

Who's *on* Board

Gender & Race in
Nonprofit Board Rooms



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“The data is here.
The governance
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What remains
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commitment
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PEDRO RAMOS
President & CEO, Philadelphia Foundation



Foreword

by Pedro A. Ramos

President & CEO, Philadelphia Foundation

The Philadelphia region's colleges, universities, and hospitals (eds and meds) are among its greatest assets. The Federal Reserve Bank named them the "anchor economy" for good reason: They employ tens of thousands of people, anchor neighborhoods, and shape the futures of students, patients, and the communities built around them. Their activities, successes, and challenges carry weight far beyond their campuses and corridors.

Which is exactly why the strength of their governance matters.

For more than a decade, the Women's Nonprofit Leadership Initiative has done the painstaking, unglamorous, and necessary work of asking a straightforward question: Do the individuals who make up these boards have the breadth of perspectives and experiences to appreciate the impact of their decisions on diverse stakeholders and to take those perspectives into account in their deliberations? Across three reports (2019, 2022 and 2026) WNLI has found that the gap between the demographic composition of too many boardrooms and the demographic makeup of their institutions and communities remains real, persistent and consequential.

This third report arrives at a complicated moment. Women and people of color remain seriously underrepresented on too many of these boards. Even more troubling, too many eds and meds are now unwilling to disclose their board demographics at all. That reluctance cannot be separated from the broader environment in which institutions are facing political pressure, threats to funding, and accusations related

to their attention to diversity, equity, and inclusion. Those pressures affect whether and how institutions approach board diversity, and whether they are willing to be transparent about it.

Philadelphia Foundation supported this report because we believe strong communities require strong institutions, and strong institutions require strong governance. Hospitals and universities that serve as regional anchors have enormous civic and economic footprints. They benefit from tax-exempt status, deep community reliance, and need public trust. Therefore, they have a responsibility to say who governs, whose perspectives are represented, and whether their boards are equipped to serve the full range of people affected by their decisions. The research carefully assembled and cited in this report clearly demonstrates that diversity in the boardroom is table stakes for good governance. Boards with greater diversity bring more perspectives to the table, ask different questions, identify risks more fully, and make stronger decisions.

This report's Call to Action is concrete and achievable. Philadelphia Foundation encourages the region's anchor institutions to read it, take stock of where their boards stand, share with their communities and stakeholders their board demographics, and take steps to change those demographics where necessary.

The data is here. The governance case is clear. What remains is the commitment to deliberate action.

Setting *the* Stage



Why Board Diversity and Demographic
Disclosure Matter



In 2022, Women's Nonprofit Leadership Initiative published *Closing the Gaps: Gender and Race in Nonprofit Boardrooms*, its second report on the demographic composition of the governing boards of Greater Philadelphia's nonprofit higher education and healthcare institutions. Around the same time, the Federal Reserve Bank of Philadelphia unveiled a project about what it called the "anchor economy."

According to then Philadelphia Fed President and CEO Patrick T. Harker, this was because of "the vital role that higher education institutions and hospitals — sometimes called eds and meds — play in their communities and local economies." Harker explained that **"the economic impact of anchor institutions is massive," and "the Philadelphia area is more reliant than most of the country on eds and meds."**

As we pointed out in 2022, the boards of eds and meds make decisions that affect the lives and well-being of countless students, patients, employees, their families, and members of surrounding communities. These stakeholders should be able to learn whether the institutions' boards reflect stakeholder gender and racial/ethnic diversity.

Because these eds and meds are what the Fed calls "public-serving organizations," which receive tremendous benefits by virtue of being tax-exempt, the public has a right to information about how well-governed these organizations are. The IRS recognized the importance of good governance and a need for transparency and accountability to the public when, in 2008, it added governance questions to the Form 990, the public document these organizations have to file annually. The Form asks for a list of board members but unfortunately only requires their names, not demographic information.

Our reports, along with a few similar reports conducted in other regions, have played an important role in alerting the public to a gender and racial gap in the boardrooms of the largest US nonprofits. Our findings run counter to assumptions that, because women and people of color often play key roles in nonprofits and on smaller nonprofit boards, the boards of the eds and meds also embody diversity. Additionally, we have explained why it matters



As anchor economy institutions, the boards of eds and meds make decisions that affect the lives and well-being of countless students, patients, employees, their families and members of the surrounding communities.

to have diversity in the boardroom — "the room where it happens." In 2026, we believe that continuing to focus a spotlight on the status of nonprofit board diversity and reinforcing the case for diversity in these two sectors is critical to sustaining the momentum in increasing the diversity we saw between our 2019 and 2022 reports.

Diverse Board Composition Engenders Governance Excellence

Since 2022, varied publications have continued to feature arguments for increasing the numbers of women and people of color in all settings where important decisions are made that impact diverse populations, and specifically on boards. *Directors & Boards* magazine devoted its 2025 cover story to "Board Composition." One of its articles claimed, "diversity should be embraced to strengthen oversight, enrich judgment and drive better decisions." Another article said: "It is well recognized

“The past 30 years of diversity science tells us empirically that diversity of all kinds – the mix of people from different backgrounds and experiences, including people of different ages and religions and races and ethnicities and cultures and languages – really does make a difference in terms of how effective we are as decision makers.”

David B. Oppenheimer, *The Diversity Principle: The Story of a Transformative Idea*, 2026

through multiple research-based studies that diversity on boards is indicative of good governance, enhanced performance and the long-term success of the company.” *Diversity Matters Even More*, published in December 2023 as the fourth report in a McKinsey series begun in 2015, discussed a relationship between leadership diversity and company performance globally and found that “this year, the business case is the strongest it has been since we’ve been tracking.”

A law professor and author of *The Diversity Principle: The Story of a Transformative Idea*, published in 2026, says “the business case for diversity is more than a business case; it’s a general case for diversity. The past 30 years of diversity science tells us empirically that diversity of all kinds—the mix of people from different backgrounds and experiences, including people of different ages and religions and races and ethnicities and cultures and languages—really does make a big difference in terms of how effective we are as decision-makers.” Specifically, “in higher education, we do a better job as teachers and as researchers when we work in a diverse environment. Students learn more. In a science lab, scientists make more significant discoveries when the scientists working in the lab are diverse. It’s a real thing. It’s not just a psychological argument.”



43%

of the Philadelphia region’s population is not white. Board representation doesn’t yet reflect that reality.

... it is more important than ever to measure and report on progress or backsliding in the demographic makeup of board members who should be representing the interests of highly diverse stakeholders.

However, though the case for diversity has actually gotten stronger since 2022, major changes in the social and political environment have confronted higher education and healthcare institutions in particular with pressures to retreat from pursuing diversity. In this environment we believe it is more important than ever to measure and report on progress or backsliding in the demographic makeup of board members who should represent the perspectives and interests of highly diverse stakeholders.

We focus on gender and racial diversity because, although women constitute more than half the population of the Philadelphia area and people who are not white represent 43 percent of the area's population, based on the Philadelphia-Camden-Wilmington Metropolitan Statistical Area (MSA), their numbers in eds and meds boardrooms do not approach those figures.

We do not suggest quotas or specific percentages for women and people of color, and boards must choose members who are well-qualified. McKinsey reported their "data suggested that female directors were equally, if not more, qualified than their male peers." And a *Harvard Business Review* article reported that "Black directors joined their first board earlier than white directors

(at 39.2 and 42.4 years old, respectively), their educational attainment was higher (79% and 71% held advanced degrees), and that both Black and white directors were concurrent members of 1.4 public boards and dedicated approximately the same number of hours to board service per year." So demographic diversity is not at odds with pursuing excellence. To the contrary, it is one of the determinants of excellence. To achieve such diversity, current board members should realize that being a white male is not a guarantee of excellence, and that having different genders or races does not preclude having the skills and experience required for board membership.

In a *New York Times* essay in August 2025, the life-long-Republican mayor of Oklahoma City and president of the US Conference of Mayors said, "meritocracy cannot be exclusionary," and "broader perspectives yield more inclusive outcomes." He defended his conscious efforts to increase the representation of women and people of color in a variety of offices. Like Mayor David Holt, both for-profit companies and the eds and meds that have made conscious efforts to diversify their boards have found a supply of highly qualified candidates.



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Disclosure of Demographic Data to the Public Has Positive Consequences

Important goals in our reporting are not only to encourage the eds and meds to continue to pursue board diversity but also to encourage them to make available to the public information on the demographic composition of their boards. They should ask their trustees to confidentially report how they self-identify so that the institution can aggregate the data and report overall numbers. Currently it is challenging even for researchers to get this information. Not all eds and meds list their board members on their websites. Some supply just their names; some include bios; others also publish photos. However, all of that information does not reveal how board members self-identify.

We understand some individuals are reluctant to label themselves using categories presented in questionnaires, and some feel the choices do not reflect their ways of characterizing themselves. We have given organizations the option of using the category of “Other” in responding to our questionnaire; and since 2022 the number of board members reported by their institutions as “Other” has increased. We can only guess at reasons for this increase: that more people prefer not to disclose their race or gender or fear repercussions, or more do not see themselves as either white or a person of color, or something else.

