5

Background

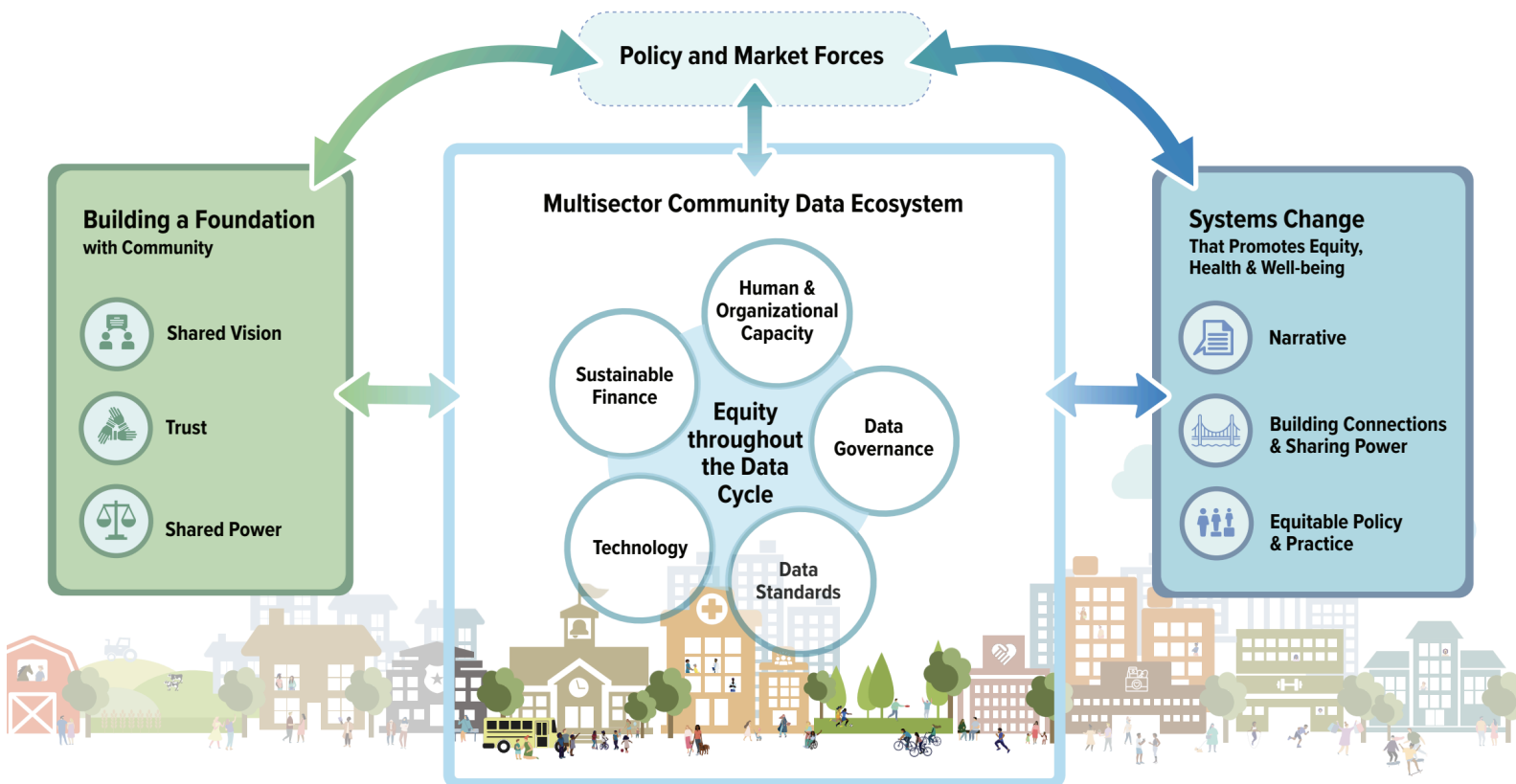
About MPHI/DASH

DASH is co-led by the Illinois Public Health Institute and the Michigan Public Health Institute (MPHI). Together, the two institutes make up the DASH Program Office (PO), which is funded by the Robert Wood Johnson Foundation.

Since 2015, DASH has funded community collaborations that aim to share data, or use multi-sector data, to improve community health. Insights and learnings have been gathered from a network of partners and grant recipients.

One outcome of this work is the DASH Framework, which maps out key considerations in data-sharing projects and demonstrates how data can be used to make informed decisions about programs and policies that improve community well-being.

DASH considers the social, political, economic, and historical context of information systems to ensure that these efforts lead to a fair, just, and inclusive future for all. This systems approach has led to centering collaboration, the inclusion of people with lived experience, peer learning, asset framing, and policy-level impact as core values of the work.



Network Terms

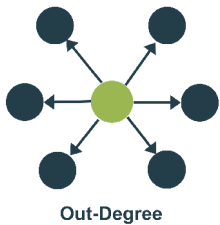
Network: A formal partnership created between three or more people or organizations to achieve mutual goals.

Network Map: A visualization that shows members of a group as “nodes” and the relationships among them as connecting “edges”.

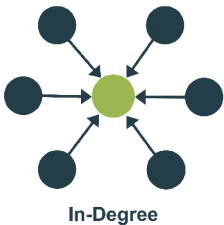
Nodes: Usually represented as circles in a network. A node can be a person, organization, department, etc.

Edges: The lines connecting two nodes, which represents a relationship between those nodes.

Degree: The total number of edges connected to a node (ingoing and outgoing). Average degree measures average number of edges reported for each node in a network.



Out-Degree Centrality measures the number of direct connections a node sends out to other nodes within a network. It quantifies how active a node is in initiating interactions, spreading information, or allocating resources to others. High Out-Degree Centrality indicates a node that plays an influential role in outward communication or resource provision.

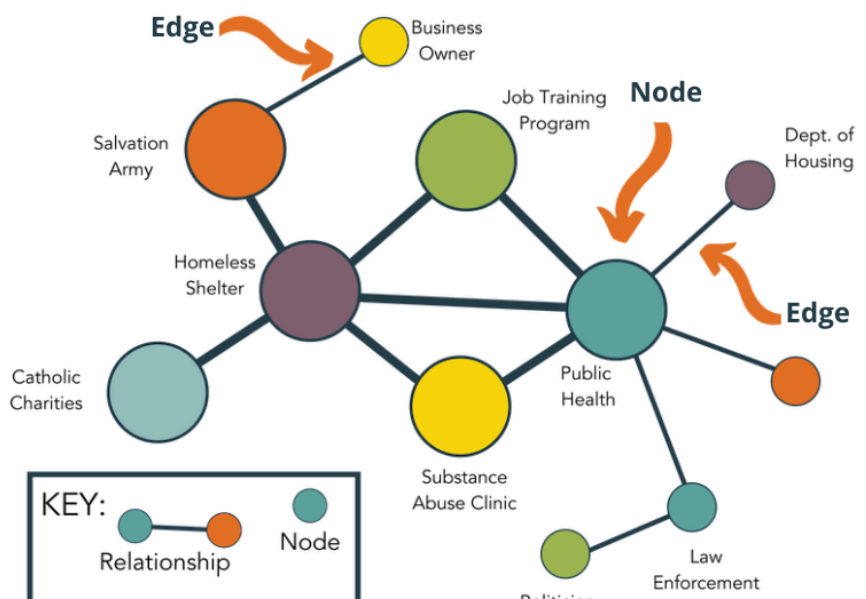


In-Degree Centrality measures the number of direct connections a node receives from other nodes within a network. It reflects the popularity or importance of a node based on how many connections it has. In the context of social network analysis, a node with high In-Degree Centrality is often considered a major receiver of information, resources, or influence.

How to Interpret A Network Map

Networks refer to a partnership created between three or more people or organizations to achieve mutually desired objectives.

In a network map, partnerships are visualized as “nodes” (circles) and “edges” (lines) which represent the network members and the relationships between them. Nodes may be color-coded by certain organizational characteristics, such as jurisdiction or sector.



Achievements and Progress

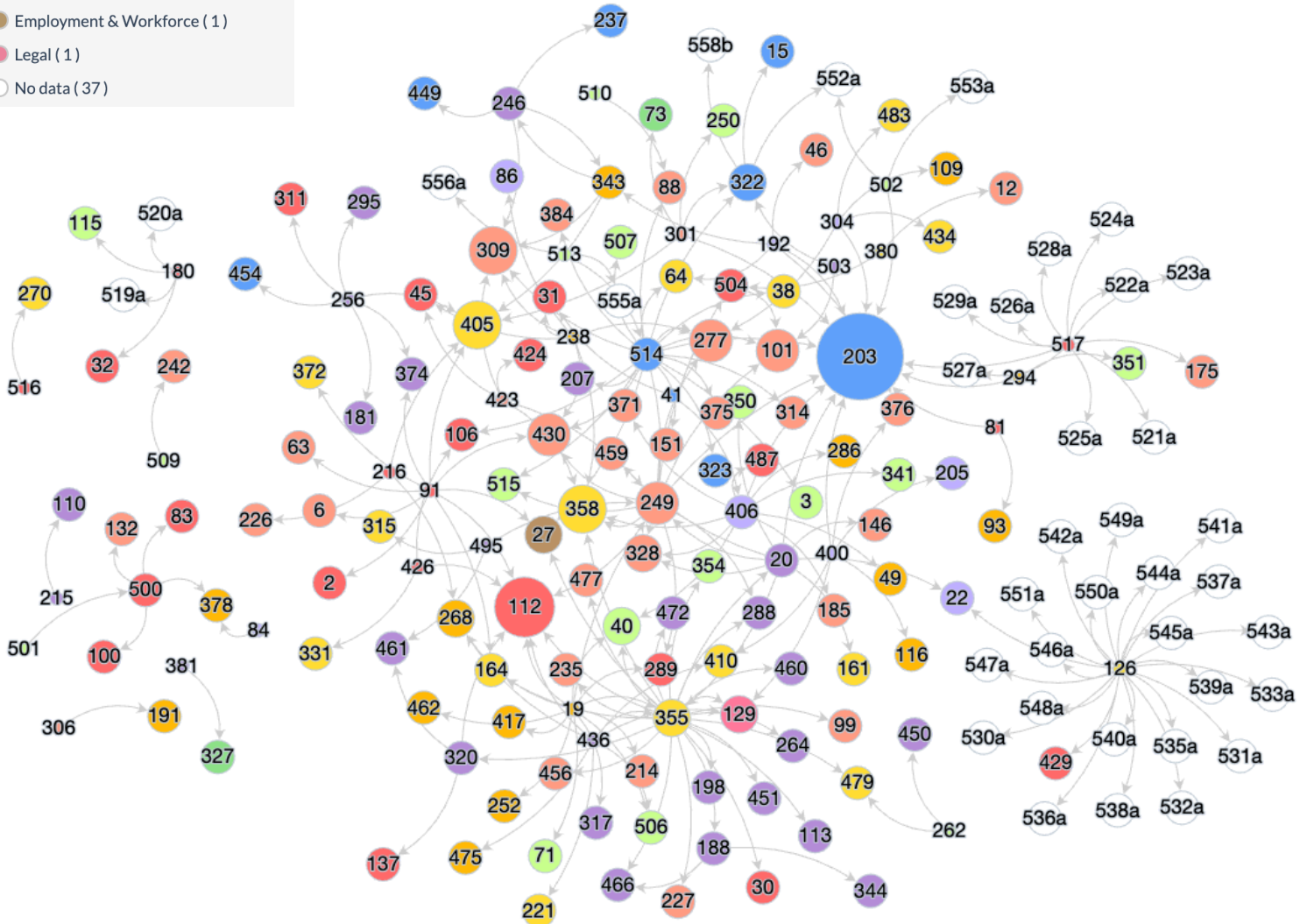
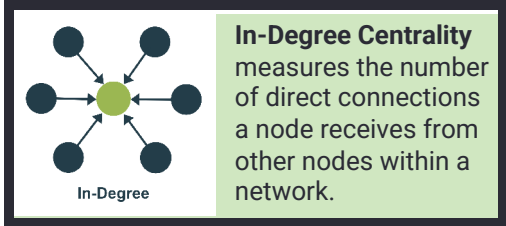


