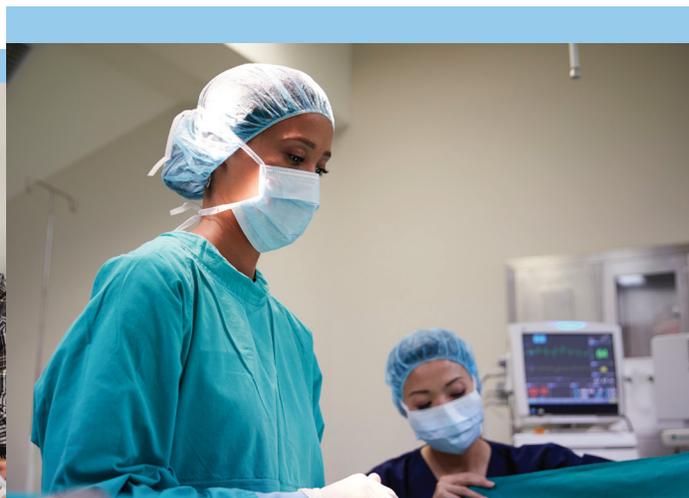


THE GENDER GAP IN NONPROFIT BOARDROOMS

The 2019 Census of Women Board Members
of the 50 Largest Medical and Educational
Institutions in Greater Philadelphia

A joint project of La Salle University; The Nonprofit Center at La Salle University's School of Business,
and The Women's Nonprofit Leadership Initiative



**WOMEN'S NONPROFIT
LEADERSHIP INITIATIVE**

THE GENDER GAP IN NONPROFIT BOARDROOMS

Executive Summary

Available at WNL.org and lasallenonprofitcenter.org

This research launches the first of what will be a triennial census of women on the governing boards of the 25 largest 501(c)(3) health care institutions and the 25 largest 501(c)(3) institutions of higher education in the Greater Philadelphia region¹, as measured by annual revenue reported by GuideStar (now Candid), as of February 2018. With this research, and the attendant advocacy efforts that will follow, we aim to encourage these 50 premiere nonprofit organizations, as well as *all* nonprofits in the region, regardless of budget and mission, to move to a gender and racial balance that is reflective of their constituencies and the larger communities of which they are a part.

Using publicly available information, and, when necessary, personal knowledge and tenacity, data were collected on the gender and racial composition of each board and the gender of the Chairs of each board. To help interpret the data, we relied on a minimum goal of 30% gender diversity, with an ultimate goal of parity, used and popularized by The Thirty Percent Coalition and the 30% Club, and supported by the Pennsylvania House of Representatives. Among the key findings of this research are:

- There is a gender gap in the boardrooms of many of the region's largest and most powerful nonprofit health care and educational institutions (meds and eds). On average the 25 meds boards fell below the minimum goal of 30%; women comprised only 28% of those boards, with a low of 14% to a high of 62%. The eds barely exceeded the minimum, recording an average women's representation of 33%, with a low of 8% to a high of 91%.
- Twelve of each set of boards met or exceeded the desired goal of 30% female members. Doylestown Hospital well exceeded parity; as did four education boards—Bryn Mawr College, Immaculata, Cabrini, and Arcadia. In each category, the four institutions with the greatest female representation were started by women or women's religious orders.
- Only a minority of the 50 boards were chaired by women: six (24%) of the 25 health care boards and five (20%) of the 25 higher education boards.
- The meds and eds boards had the same low percentage of people of color: 13%. And both were more likely to have men of color (7% for meds and 8% for eds) on their boards than women of color (6% and 5%, respectively).

In a region that is majority female, with substantial communities of color in many parts of the region, our data reveal that too many boards of the major meds and eds of our region are deficient if they wish their boards to be reflective of the constituency they serve and to ensure that the needs and concerns for all members of that constituency are considered and reflected in board decisions.

We call on board leaders—board chairs, and chairs of governance committees—and chief executives/presidents, to assess their current board diversity and, if their boards are not diverse, to determine the steps needed to change those numbers. We also encourage stakeholders—those who have an interest in or are affected by the decisions of these institutions—to pay attention to the make-up of these boards and, where necessary, to use their collective power and influence to encourage change.

¹ It is the plan that in subsequent years this Census will expand to include a more accurate reflection of the racial composition of these boards and a more precise determination of gender identification that is aligned with 21st century gender categories.