Despite the reality that collecting demographic data is an imperfect process, the value of making the data available to the public remains. An August 2025 report by McKinsey shows how important demographic data can be in recognizing and addressing disparities in Black maternal health. *Closing the Black maternal health gap: Healthier lives, stronger economies* “examines urgent and preventable disparities in Black maternal health and presents a targeted strategy to count, study, care, include, and invest in all women with a specific focus on black women.” WNLI recognized the related importance of racial diversity on healthcare boards when it presented a panel of healthcare experts discussing “From Board Rooms to Delivery Rooms: Facing the Maternal Health Crisis Through the Strength of Diversity.”

The link between gender and racial diversity in decision-makers and the outcomes for pregnant women is only one powerful example of why gender and racial/ethnic diversity on governing boards matters, and why counting and measuring demographic data continues to be important. Without such data, progress or regression cannot be tracked nor can efforts to change the composition of boards take place.

Report Findings

Some modest progress in the region's "anchor economy" boards' representation of women and people of color; but troubling decline in the number and percentage of these nonprofit eds and meds sharing data on board demographics.

Following its 2019 and 2022 reports on the gender and racial composition of the boards of the Philadelphia region's largest nonprofits—in higher education and healthcare—Women's Nonprofit Leadership Initiative (WNLI) is issuing its third report on the status of gender and racial board diversity. Findings are based on data collected on 40 eds and meds in the summer of 2025. Eds and meds are key economic and cultural drivers, whose mark on the region inspired the Federal Reserve Bank to dub them the "anchor economy."

Currently the demographic makeup of the people who lead them still does not reflect the population of stakeholders. Those people— employees, students

and patients, alumni, and members of surrounding communities—have an important interest in these institutions and are impacted by the decisions of those who lead them. Beyond their immediate constituencies, universities and health systems are central to a broader economic ecosystem: they shape regional talent pipelines, influence workforce health and productivity, and support a wide network of employers, suppliers, and professional service providers who depend on them.

As a result, leadership and governance decisions within these institutions extend well beyond their walls, carrying significant implications for the strength, equity, and competitiveness of the entire regional economy.

The results of our research indicate that progress towards more diverse boards reported in 2022 has slowed, except in some specific institutions. The numbers of women and people of color appear to have grown somewhat more in healthcare than in higher education, bringing healthcare boards to about the same level as higher education boards.

As of the summer of 2025:



Women trustees occupy 39.3% of seats on higher ed boards and 38.3% of healthcare seats, up from 38.3% and 34.4% respectively in 2022.



Trustees of color occupy 25.4% of seats on higher ed boards, barely up from 23.8% in 2022; and they occupy 24.3% of healthcare seats, up from 18.7% in 2022.



This time, both eds and meds identified 2% of their board members as Other Racial. So that data adds another 2% in both sectors to the percent of board members who do not identify as white.



Two institutions have only two women on their boards. Two have no people of color on their boards, and four have only one board person of color.



The percentage of women and people of color in the position of board chair has increased from 28% in 2022 to 56% in 2025. However, although the number of chairs who are men of color has grown from two to nine and the number of white women chairs has grown from 10 to 13, the number of women of color remains at one.



Eleven eds and meds have shown significant change in the percentage of women board members. Three showed increases by 10 or more percentage points. However, five decreased the percentage of women board members by 10 or more points. Many others showed some less significant movement in both directions.

The most
significant
change since
2022 is not in
demographics,
but in
disclosure.



Unfortunately, the most notable and significant change since 2022 is a marked decrease in the percentage of organizations providing information on board composition. In order to report on current data about how board members self-identify by gender and race/ethnicity, we requested aggregate data from all the eds and meds, as we did in 2022. If they did not supply such data, we sent them an assessment of the demographic makeup of their board and asked them to confirm or correct our data.

We would prefer to issue a report based solely on information based on data directly provided by all the institutions about how their members self-identify. Unfortunately, there is currently no requirement that these institutions disclose the aggregate demographic makeup of their boards, making it almost impossible for stakeholders to hold them accountable.



Eleven of the 40, or 27.5%, responded with their data, 4 more than in 2022.



17.5% responded to our follow-up request to confirm or correct the data we had collected and submitted to each institution. In 2022 56.5% had answered this follow-up effort.



More than half—22 of the 40, or 55%—did not provide, confirm or correct data, as compared with only 28.3% in 2022.



As compared with the 72% response rate in 2022, the recent 2025 response rate was only 45%.

In the Philadelphia area, the annual Forum of Executive Women report (2025) showed a slow-down in progress in for-profit corporate board diversity and a drop in disclosure of racial and ethnic diversity. A similar organization, The Boston Club, a pioneer in publishing annual reports on that region's largest for-profit boards, reported results showing "the slowest progress for women in corporate leadership since 2017." They also emphasized a "sharp decline in corporate transparency around demographic reporting." And, on a national level, The Conference Board's summer 2025 report found that "Women now hold about one-third of US board seats—a record high—although momentum has slowed;" and "Board director demographic diversity reporting has contracted sharply, with racial and ethnic disclosure falling from 2024 peaks and complicating year-over-year benchmarking."

Our results may show more progress than in the for-profit sector because our results are not based on changes occurring annually but over three years. So, we can't say in which years changes we are reporting occurred. What we can say is that the environment in which we report on board diversity clearly differs from 2019 and 2022. The word "diversity," a word of inclusion that covers white males, along with women and people of color, has been attacked and used to punish and intimidate organizations, particularly in higher education. Because we do not want to create an issue for any organizations included in our study or make any of those who have

increased the diversity of their boards, or were willing to supply their demographic information, targets for investigation or harassment, we do not link specific data with individual institutions in this report. We simply list the individual eds and meds included in our study.

We continue to use and defend the word "diversity" but, by any other name, the concept is really what matters. We urge board members to pay attention to their board demographic data in order to populate their boards with the variety of life experiences and perspectives needed to govern effectively. That remains a legitimate, legal, and imperative goal for all of them.

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That remains a *legitimate, legal, and imperative goal* for all of them.

Institutions included in the report:

Higher Education

Arcadia University
Bryn Mawr College
Chestnut Hill College
Curtis Institute
Delaware Valley University
Drexel University
Eastern University
Gwynedd Mercy University
Haverford College
Holy Family University
La Salle University
Lincoln University
Neumann University
Princeton University
Rider University
Saint Joseph's University
Swarthmore College
University of Delaware
Ursinus College
Villanova University
Widener University
Wilmington University

Healthcare

Bancroft Neurohealth
Capital Health
Children's Hospital of Philadelphia
ChristianaCare
Cooper University Health Care
Deborah Heart and Lung Center
Devereux Foundation
Inspira Health Network
Main Line Health
Nemours
Redeemer Health
Tower Health
Trinity Health Mid-Atlantic
Virtua Health

Institutions Spanning Both Sectors

Philadelphia College of Osteopathic Medicine (PCOM)
Temple University
Thomas Jefferson University / Jefferson Health
University of Pennsylvania

Census Results

This report includes a census of board members who govern 14 healthcare institutions, and 26 higher education institutions (four of which oversee healthcare systems) compared to 21 healthcare and 29 higher education in the 2022 report.

Since the last time this data was collected, there has been more consolidation or the closing of institutions, reducing the number of governing boards and board seats. As in the 2022 report, we identify four institutions that span both sectors. They are the University of Pennsylvania, Temple University, Thomas Jefferson University and Philadelphia College of Osteopathic Medicine. Their governing boards oversee both the academic and healthcare enterprises of these institutions. Geographically, the lists include institutions located in the area captured by the Delaware Valley Regional Planning Commission.

Board diversity across higher education and healthcare institutions shows measurable, but modest, progress since 2022. Representation of both women and people of color has increased in each sector, with gains more pronounced in healthcare than in higher education.