Network Structure

The map below shows **194 nodes in the network and the 242 relationships** reported when the survey was administered. The nodes are colored by primary sector. Each organization is represented as a circle (called a "node").

In this network, six members were chosen the most by respondents (in-degree centrality) and only one of which was a respondent. The others are nonrespondents selected as partners by respondents.

- Primary sector** 🗺️
- Healthcare (24)
 - Advocacy or Activism (18)
 - Social Services (27)
 - Public Health (33)
 - Philanthropy (9)
 - Academia or Research (16)
 - Education (8)
 - Data Infrastructure (18)
 - Environment (2)
 - Employment & Workforce (1)
 - Legal (1)
 - No data (37)

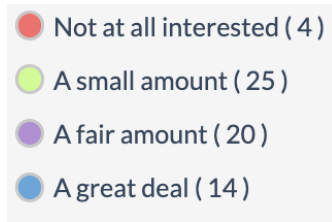
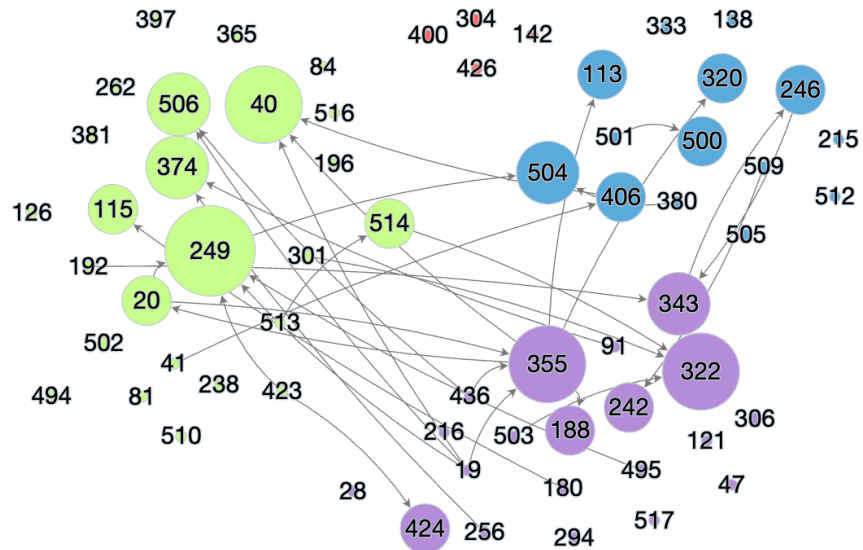


Network Structure

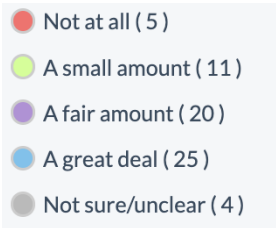
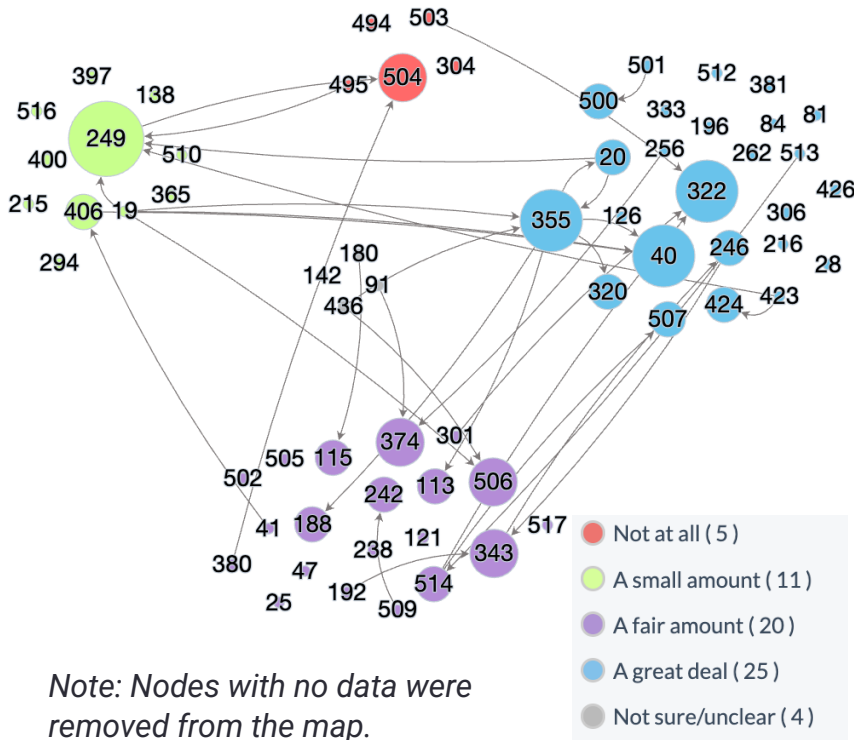
The map to the right shows the **63 nodes** in the network that responded to Question 12: *“How interested are you or your organization in participating in unfunded peer support or technical assistance networks?”*

Node size represents in-degree, indicating how many respondents identified each organization as a partner. Larger nodes have higher in-degree scores, meaning they are more frequently selected as having relationships within the network. Each color represents a different level of interest. This map also includes isolated nodes, representing organizations for which no relationships were reported.

Overall, the network shows a mix of interest levels, with several members exhibiting high in-degree scores. The majority of connections come from those expressing **“a small amount”** of interest (green nodes), while a smaller cluster of **“great deal”** (blue) and **“fair amount”** (purple) respondents is also present.



Note: Nodes with no data were removed from the map.



Note: Nodes with no data were removed from the map.

The map to the left shows the **65 nodes** in the network that responded to Question 5: *“How have recent policy and funding priority shifts impacted your ability to continue your data-driven work?”*

Node size represents in-degree, indicating how many respondents identified each organization as a partner. Each color represents a different response option. This map also includes isolated nodes, representing organizations for which no relationships were reported.

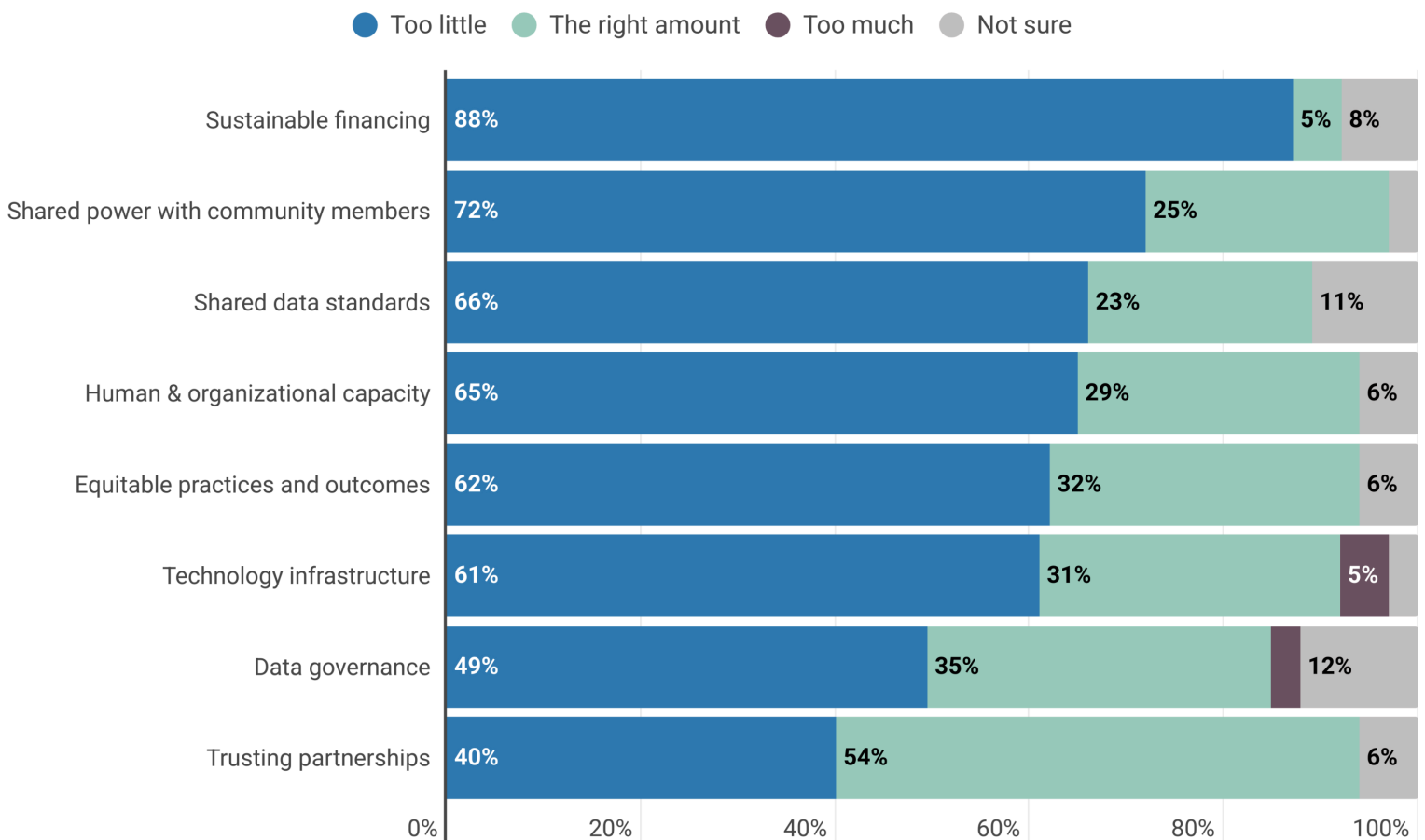
Overall, the more connected organizations (larger nodes with higher in-degree) primarily reported being impacted **“a fair amount”** (purple) or **“a great deal”** (blue) by recent policy and funding shifts. In contrast, only a few highly connected organizations reported being impacted **“a small amount”** (green) or **“not at all”** (red).