CENSUS OF 2025:

14 healthcare institutions

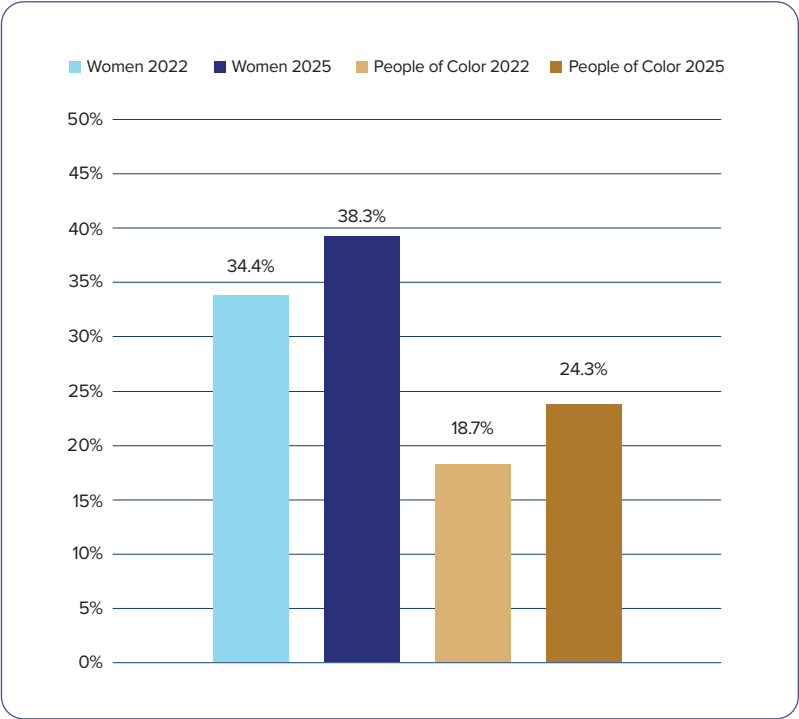
26 higher education institutions



Comparison of 2022 and 2025 Representation

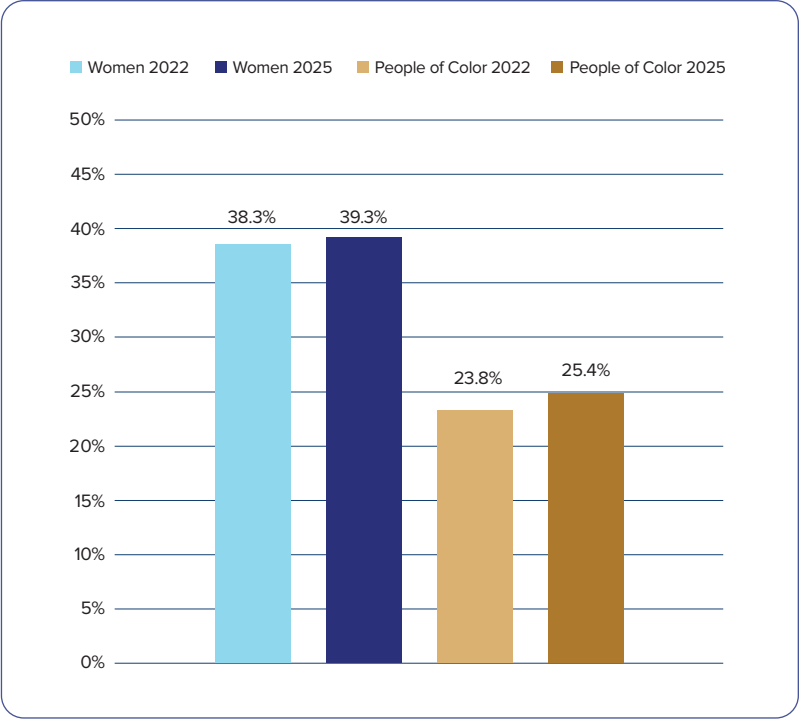
Healthcare Comparison, 2022 vs. 2025

Representation of women on healthcare boards increased from 34.4% to 38.3%, while people of color rose from 18.7% to 24.3%. These gains reflect measurable progress, particularly in racial diversity.



Higher Education Comparison, 2022 vs. 2025

In higher education, women's representation edged up from 38.3% to 39.3%, a modest gain of 1.0 percentage point. People of color increased from 23.8% to 25.4%, a gain of 1.6 percentage points. While both groups improved, the pace of change in higher education was notably slower than in healthcare over the same period.

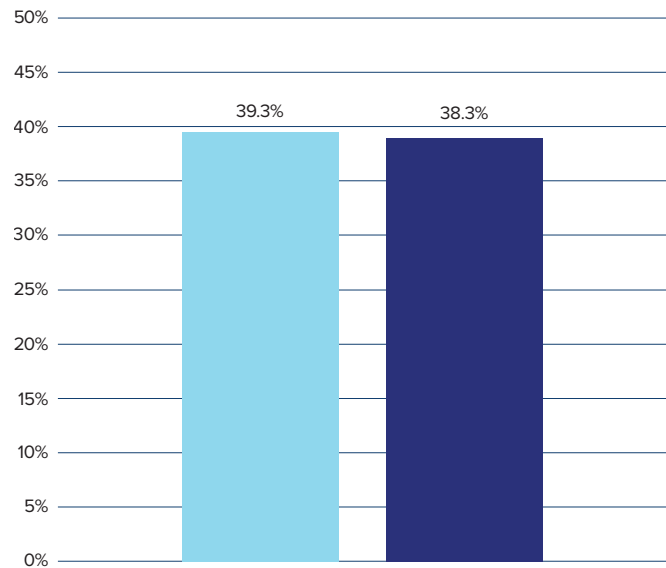


Sector Overview: Healthcare and Higher Education Institutions

Women — Higher Education and Healthcare Compared (2025)

Women hold 39.3% of higher education board seats versus 38.3% in healthcare—a difference of just 1.0 percentage point. Neither sector has yet reached gender parity (50%), and overall representation still falls short of reflecting the populations served.

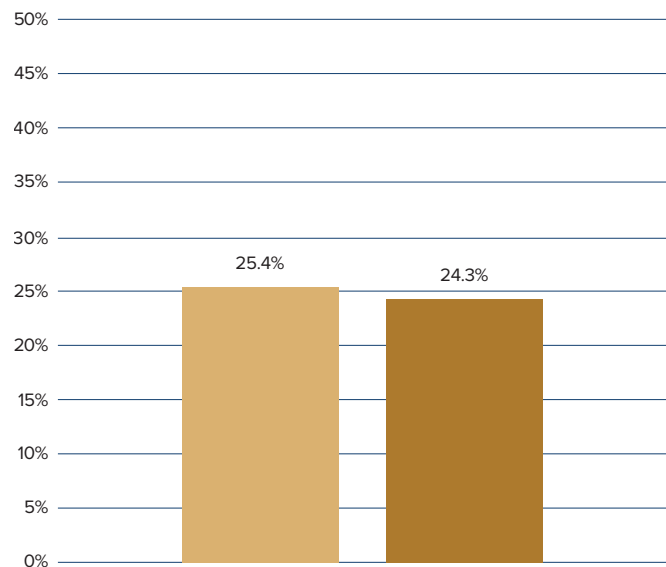
2025
■ Women, Higher Education ■ Women, Healthcare



People of Color — Higher Education and Healthcare Compared (2025)

In higher education, people of color hold 25.4% of board seats while in healthcare, that percentage drops to 24.3% making the presence of people of color nearly identical in both sectors.

2025
■ People of Color, High Education ■ People of Color, Healthcare



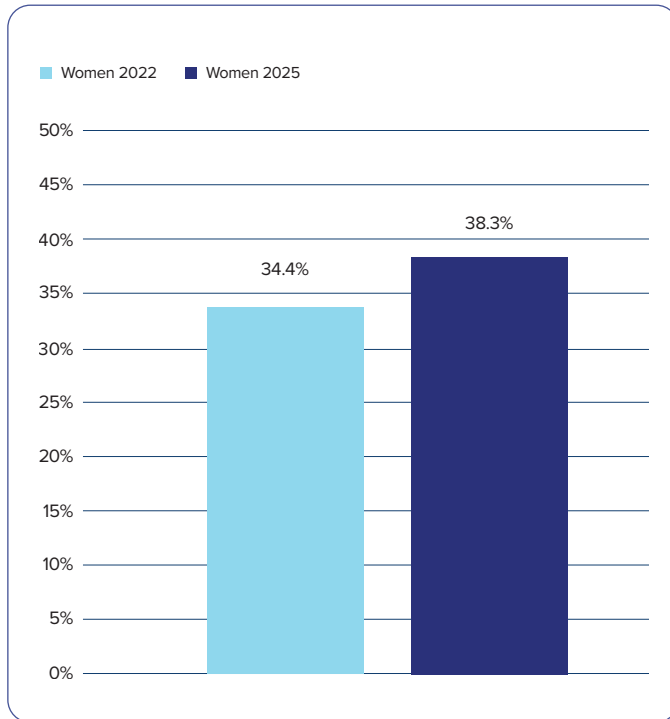
Sector Trends:

2022 to 2025

Progress over the past three years has not been uniform across sectors. Healthcare boards show more measurable movement—particularly for people of color—while higher education boards demonstrate slower gains and signs of slowing.

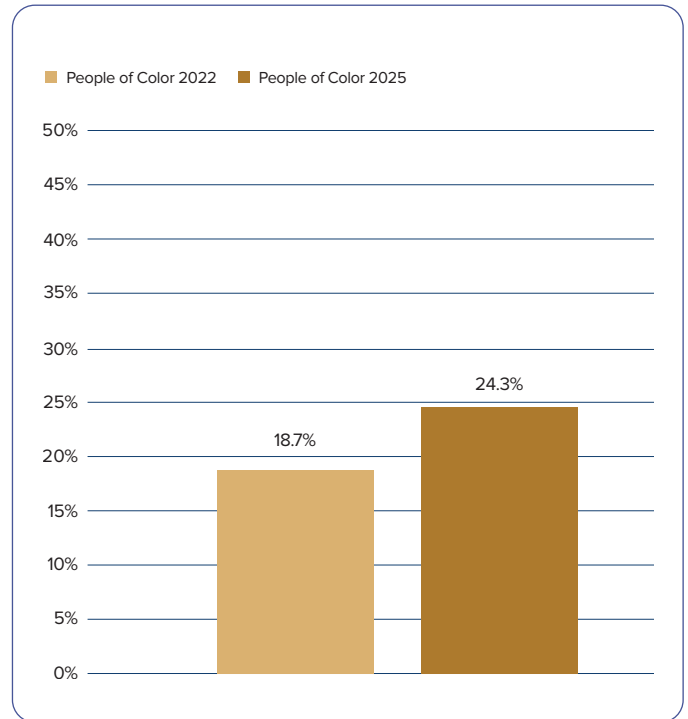


Healthcare Boards



Healthcare — Women, 2022 vs. 2025

Women's representation on healthcare boards grew from 34.4 %to 38.3% an increase of 3.9 percentage points over three years. This reflects one of the stronger gains for women across the dataset.



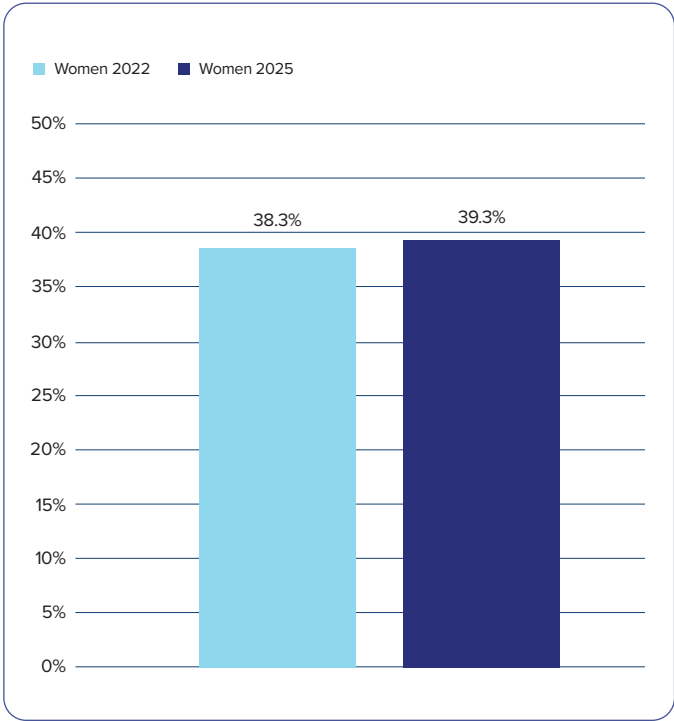
Healthcare — People of Color, 2022 vs. 2025

People of Color representation grew from 18.7% to 24.3%, an increase of 5.6 percentage points over three years. This reflects a positive gain across the dataset.



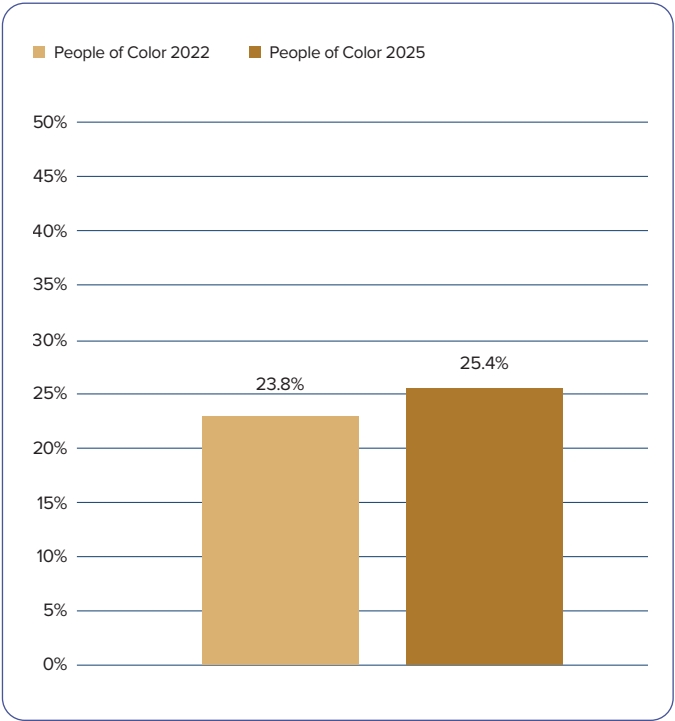
There was a **3.9%** gain for share of seats held by women, and a **5.6%** increase for the share of seats held by people of color on healthcare boards.

Higher Education Boards



Higher Education — Women, 2022 vs. 2025

Women’s representation on higher education boards increased modestly from 38.3% to 39.3%, a gain of 1.0 percentage point. While positive, the pace of change is modest.



Higher Education — People of Color, 2022 vs. 2025

People of color on higher education boards grew from 23.8% to 25.4%, an increase of 1.6 percentage points. While directionally positive, the pace of change is modest. Progress is occurring, but not at a rate that would significantly shift overall composition in the near term.



Progress is occurring on higher education boards for both women and people of color (2022 vs 2025), but not at a rate that would significantly shift overall composition in the near term.

Women hold 39.3% of higher education board seats versus 38.3% in healthcare, a mere 1% difference. Neither sector has achieved gender parity (50%) and overall representation still falls short of reflecting the populations served.

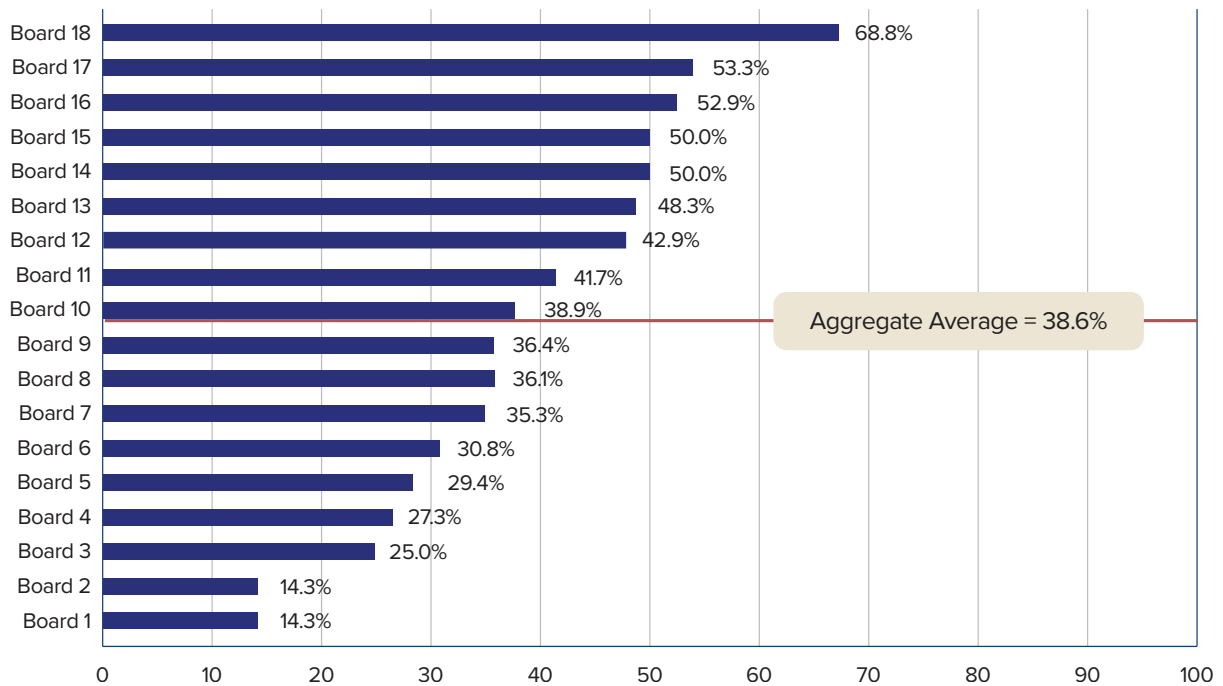
Distribution & Range Across Boards

Aggregate averages mask substantial variation at the individual board level. Representation ranges widely—from boards with high percentages of women and people of color to others with minimal representation of women and minimal or no representation of people of color.

Some boards have achieved *strong representation*, while others remain far behind.