Status of Multi-Sector Initiatives

Sustainable financing and shared power were identified as key gaps.

Respondents reported that sustainable financing and shared power with community members are areas where current multi-sector data-driven initiatives fall short. Nearly nine in ten respondents (88%) said **sustainable financing is “too little,”** and 72% identified **shared power with community members as being “too little.”** In contrast, about half of respondents felt that the level of **trusting partnerships in their community is “about right,”** suggesting a solid foundation for collaboration.

Question 1: From your perspective, how well have the following components of multi-sector data-driven initiatives been established in your community? Is there too little, the right amount, or too much of each? N=67 respondents

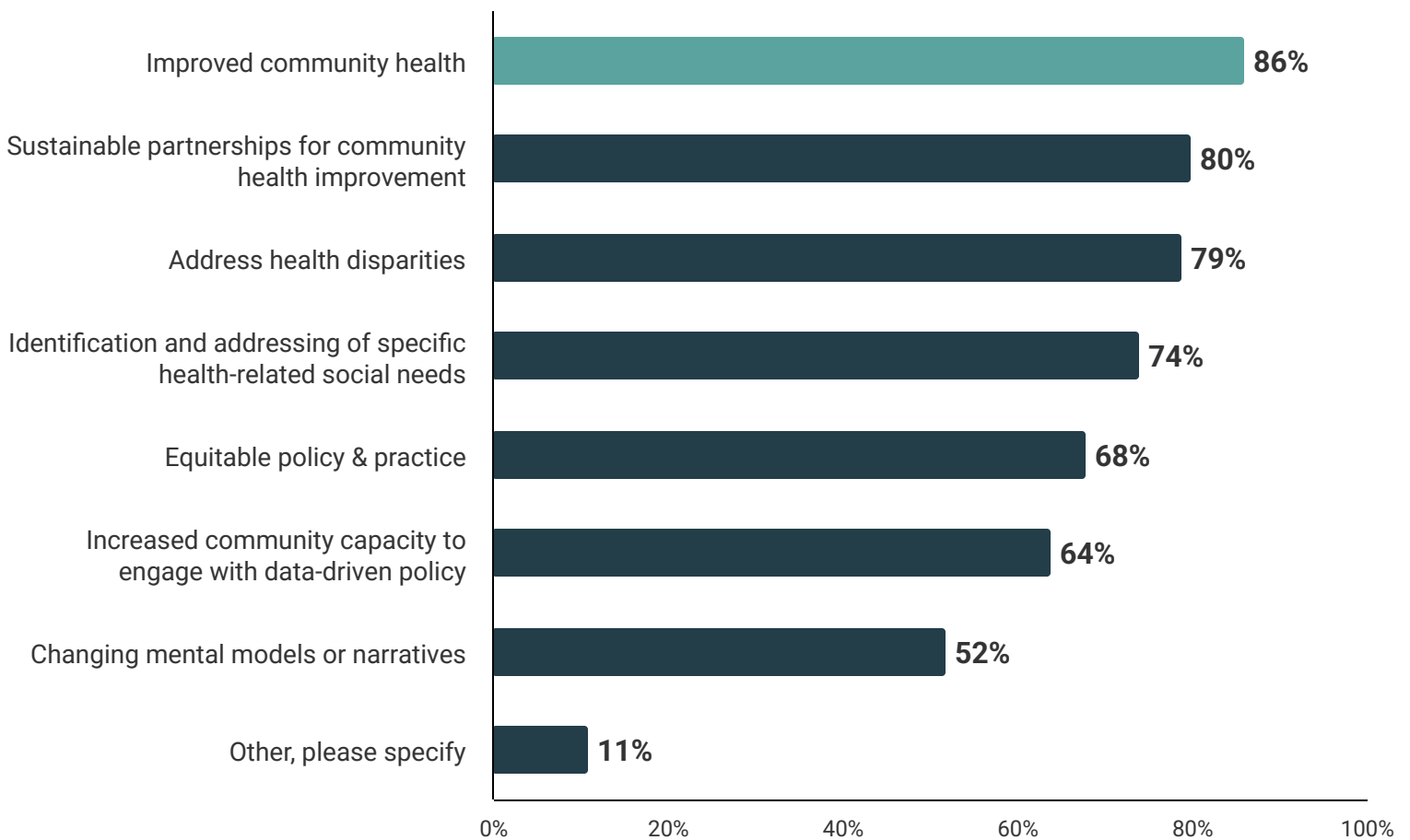


Organizational Outcomes

Improved community health is indicated as the most desired outcome of multi-sector data-driven efforts.

Most respondents identified **improved community health** as the primary goal of their multi-sector data-driven efforts (86%). Other top priorities included **sustainable partnerships for community health improvement** (80%) and **addressing health disparities** (79%). Respondents also indicated the importance of identifying and addressing specific health-related social needs and promoting equitable policy and practice.

Question 2: What are the desired outcomes of your organization's multi-sector data-driven efforts? (select all that apply) N=66 respondents



Other, please specify:

- Appropriate, safe and equitable mental health crisis response
- Economic mobility/financial stability
- Economic, environmental, social and racial wellbeing
- Identifying and addressing of specific strengths and assets (rather than focusing exclusively or primarily on needs / deficits); increasing community attachment
- Improved access to care
- Management of eldercare on a geographic basis - in part -
- To represent underrepresented groups in research (e.g., those preferring languages other than English)

Organizational Outcomes

Improved community health is the top priority, followed by identifying specific health-related social needs and building sustainable partnerships.

Respondents most often selected **improved community health** as their top outcome, with **identifying/addressing specific health-related social needs** and **sustainable partnerships for community health** as second and third choice priorities. Addressing health disparities and building capacity for data-driven policy also featured as second-choice priorities.

Question 3: Of the outcomes you selected, which three are the most important outcomes of your data-driven efforts? Please enter the numbers associated with your top three outcomes in order of importance below.