Women by Institution

Healthcare Boards – Women, by Institution (2025)

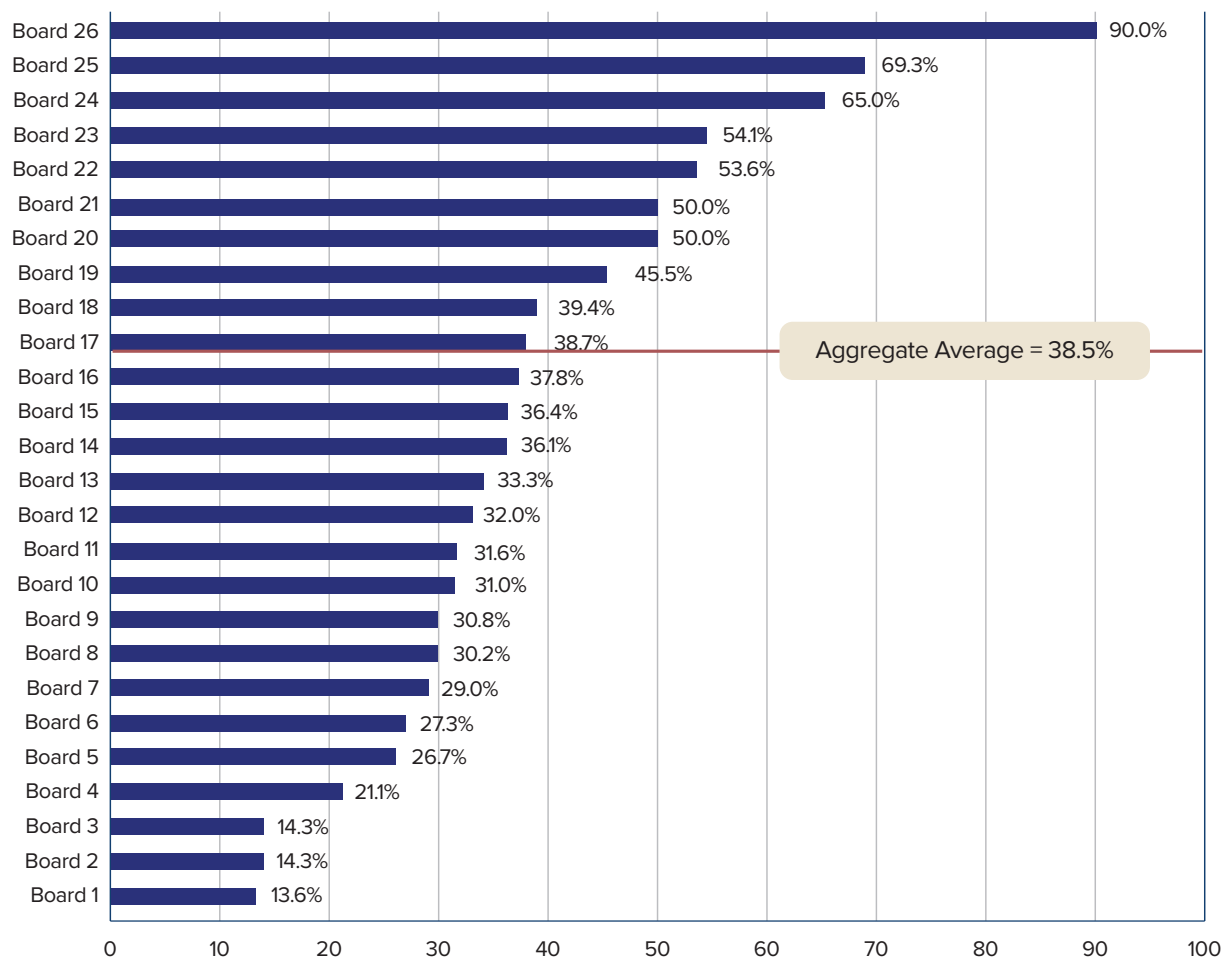


Healthcare Boards — Women, by Institution (2025)

This horizontal bar chart shows women's representation across all 18 individual healthcare boards surveyed. The range spans from 14.3% to 68.8% across boards. This wide variation highlights significant differences across institutions.

Women by Institution

Higher Education Boards – Women, by Institution (2025)

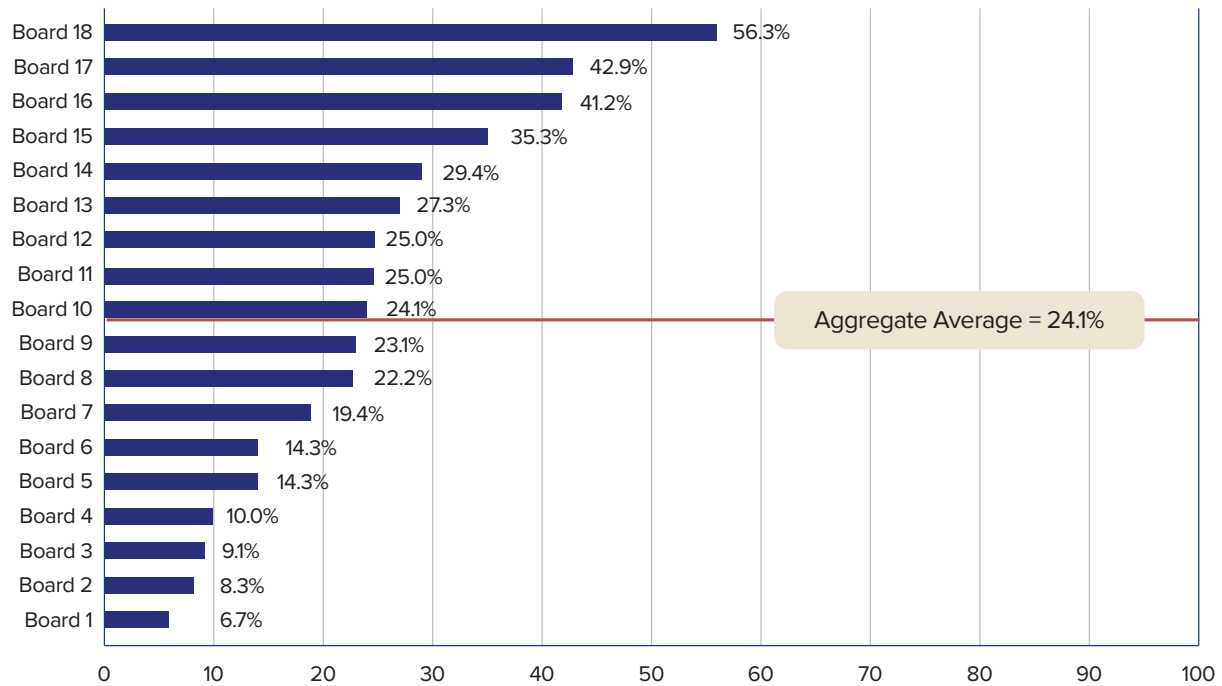


Higher Education Boards – Women, by Institution (2025)

The aggregate average representation of women across all higher education boards is 38.5% with a range of 13.6% to 90%, a significant variation in board composition by gender.

People of Color by Institution

Healthcare Boards – People of Color, by Institution (2025)