1

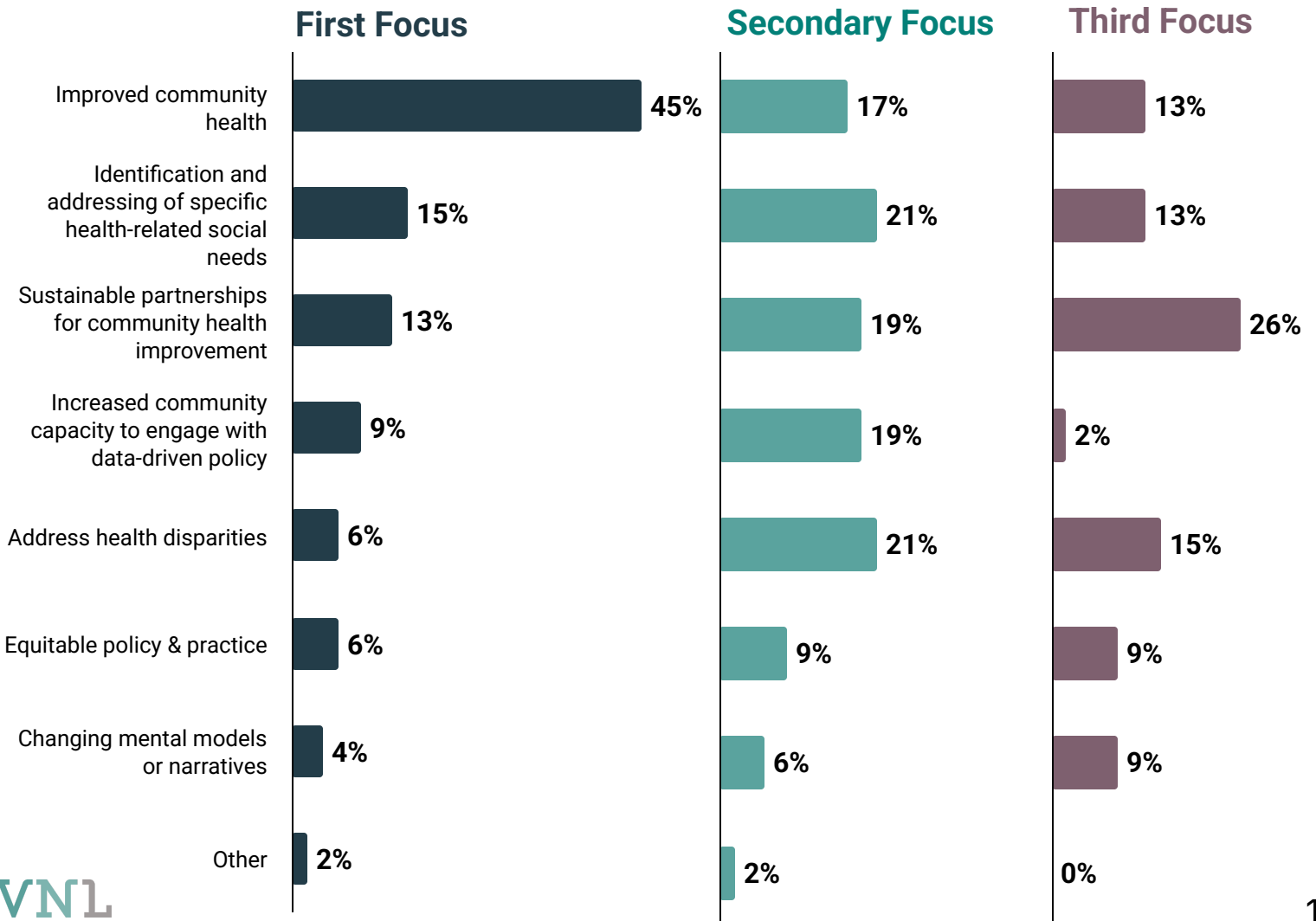
Improved community health

2

Identify/address specific health-related social needs

3

Sustainable partnerships for community health improvement

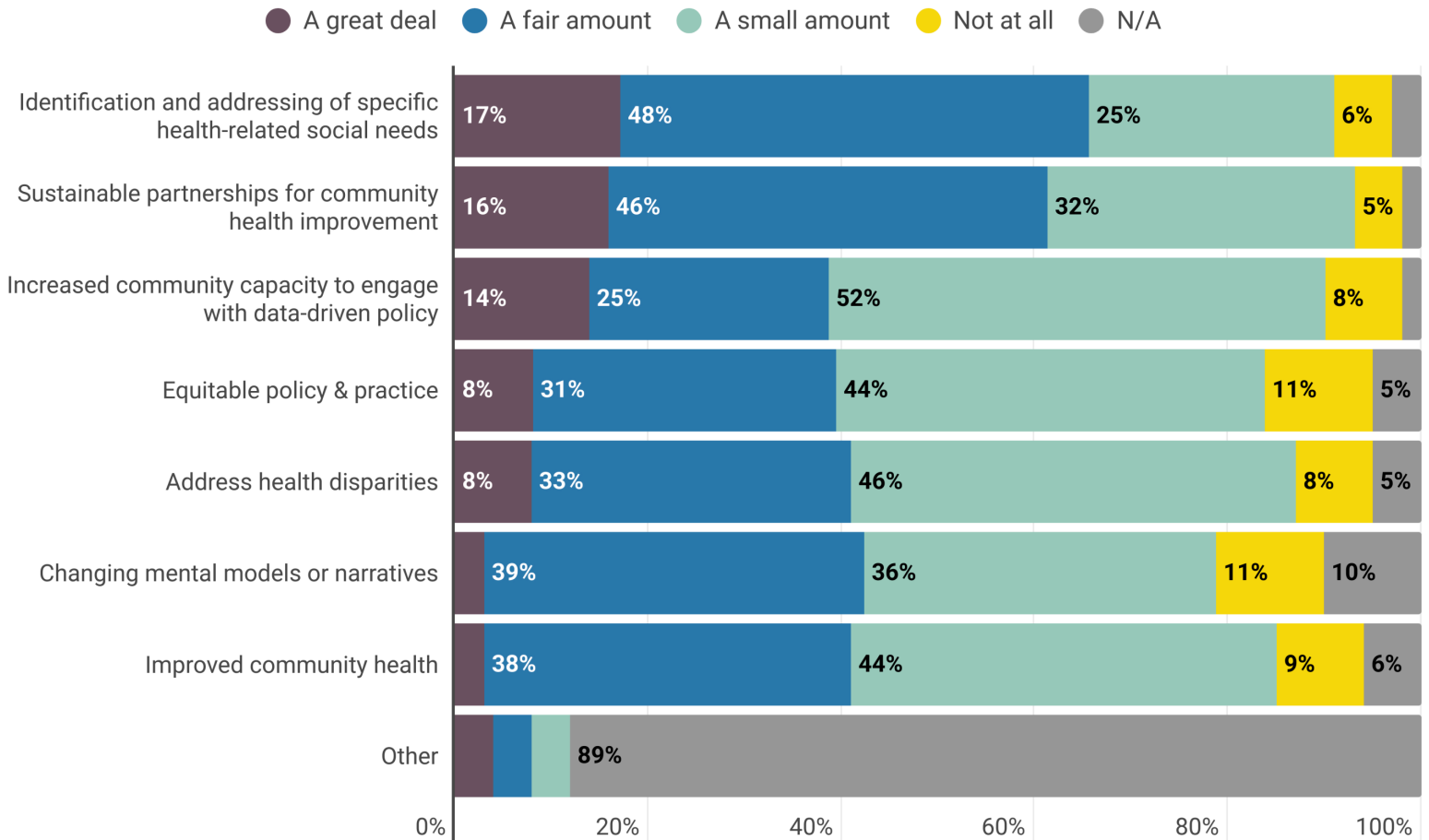


Organizational Outcomes

About two-thirds of organizations achieved “a great deal” or “a fair amount” of progress in addressing health-related needs and building sustainable partnerships.

About two-thirds of organizations reported achieving “a great deal” or “a fair amount” of progress in **identifying and addressing specific health-related needs (66%)** and in **building sustainable partnerships for community health improvement (62%)** through their participation in multi-sector data-driven initiatives. The areas of comparatively less achievement include **continued attention to equitable policy, shifting mental models and narratives, and reducing health disparities** remain areas of comparatively less achievement.

Question 4. To what degree have these outcomes been achieved based on your participation in multi-sector data-driven initiatives? N=65 respondents

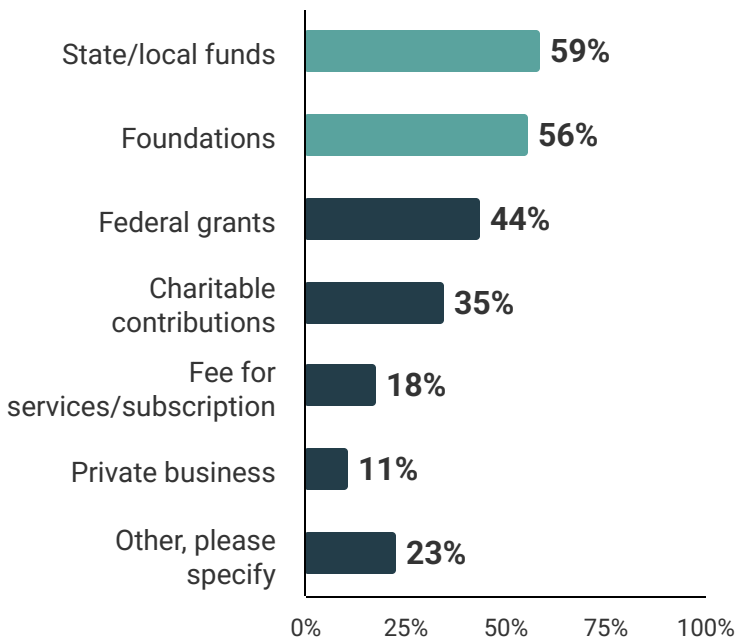


Funding

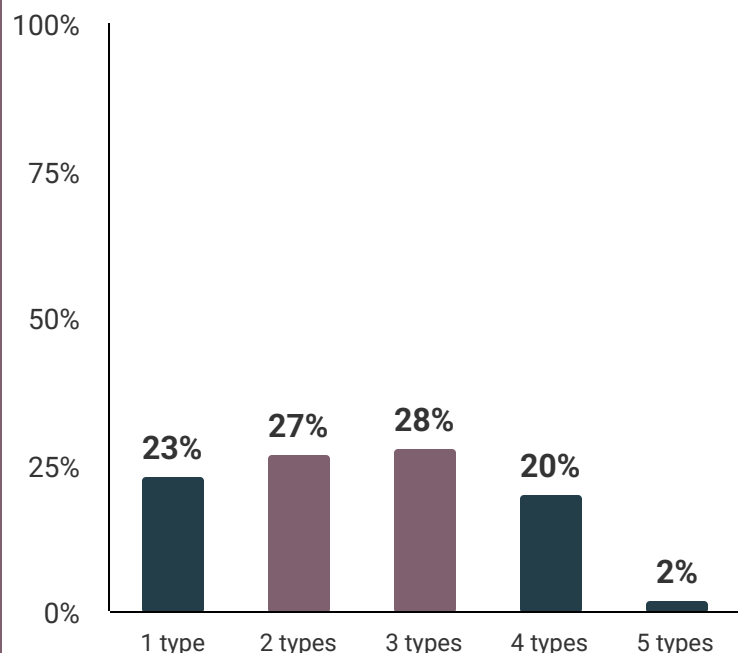
Over half of respondents reported that their work is funded by state/local funds and foundations. Most respondents (about 75%) rely on 2–4 funding types.

Question 6. How is your multi-sector data-driven work currently funded? Select all that apply. N=66 respondents

Most multi-sector data-driven initiatives are supported by **state or local funds (59%) and foundations (56%)**, with additional support from federal grants (44%) and charitable contributions (35%), while fewer rely on fee-for-service models (18%) or private business funding (11%).



Over half of organizations (55%) reported using **two to three types of funding**. About one-quarter (23%) depend on a **single funding source**, while only 2% reported drawing from **five or more funding streams**.



Other, please specify:

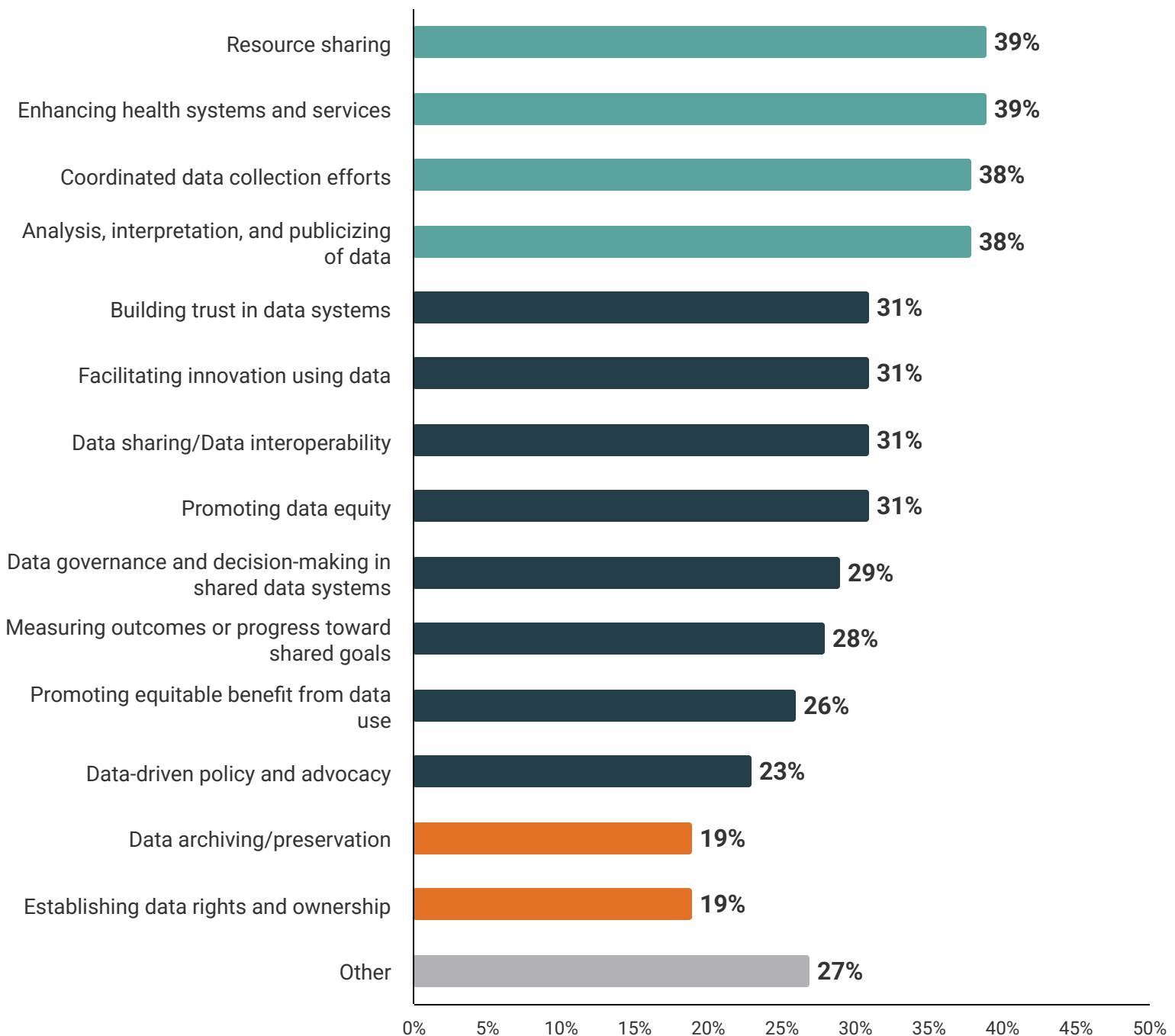
- Funding agreement with the U.S. Government by way of IHS-HHS
- Health care systems provide funding for Community Health Assessment, but not other initiatives
- Healthcare-funded (may be considered “private business,” but worth specifying)
- In-kind staffing and resources by partners
- Largely organizational support with some payer elements
- Open Referral gets consulting contracts to help other intermediary organizations develop and implement their strategies in cooperative and sustainable ways
- Operational funds from our partners
- Our organization is covering the costs to ensure this project continues; no current funding
- Unfunded (The audacity, right?!)
- University grants
- We are not receiving specific funding for this work and try to embed it into existing programs when possible

Partnership Activities

Partnership activities focus on sharing resources and improving health systems.

The most common collaborative activities reported were **resource sharing (39%)** and **enhancing health systems and services (39%)**, followed closely by **coordinating data collection (38%)** and **analyzing or publicizing data (38%)**. Fewer organizations focused on **data archiving or establishing data rights and ownership (19%)**.

Question 16. What kinds of activities do you engage in with this organization? N=190 relationships



Current Trends and Shifts

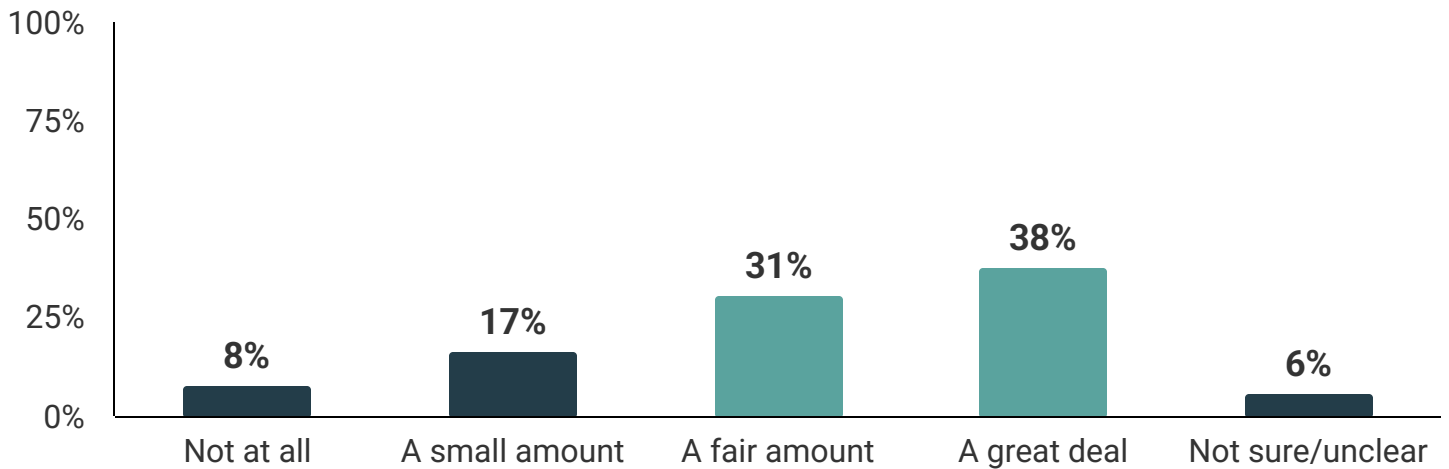


Policy Impacts

Nearly seven in ten report policy and funding impacts.

About 69% of organizations reported that recent policy and funding priority shifts have impacted their ability to continue data-driven work “a fair amount” or “a great deal.”

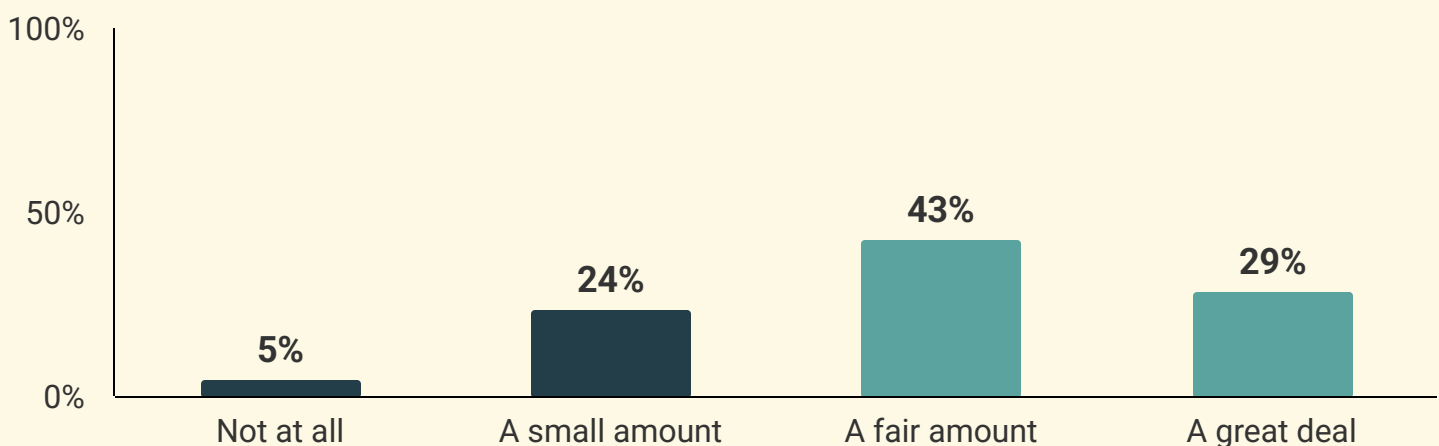
Question 5. How have recent policy and funding priority shifts impacted your ability to continue your data-driven work? (N=65 respondents)



Most organizations express concern about sustaining their work.

Nearly three-quarters of respondents (72%) reported being worried “a fair amount” or “a great deal” about sustaining their data-driven work in the current socio-political environment. Only a small share (5%) said they were not worried at all, underscoring widespread apprehension about long-term stability.

Question 8. How worried is your organization about sustaining this work in the current socio/political environment?