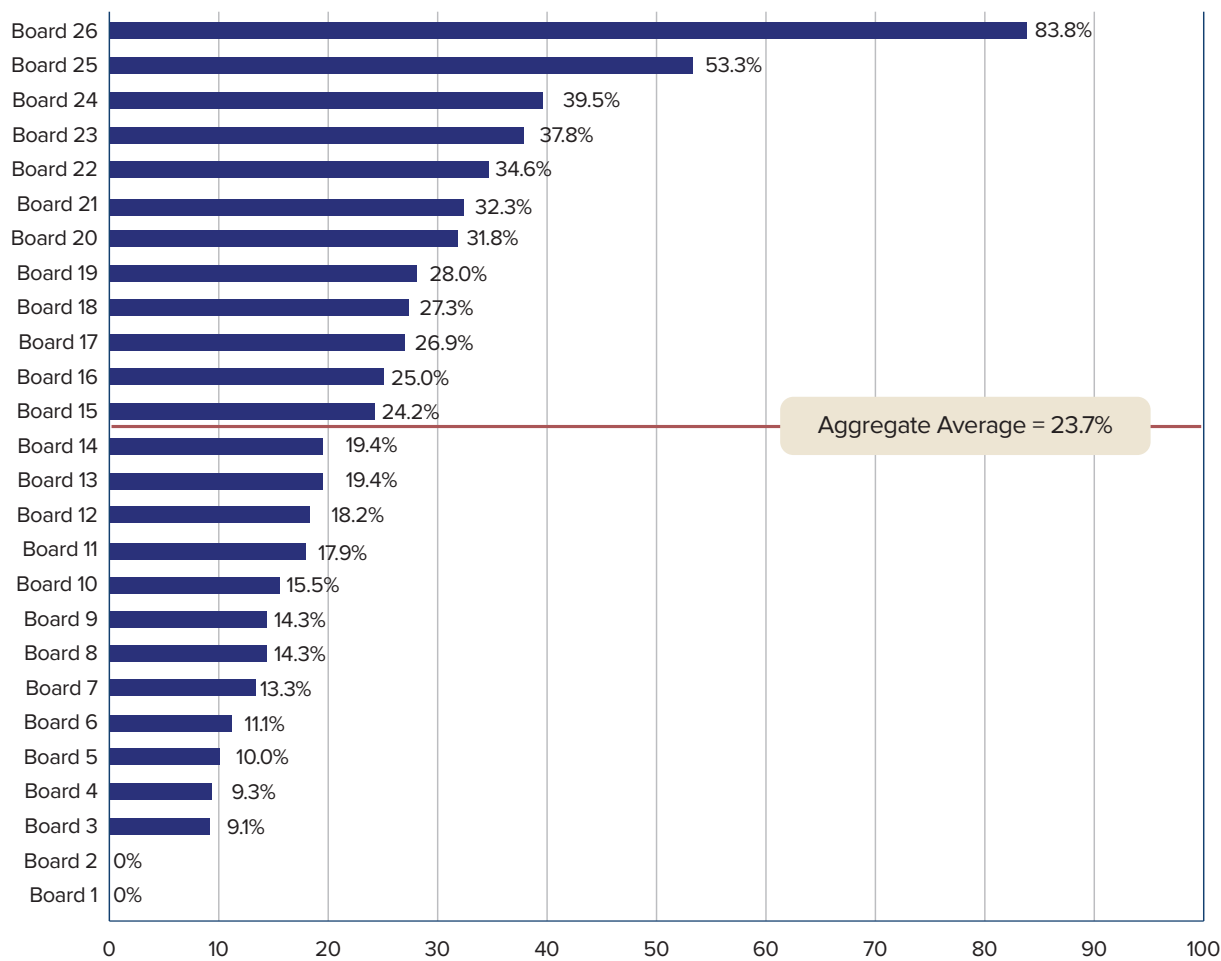


Healthcare Boards — People of Color, by Institution (2025)

The aggregate average representation of people of color is 24.1%, with a range from 6.7% to 56.3%, showing a near 50-point variance in individual board compositions.

People of Color by Institution

Higher Education Boards – People of Color, by Institution (2025)

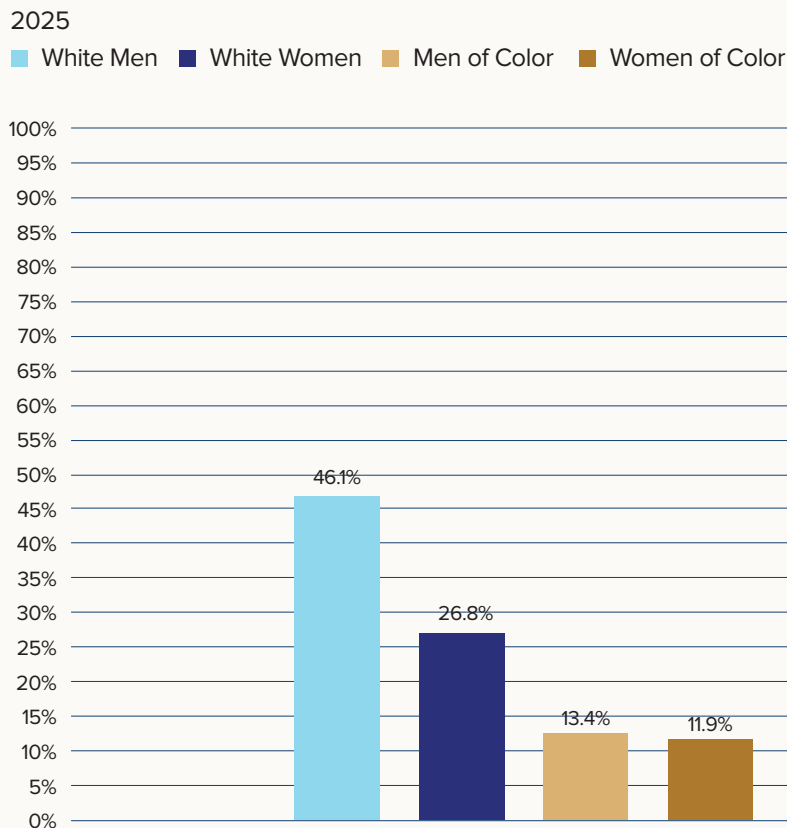


Higher Education Boards — People of Color, by Institution (2025)

This chart shows the lowest average and the widest variance in all the charts; and it is notable as it is the only chart where two institutions show zero representation. The aggregate average is 23.7% with a range of 0% to 83.8% This is the most striking diversity gap.

Demographic Distribution of Board Seats

Across all institutions, while representation of women and people of color has increased, white men continue to hold the largest share of board seats.



Demographic Distribution of Board Seats

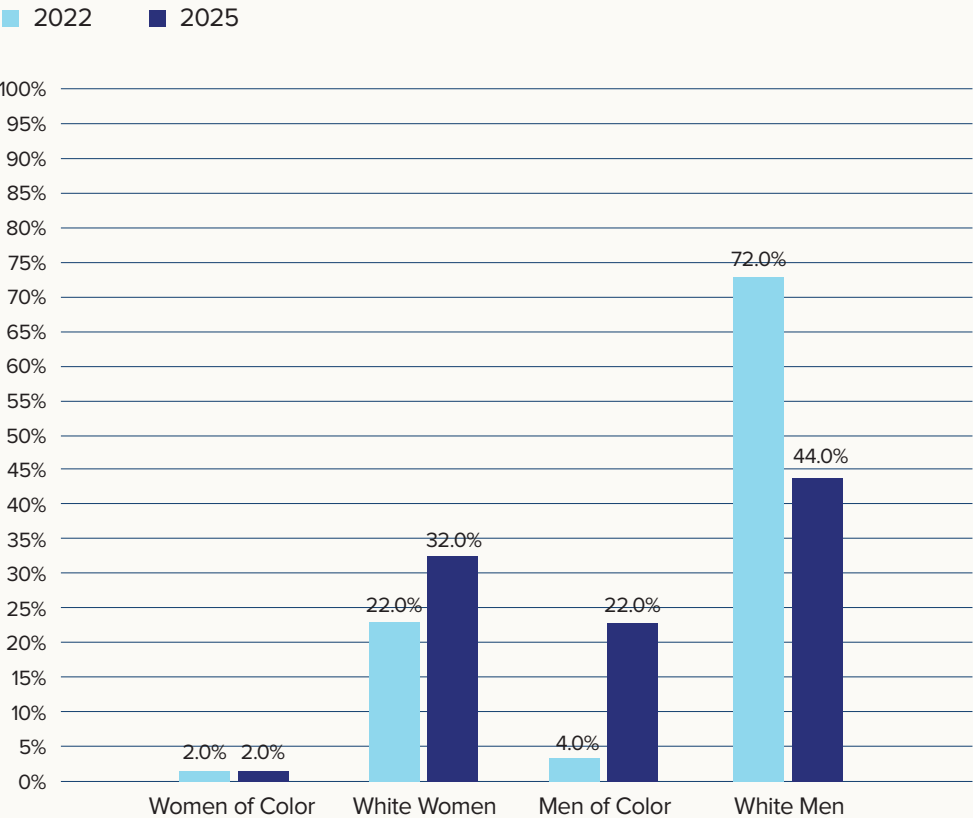
This chart breaks down overall board composition by race and gender across all surveyed institutions in 2025. White men hold the largest share of board seats at 46.1%, followed by white women at 26.8%, men of color at 13.4%, and women of color at 11.9%. Collectively, white board members hold nearly three-quarters of all seats, while both men and women of color remain significantly underrepresented. It is notable that women hold only 38.7% of board seats while they represent more than 50% of the stakeholders.

Note: The percentages do not total 100%; the difference relates to those reporting as Other Racial men at 1% and Other Racial women at .7%. We did not assign the Other Racial category to board members whose demographics we independently researched.

Board Leadership: Who Holds the Chair Role

Changes in board leadership demographics have been more pronounced than changes in overall board membership. The share of white male board chairs has declined significantly, while representation of both white women and men of color has increased.