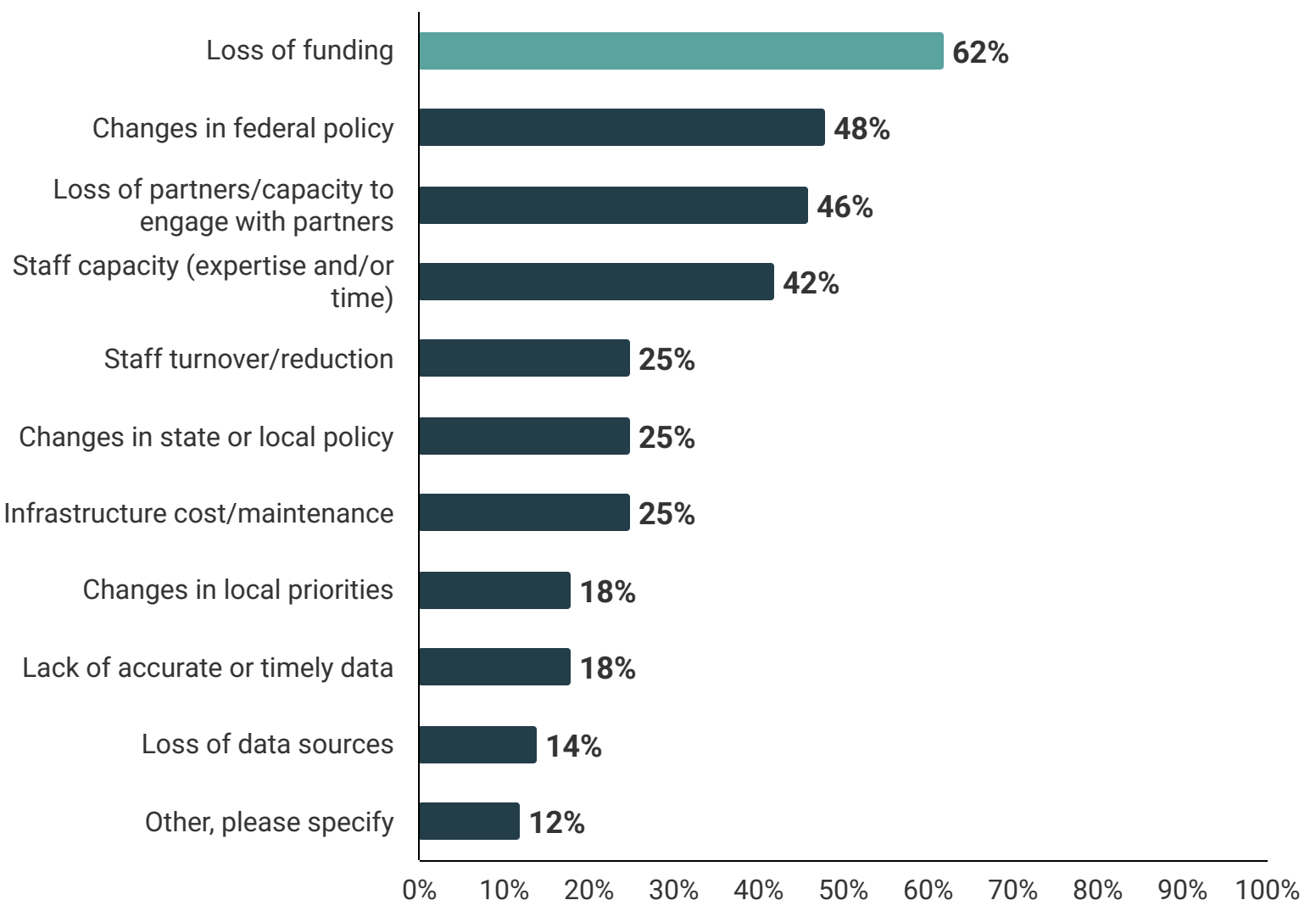


Policy Impacts

Funding loss and policy changes are the biggest challenges for organizational efforts related to multi-sector data-driven initiatives.

The most frequently reported challenges to multi-sector data-driven initiatives were **loss of funding (62%)**, and **changes in federal policy (48%)**. Many organizations also cited **loss of partners/capacity to engage with partners (46%)** and **limited staff capacity (42%)**.

Question 7: What are the biggest impacts to your organization's efforts related to multi-sector data-driven initiatives? (Select up to 3.) (N=65 respondents)



Other, please specify:

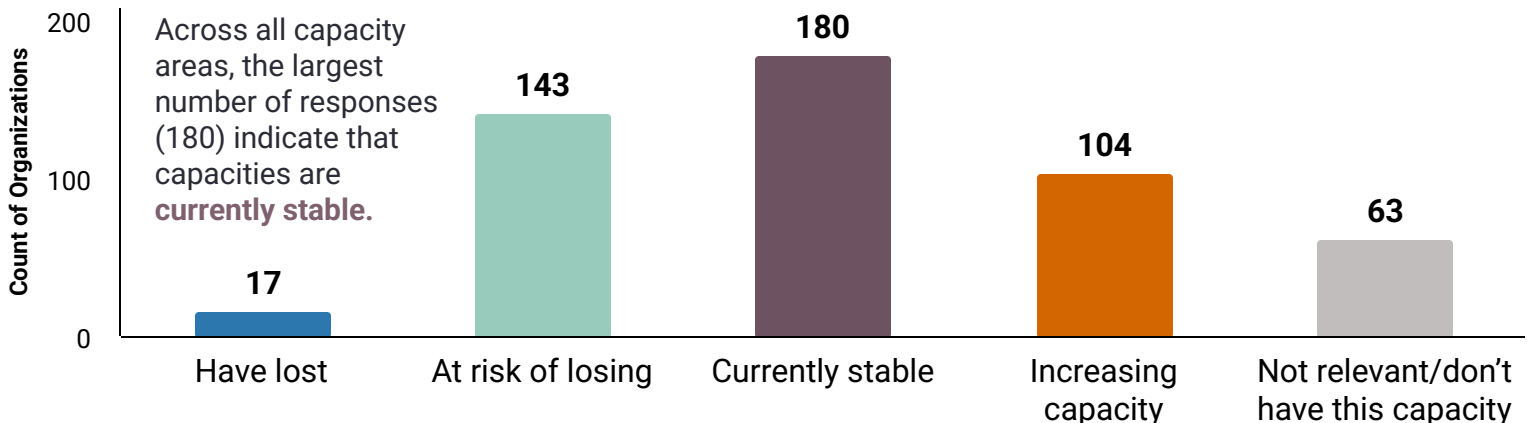
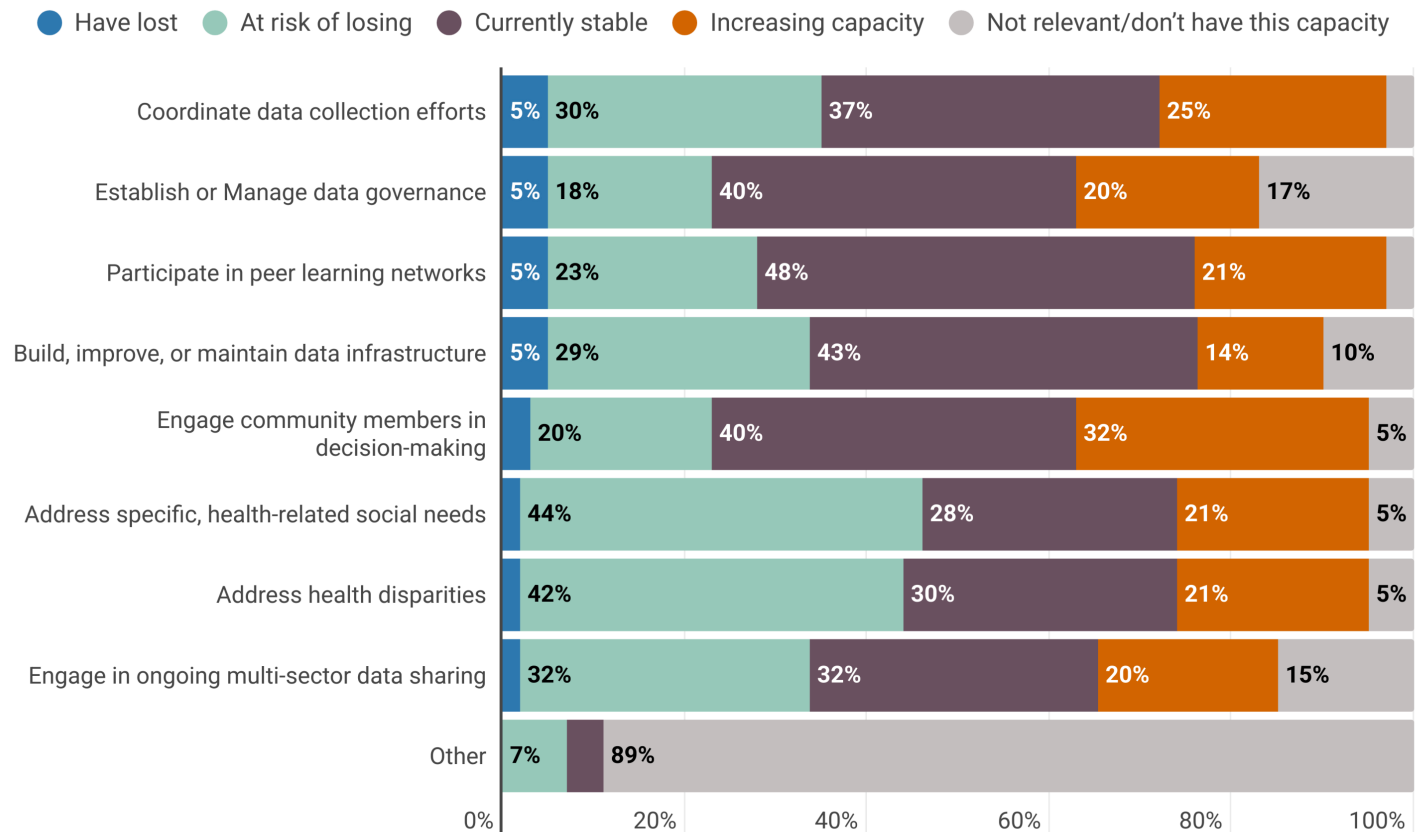
- Developing and sustaining a coordinating entity with authority and capacity to improve eldercare locally
- Lack of funding from private donors
- No impact
- Our work depends on a sense of possibility and trust, and those have diminished.
- Poor morale and extreme burnout
- Shifting priorities for foundations, limited funding, and anticipated organizational capacity challenges

Organizational Capacity

About one-third of organizations report increased capacity to engage community members in decision-making, while a similar share have lost or are at risk of losing their capacity to coordinate data collection efforts.

In contrast, many organizations report stable or growing capacity in areas such as data governance, peer learning, and data infrastructure, but significant declines are seen in addressing health disparities and health-related social needs.

Question 9. Many changes are occurring in the funding and policy landscape. We are interested in how your capacity is changing as a result. For each of the following, please indicate which you currently have, are increasing, are at risk of losing, or have lost. Please use the scroll bar to scroll down and view all response options. N=63 respondents

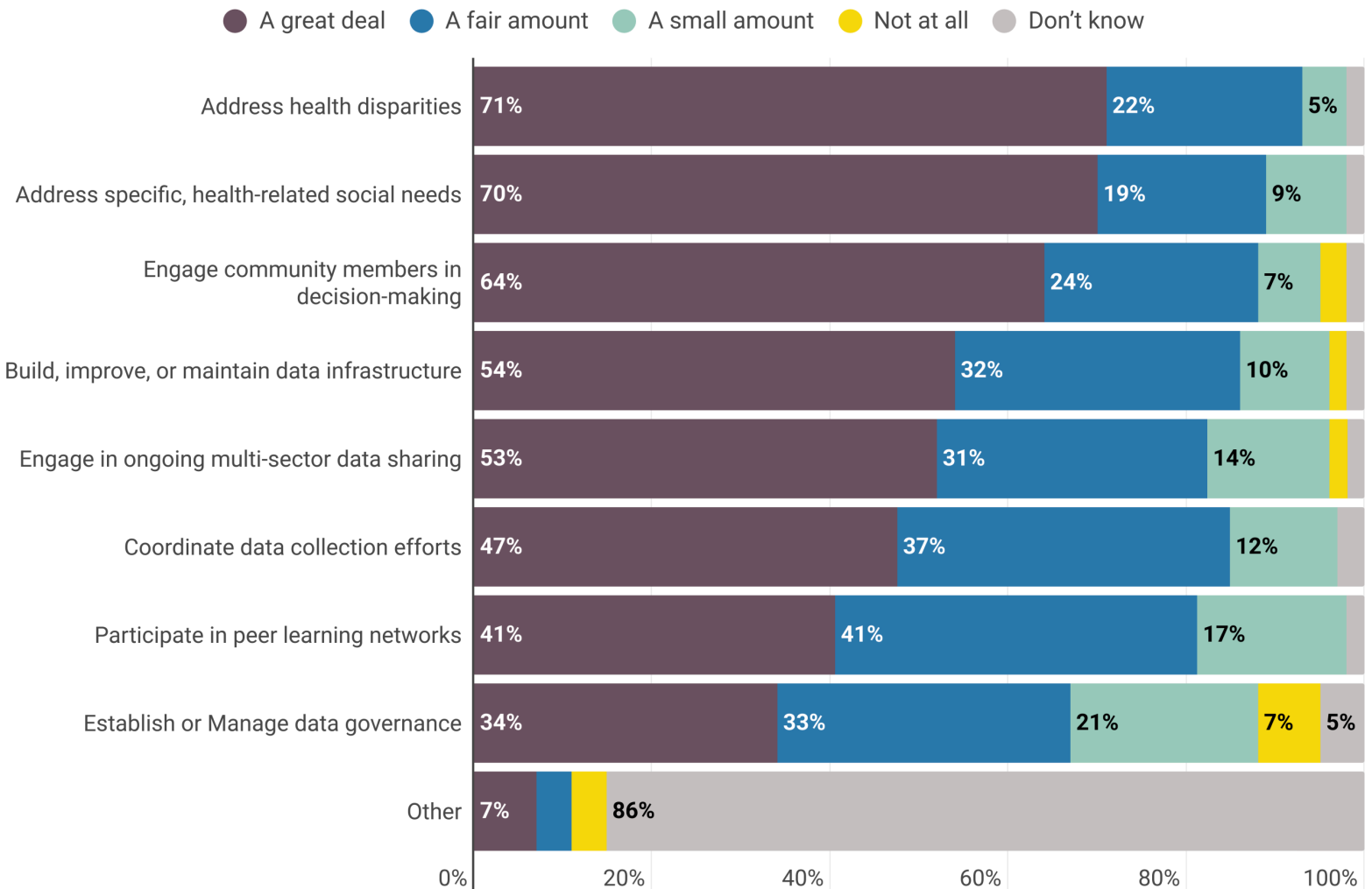


Organizational Priorities

Addressing health disparities and specific, health-related social needs are top priorities.

Most respondents identified **addressing health disparities (71%)** and **addressing specific health-related social needs (70%)** as having "a great deal" of importance to their organization's success. **Engaging community members in decision-making (64%)** also ranked among the top priorities. In contrast, fewer organizations placed "a great deal" of importance on **establishing or managing data governance (34%)** and **participating in peer learning networks (41%)**.

Question 10. How important are each of these to your organization's success? N=59 respondents



Path Forward

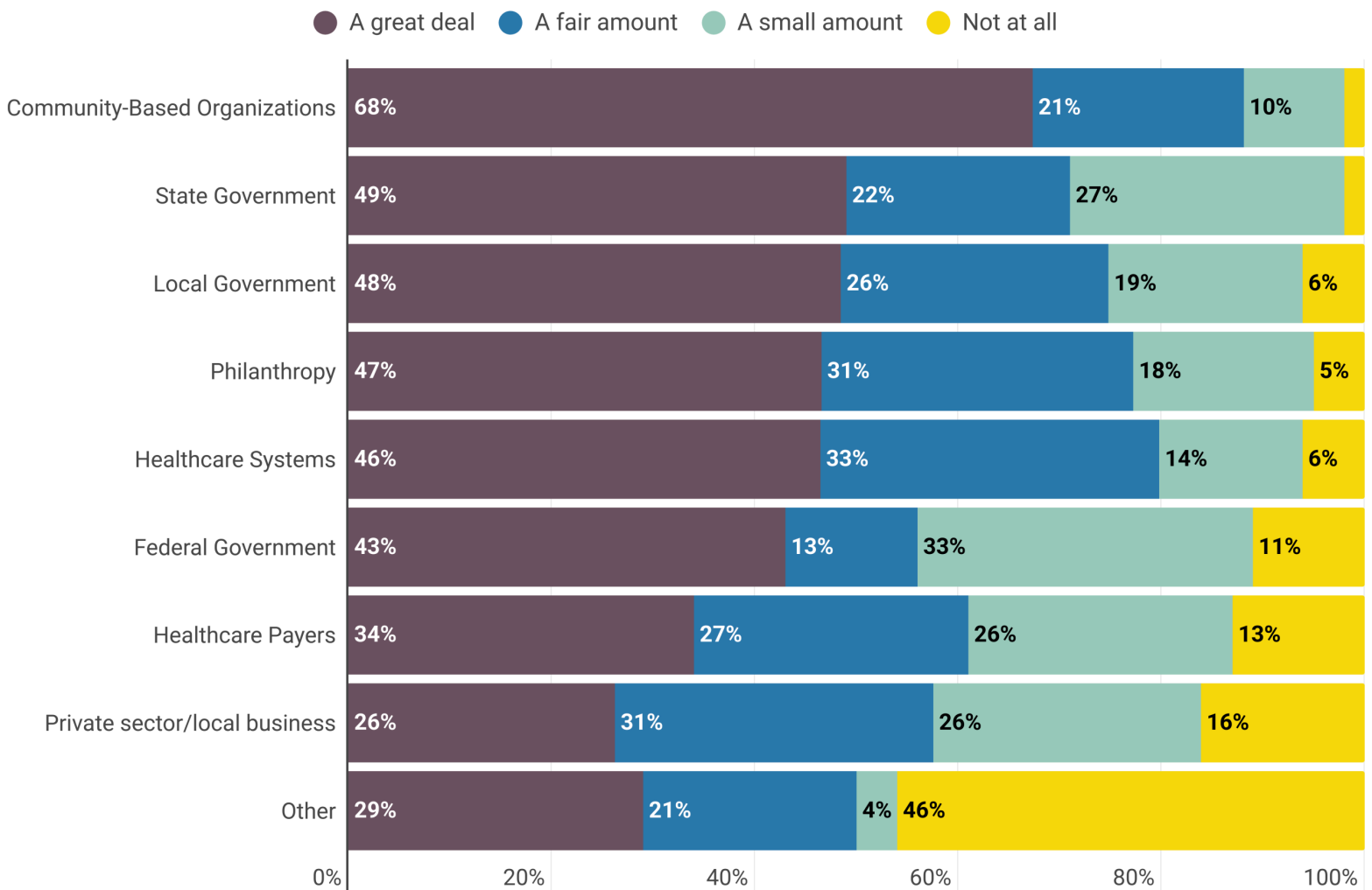


Future Partnerships

Community partnerships are seen as most beneficial for future work.

The majority of respondents (68%) identified **community-based organizations** as the partnerships that would most benefit their work moving forward. Partnerships with **state (49%) and local governments (48%), philanthropic organizations (47%), and healthcare systems (46%)** were also cited as having “a great deal” of benefit.

Question 11. Please indicate which partnerships would benefit your work going forward. For each selection, please indicate to what extent are you already engaged? N=63 respondents

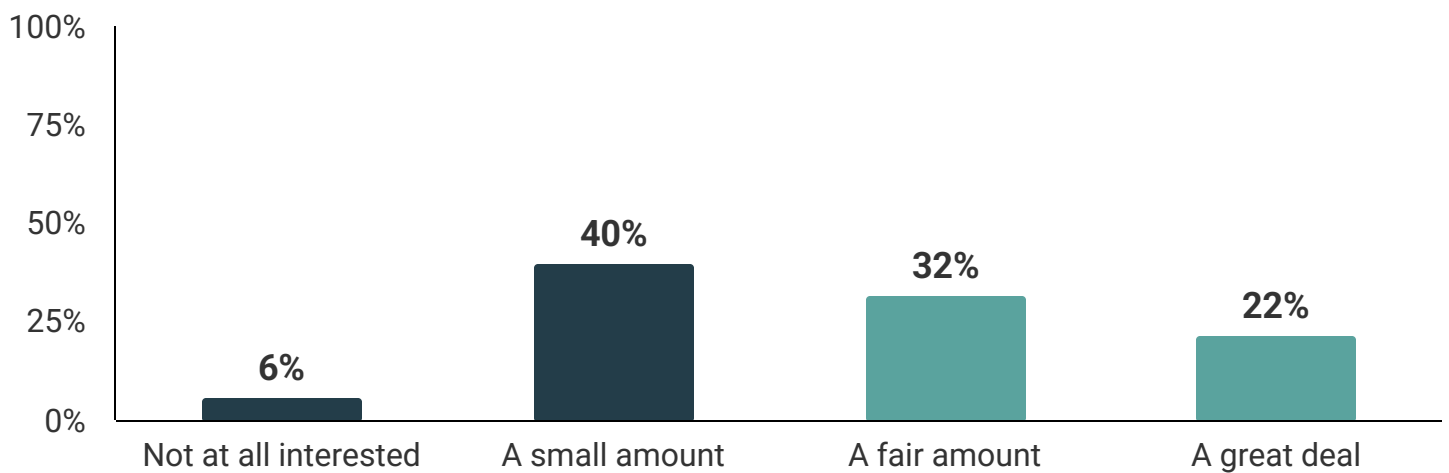


Future Participation

A majority of organizations expressed at least some interest in participating in unfunded peer support or technical assistance networks.

About 54% reported being interested “a fair amount” or “a great deal,” while 40% indicated only “a small amount” of interest, and 6% said they were not interested at all.