Board Chairs by Demographic Category, 2022 vs. 2025



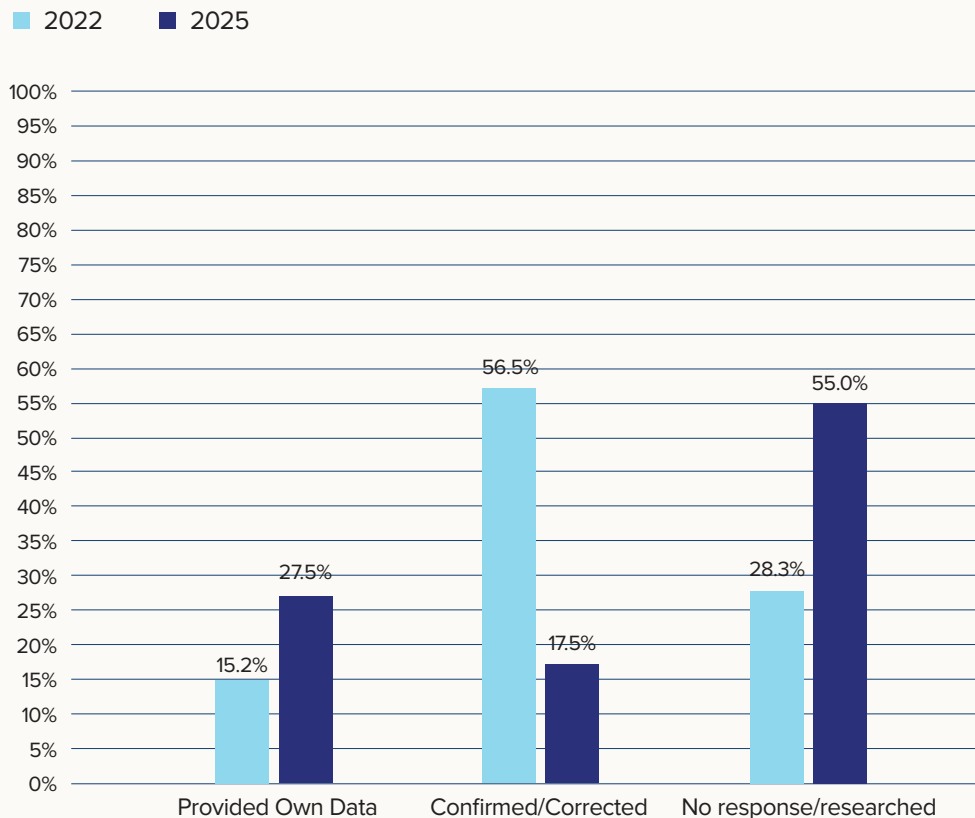
Board Chairs by Demographic Category, 2022 vs. 2025

This chart tracks who holds board chair positions across all surveyed institutions by race-gender category. White men declined from 72% in 2022 to 44% in 2025, while white women increased from 22% to 32% and men of color from 4% to 22%. Women of color remained essentially flat at 2%.

Transparency and Disclosure

The most significant change since 2022 is not in demographics, but in disclosure. There was a marked decrease in the number and percentage of institutions responding to requests to confirm or correct data about gender and racial composition of their boards, resulting in a sharp increase in cases requiring independent research.

Disclosure Sources, 2022 vs. 2025



Disclosure Sources, 2022 vs. 2025

Institutions providing their own data increased from 15.2% but still represent only 27.5% of all the eds and meds, while those confirming or correcting our data sharply declined from 56.5% to 17.5%. Therefore, the percentage of institutions that did not disclose demographic data showed a substantial increase from 28.3% to 55% requiring significant additional research. This shift reflects a decline in disclosure and transparency.

Current Socio-Political Environment



A time of problematic pressures and both discouraging and heartening responses.

Early in this report we mentioned major changes in the social and political environment that have confronted higher education and healthcare institutions with pressures to retreat from pursuing diversity. Our findings suggest these pressures have had an impact both on the pace of increasing board diversity in the eds and meds and, even more clearly, on the decline in the number of those institutions responsive to requests to document/disclose board demographics.

Our findings are in line with other published reports and articles. Additionally, to deepen our understanding of the impact of the current environment, we conducted anonymous, confidential interviews with ten individuals whose observations humanize the published sources and help us better understand the pressures facing current Philadelphia-area boards and how they are responding. The interviewees validated that the drop in the percentage of institutions that disclosed their board's demographic make-up, as well as changes in their approaches to board diversity, are linked to the changed environment.

What published reports and articles tell us:



In the for-profit sector

Numerous reports show an impact of the anti-DEI campaign in the for-profit sector, though there are some differences in how the reactions of corporate boards are interpreted. The heading of the 50/50 Women on Boards report on key findings for the third quarter of 2025 reads: “PROGRESS OF WOMEN ON RUSSELL 3000 COMPANY BOARDS REMAINS STALLED.” PWC’s *Annual Corporate Directors Survey: Driving a culture of accountability in the boardroom* states that “the percentage of directors who say their boards are planning to add gender diversity dropped to 9% from 21% in 2024 and plans to add racial or ethnic diversity fell to just 6% from 13% in 2024.” It asks: “Is board diversity at a crossroads?”

An August 2025 Conference Board press release reads: “Report: Big US Companies Are Disclosing Less of Their Work in DEI . . . But That Doesn’t Mean They’re Abandoning DEI.” Although acknowledging that “Race/ethnicity and gender disclosure at the board level have all declined,” the release says: “This shift in public disclosure doesn’t signal companies are abandoning DEI. Rather, they’re selectively reframing commitments, reducing public exposure, and embedding oversight more quietly yet firmly into governance and human capital management.”

While these reports focus on for-profit corporate boards, they suggest governance dynamics that may also influence the nonprofit higher education and healthcare boards.



In the nonprofit sector

There are not as many reports on data about nonprofits as about for-profits, but numerous publications have reported that the attack on DEI has particularly targeted and impacted higher education and healthcare. *Inside Higher Ed*, in its December 15, 2025 edition, asks: “Is DEI Dead—or Just Changing?” It describes “a deluge of federal and state challenges to anything perceived as DEI” and a situation in which “federal agencies have slashed, frozen and stalled billions of dollars in research grants to universities, often for perceived ties to DEI concepts.”

PLOS: Global Public Health declares: “Healthcare is the new battleground for anti-DEI attacks,” and “it reflects a broadening of the wave of state-level anti-DEI in higher education legislation that has surged through the country with 65 anti-DEI bills introduced since 2023, eight of which have become law.” It predicts “potentially devastating consequences for existing efforts to diversify the healthcare workforce in service of an increasingly diverse nation and on existing racialized health inequities in the US.”

What anonymous, confidential interviews reveal:

Our anonymous, confidential interviews included ten people with broad and deep experience related to eds and meds boards, and with current positions on such boards or in positions where they regularly interact with such boards. Some interviewees have a national or international perspective. Six identify as women and four as men; six identify as white or Caucasian and four as persons of color or Black/African-American.

Characterizing current times and impact on diversity efforts

Interviewees described the current environment as markedly different from 2022 and agreed that the drop in numbers of those eds and meds that disclosed demographic data is related to environmental change. They believe that these are what one called tough times. Boards now face pressures negative to diversity that they were not facing in 2022 and are fearful about the possible repercussions of seeming to be supporting DEI. One interviewee explained that people today are spooked, intimidated and threatened, and giving in to their fears; and it's the federal government causing it because of their initial stance on DEI and all their actions since then.

Another interviewee described the climate as keep your heads down. The board does not want to be in the crosshairs. Others said board members want to remain invisible and just do their jobs. One said they don't want to be attacked by the right or the left, and both the progressive left and Washington will punish those boards that become visible since people think you can punish people who don't agree with you. Most mentioned a fear of retribution. And most of the fears, they explain, are rooted in concerns about an impact on funding that is critical to achieving mission and carrying on operations.

According to a number of interviewees, many boards are afraid of violating current laws and practices and



What Board Leaders Told Us:

- 1 Boards are operating in a climate of fear and caution.
- 2 Diversity efforts continue but are less visible.
- 3 Some boards are stepping back from diversity commitments.
- 4 Core values and leadership drive board diversity.
- 5 Progress requires clear goals, intentional recruitment, and broader candidate pipelines.
- 6 Fundraising-driven recruitment can limit diversity, while board diversity strengthens governance.

are reacting with caution about diversity in ways that are concerning to those who want to continue to pursue diversity. Another described uncertainty and confusion as to what boards can and cannot do, prompted, in part, by their lawyers acknowledging that government demands are not the law but advising boards to take a very cautious approach, nonetheless.

Though all interviewees agreed on the pressures and fear, there was some divergence in their views on whether or how much the environment was causing a retreat from actual efforts to increase board diversity. One said the boards that understand why diversity matters are moving forward with the same commitment they had before the federal funding and policy environment changed. Another claimed that people who have been sympathetic are as committed as ever. However, the execution may be chilled. Several interviewees emphasized that the retreat may be more about public visibility than about underlying commitments to diversity.

Some interviewees believe the organizations that retreat from diversity efforts, or the board members who want to do so, were never really committed to it. One said that boards that function with a check-the-box-mentality about diversity are retreating from a focus on more inclusive board composition. Another said the erasure of DEI means that organizations now have learned ways to get around it and will come up with false equivalents. A similar comment was that the current climate has given boards a way out and a way to not focus on diversity.

One interviewee brought up the past impact of a different kind of pressure from outside that had pushed board leaders, mostly white men, to act. Now that there is not as much visible external pressure, it must come from within. That magnifies the importance of the women and people of color already on boards who continue to push



for increased diversity despite the environment. However, where they are not board members but employees within institutions, they need to be strategic in how they raise these issues to protect their positions.

A more discouraged view was that there is now somewhat more reluctance to entertain comments about diversity as a goal of board decision-making and conversations seem more constrained. And a particularly concerned viewpoint was that gains made in the post George Floyd years are in retrograde and there is a movement to erase these gains, all out of fear of funding cuts.

Relationship between the current environment and reluctance to disclose demographic data

Almost all the interviewees thought the current environment explained the increased reluctance of eds and meds to disclose the demographic makeup of their boards. One person suggested the responses might be related to other factors such as who we asked and how we asked, but that person also mentioned the government's level of scrutiny.