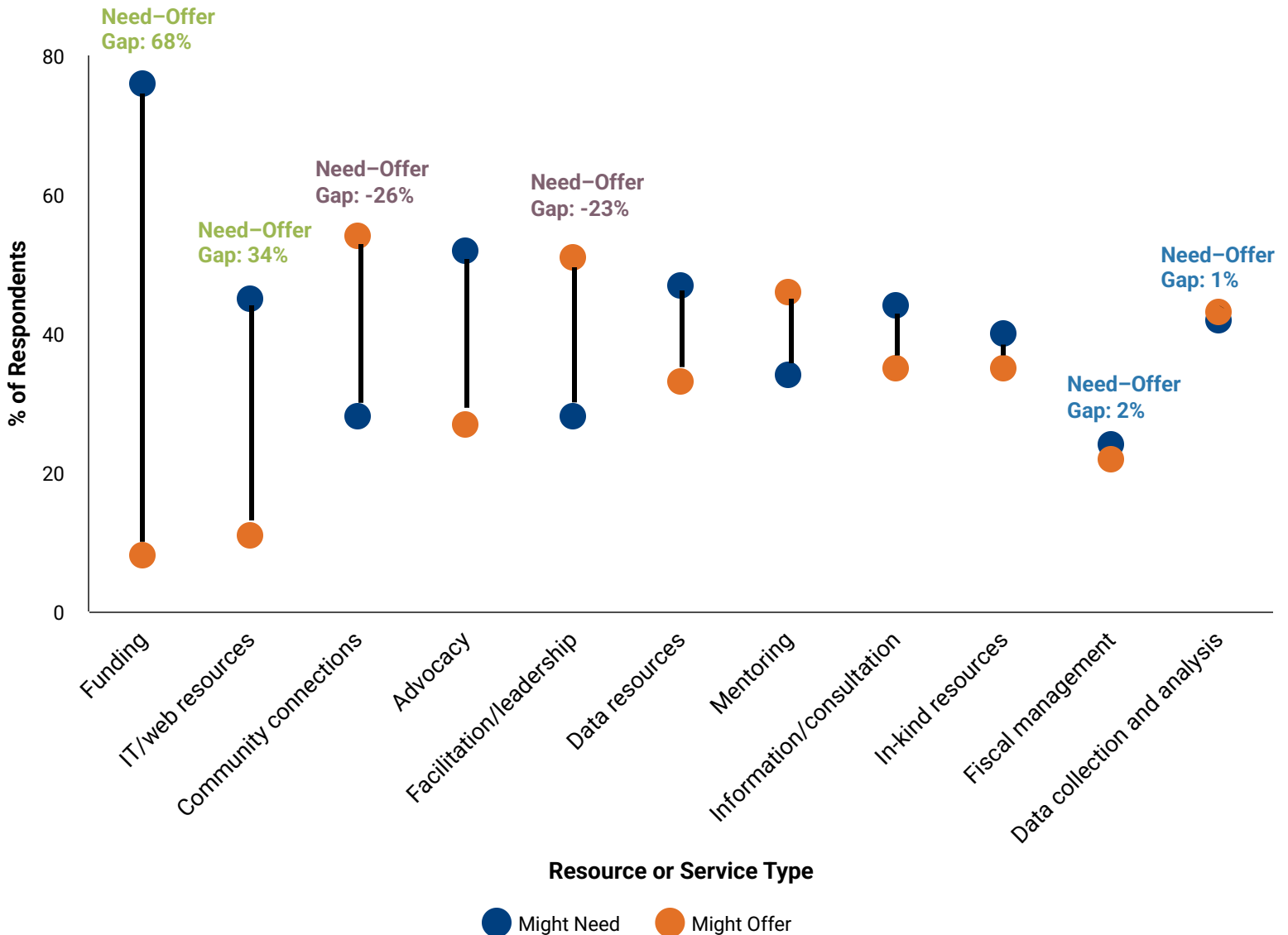
Question 12: How interested are you or your organization in participating in unfunded peer support or technical assistance networks? N=63 respondents



Resources/Services Needed and Offered

Funding and **IT/web resources** stand out as the areas with the **largest unmet need** (gaps of 68 and 34 points in green). **Community connections** and **facilitation/leadership** (in purple) show the opposite trend – more organizations can offer support than those that need it.

Several resource areas appear relatively balanced between what organizations need and what they can offer. **Data collection and analysis** and **fiscal management** (in blue) show only small gaps, suggesting that current peer support capacity in these areas generally meets existing demand.



Innovative Ways Forward

Respondents identified opportunities to continue building multi-sector data-driven initiatives across five main areas—data systems, capacity building, collaboration, policy, and equity.

Question 14. What might be some “innovative” resources or ways to continue building multisector data-driven initiatives going forward?

Data Systems, Technology, and Infrastructure

Organizations emphasized building shared, sustainable data systems and dashboards, exploring AI tools, and improving infrastructure to support secure, cross-sector data sharing.

- A shared database between local organizations
- Data dashboard pulling from multiple sources for regional decision-making and sharing
- Building sustainable data infrastructure through centralized CRMs and standardized fields
- Shared data systems offered to community organizations at no cost
- Common library for data-sharing agreements and legal resources
- Comparative system design tools for cross-community learning
- Leveraging AI for messaging, awareness, and accountability coaching forums
- Partnering with big data and AI firms
- Developing blended financial models for sustainable data sharing
- Preserving data and information at risk of being lost
- Integrating data from peer services and drug courts
- Technology innovation that includes community engagement
- AI-assisted analysis for local equity
- Coordinating philanthropic and multi-sector data infrastructure strategies

Capacity Building, Data Literacy, and Workforce Development

Respondents highlighted the need for ongoing training, education, and peer learning to strengthen data literacy and empower both staff and communities to use data effectively.

- Consistent investment in data literacy
- Community education on the importance of demographic data collection
- Training staff and partners on “Data for Equity” principles
- Education and alignment strategies for philanthropy on funding integrated, data-driven initiatives
- Elementary and middle school community service projects using data to identify and address needs
- Training the next generation of data professionals to rebuild public trust in data
- Engaging university graduate students in applied, practical collaborations
- Small group workshops or think tanks to share insights and grow ecosystems
- Participatory data collection through mobile surveys, SMS check-ins, and community research internships
- Meetings among community resources to create accessible guides

(Continued)

Innovative Ways Forward

(Continued)

Collaboration, Partnerships, and Network Models

Many stressed the importance of strong partnerships and networks that promote shared learning, coordinated action, and accountability across community, health, and government sectors.

- Advisory boards, committees, or workgroups
- Having a convener host conferences and offer collaboration grants
- Ongoing peer networks that share best practices beyond annual meetings
- Partnering with the 50501 movement
- Facilitating interstate collaboration through programs like DASH
- Starting a mutual aid cohort for skill- and resource-sharing
- Parent and student advocates building community health partnerships
- Ambassador model—engaging CBOs to promote surveys with stipends and incentives
- Continued collaboration with community coalitions
- Cross-sector partnerships
- Developing place-based initiatives addressing social determinants of health

Policy, Funding, and Sustainability

Sustaining this work requires aligned policies and long-term funding; respondents called for integrated financing models and policy reforms that incentivize collaboration.

- Advocate for policy change by Medicaid/Medicare to incentivize integrated primary care delivery
- Flattening or combining siloed categorical funding sources
- Conducting research to demonstrate the value of integration
- Convening payors, healthcare leaders, and government for multi-sector data networks
- Promoting stories of success to share with partners and decision-makers
- Continuing proven innovations that lack funding support
- Collective reflection on outdated sector premises
- Engaging philanthropy and funders in long-term alignment
- Coordinating local government, healthcare, and grant funding streams

Equity, Community Voice, and Inclusion

Equity and inclusion were top priorities, with a focus on participatory data collection, community-driven storytelling, and frameworks that ensure data reflects lived experiences.

- Ensuring data collection efforts reach all community members, including non-English and non-Spanish speakers
- Equity Impact Frameworks (e.g., GARE, Urban Institute Equity Data Standards)
- Embedding racial equity indicators in data collection
- Using participatory storytelling and qualitative data for decision-making
- Including residents as contributors and analysts (participatory data collection)
- Technology and innovation that reflect community priorities
- Thinking outside traditional nonprofit structures to reduce inequity and privacy risks
- Place-based initiatives focused on health, housing, employment, and education equity
- Promoting the idea through campaigns to share information and build community support

Conclusion



Conclusion

The DASH initiative continues to strengthen cross-sector collaboration and data-driven approaches to community health while facing ongoing challenges related to sustainability, funding, and shared leadership. The following key findings summarize the current state of progress and priorities for the future:

Achievements and Progress

The DASH initiative has built trust, data governance practices, and cross-sector collaboration. However, sustainable financing and shared power were identified as key gaps. Additional investment and shared leadership are needed to ensure long-term sustainability and community ownership.

Most respondents (86%) identified improved community health as the primary goal of their multi-sector, data-driven work. About two-thirds of organizations reported achieving “a great deal” or “a fair amount” of progress in addressing specific health-related needs and building sustainable partnerships for community health improvement. Partnership activities have largely centered on sharing resources and enhancing health systems.

Current Trends and Shifts

The current landscape reflects shifts in policy and funding priorities, which are influencing organizations’ ability to sustain data-driven work. Nearly seven in ten organizations (69%) reported that changes in funding and policy have impacted their efforts “a fair amount” or “a great deal.” Funding loss and evolving policy environments have emerged as the most pressing challenges.

Funding and IT/web resources show the largest unmet needs, while community connections and facilitation/leadership have more organizations offering support

Many organizations express uncertainty about maintaining progress amid shifting priorities and limited capacity. Despite these challenges, organizations remain committed to addressing health disparities (71%) and health-related social needs (70%), recognizing these as central to their continued success.

Path Forward

Looking ahead, community organizations are viewed as the most critical allies in sustaining and expanding data-driven progress. Respondents emphasized the need for advocacy and data support, as well as opportunities to share leadership, relationships, and organizational strengths that could enhance broader peer and technical assistance networks. Many organizations expressed interest in participating in unfunded peer support or technical assistance collaborations. Respondents identified opportunities to continue building multi-sector data-driven initiatives across five main areas—data systems, capacity building, collaboration, policy, and equity.

This report was produced by Visible Network Labs. For more information about Visible Network Labs and the tools and resources available, please visit www.visiblenetworklabs.com.



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