Most influential factors in whether boards make progress in diversifying today

There was general agreement about what was necessary for boards to make progress in diversifying, factors that seem important no matter the external environment. Those factors are about core values and leadership. As one interviewee put it: The core values of the board are the crux. Boards must be truly committed to valuing diversity as a core competency of a strong board.

Then, to succeed in achieving board diversity, there was agreement that the board has to be intentional about taking the steps necessary to achieve diversity goals; and doing so requires the leadership of the Board Chair, the CEO or President, and the Chair of the Nominating and Governance Committee. It is critical for them to care about and work together to intentionally pursue board diversity.

Not all obstacles to board diversity are related to the current climate and certain actions are necessary no matter the climate

A lot of the suggestions for specific steps necessary for boards pursuing diversity in any climate are included in this report's Call to Action section. To succeed, some interviewees pointed out, boards need to have strategic goals for board composition that can be tracked and evaluated to ensure they achieve those goals; and they need to create or identify a pipeline or pool of competent diverse candidates. Several interviewees noted that institutions tend to draw repeatedly from the same small group of candidates they know of who would bring greater diversity to their boards. As one person explained, it is important to cast a bigger net.

A fundamental point made by several interviewees is the need to move away from a focus on recruiting high net worth individuals for boards, both because it limits diversity and undermines good governance. One explained a prevalent bias towards white males and, more and more now, white females, because of believing that is where the wealth is. A couple pointed out that big donors tend to believe they have a kind of ownership of the board and that is not consistent with good governance.

Why board diversity matters/the benefits of diversity

When asked what impact any changes in or retreats from board approaches to diversity are having or might have on the institution and its stakeholders, most interviewees made arguments for the benefits of diversity, the difference it makes, and the negative effect of retreating from pursuing it. In doing so they also pointed out that diversity is not just about gender and race. It embraces age and considerations like having been a first-generation college student, particularly in institutions trying to serve that audience. Diversity also includes people with a range of skills, experiences, and disciplines—not just investors and bankers, as one interviewee said.

Interviewees consistently emphasized that diversity improves board processes and board dynamics. They found meetings of boards that were not diverse to lack the insight and productivity of boards that are diverse. Different questions get asked by people with different lived experiences. Examples included questions like: “Have we consulted with students? With staff?” There has been much more consideration of impact on stakeholders and more outreach to them and a feeling of need to listen to constituents. Women are making sure gender issues in general are considered; and a young board member questioned why the board seemed so much like cheerleaders of the existing board and raised the concern about the board moving quickly to becoming a rubber stamp board and losing their objectivity. The consensus of interviewees was that less diversity around the table means that difficult issues will not have robust, rich discussion, which may impact the quality of the decisions made.

A final observation

The fact that ten exceptionally busy and prominent individuals were willing to spend time talking with us and trusted our promise to respect their confidentiality reinforced our belief in the value of reports like this. One interviewee, when asked at the end of the interview if there was anything else it was important to say, commented that it is important to continue to look at and measure board diversity and that people will want to look back at this.



To succeed, boards need to have strategic goals for board composition that can be tracked and evaluated.



Boards repeatedly draw from the same group of candidates. It is important to cast a bigger net.



Big donors tend to believe they have a kind of ownership of the board, which is not consistent with good governance.



Less diversity around the table may impact the quality of decisions made.



... achieving diverse board composition is not self-sustaining. It requires intentional governance practices, leadership commitment, and a culture that values both inclusion and accountability.

CALL TO ACTION

From Intention to Measurement to Accountability



In an unpredictable and unsettling socio-political environment, progress toward achieving diverse board composition is not self-sustaining. It requires intentional governance practices, leadership commitment, and a culture that values both inclusion and accountability.

All boards should clearly define what diversity means for the organization and adopt and embrace the definition consistently across the institution (instead of using acronyms). Moreover, boards should embrace diversity as both a strategic and tactical responsibility to stakeholders. All boards should stay current on the status of both changing policies and legal actions related to diversity while staying informed on outside groups that are creating both pro and anti-diversity pressures.

However, boards are at different points or stages in how they approach diversity and governance. Based on our findings and discussions with a host of people with relevant board experience, we offer actions aligned to three common starting points: boards accelerating progress, boards maintaining commitment in a changing environment, and boards evaluating how diversity aligns with governance priorities.

Identify an *action plan*:

Boards Accelerating Progress

For boards positioned to accelerate progress, the priority is to move from intention to sustained, measurable outcomes.

→ **Document how diversity aligns with institutional values and stakeholders.**

→ **Commit to measuring and disclosing board composition.**

Without consistent disclosure, stakeholders cannot assess progress, and boards cannot hold themselves accountable.

- Establish a standard annual process to collect and publicly report aggregate board demographic data based on voluntary self-identification.
- Move beyond general support for diversity, define board composition goals and adopt specific, measurable objectives for board composition. Use a skills matrix that includes both professional expertise and cultural competence.
- Regularly review progress as part of the governance and nominating committee responsibilities. Communicate commitment to diversity as part of the board orientation and development process.

→ **Strengthen the leadership pipeline to board chair.**

- People do not automatically advance to leadership simply by serving as board members. Moreover, having women and people of color in such positions makes it more likely there will be intentional efforts to pursue board diversity.
- Incorporate leadership succession planning into governance practices, with attention to broadening the pool of future chairs and intentionally developing pathways for women and people of color to move into leadership roles, including board chair.

Boards Maintaining Commitment in a Changing Environment

For boards where attention has shifted, progress can resume through practical steps that broaden perspectives and strengthen governance over time. Without intentional outreach, progress will plateau.

→ **Reaffirm diversity as grounded in mission as a governance imperative and measure of long-term governance performance.**

→ **Maintain a data bank of evidence of how diversity is central to mission**

- Gather and report data that shows the impact of diversity on the institution.
- Stay current on research related to diversity and be prepared to cite it.
- Elevate the value of diverse board composition in measurable terms instilling a strong board culture that embraces differences as strengths.

→ **Align board culture with inclusive governance.**

- Assess board culture and practices to ensure that all members' perspectives are valued, actively included in discussions and decision-making and integrated into governance actions.

Boards Evaluating Alignment with Governance Priorities

For boards evaluating how diversity aligns with governance priorities, the starting point is understanding its impact on oversight, risk management, and decision-making effectiveness. Diversity in governance is not simply a values-based initiative—it is tied directly to how boards assess risk, challenge assumptions, and make informed decisions.

- **Begin with transparency and discussion.**
- **Review current board composition and consider how it aligns with the institution's mission, stakeholders, and strategic complexity.**

“The data is here.
The governance
case is clear. What
remains is the
commitment to
deliberate action.”

Pedro A. Ramos





Methodology

This report is based on data provided or confirmed by 18 of the eds and meds and data about 22 institutions based on careful research. We prefer to issue a report based solely on information from all the institutions about how their members self-identify. But there is currently no requirement that these institutions disclose the aggregate demographic makeup of their boards.

This report includes the largest nonprofit higher education and healthcare institutions in the Greater Philadelphia region, measured by annual revenues of \$50 million or more. For annual revenue figures, we relied on CausalQ, the same web-based source of information about nonprofit organizations across the United States that we used for the 2022 report. To be included in the study, institutions had to be designated by the federal government as 501(C)(3) organizations with their own governing boards. We define the region to cover the counties included in the federally designated Metropolitan Planning Organization for the Greater Philadelphia region.

Due to ongoing consolidation occurring in both sectors, five institutions listed in the 2022 report are no longer included in this report. Cabrini and Salus Universities merged into larger institutions as did Doylestown and Grandview Hospitals. University of the Arts closed. Shriners Hospital was excluded because its board membership is limited to the all-male members of the Shriners Fraternal Organization.

As in 2002, we have listed the four institutions whose governing boards oversee both major educational and medical components—the academic medical centers—in both the education and health categories, so the two lists add to 44 but include only 40 institutions.

In June 2025, 40 institutions were asked to provide aggregate demographic data on their governing boards based on how board members self-identified. We provided a standardized blank chart with the options of Male, Female, and Other gender identity, and the options of Person of Color, White, and Other racial/ethnic identity. Data was also requested about their President/CEO, Board Chair, and –new in 2025– the Nominating/Governance Committee Chair.

In July 2025, we contacted institutions that did not respond to our request, providing our assessment of their board's gender and racial composition and inviting them to confirm or correct our information. Our data was based on the list of board members in their most recent publicly available Form 990 tax return and, because Form 990 does not include demographic information, gender and racial identification algorithms. When a determination by the algorithm could not definitely be made, the gender or race was categorized as unsure. In mid-August, we made phone calls to as many as possible of the institutions that had not provided responses by then, though we did not succeed in reaching all of them.

For the 22 institutions that did not respond to any of our requests, we researched all board members in a two-step process, with one person doing the research and another person reviewing that research. Information was obtained from institutional websites and supplemented by internet articles and resources like LinkedIn and ChatGPT. To determine gender, we relied on the pronouns used in bios and/or articles. In trying to determine race we again used multiple public resources to gain information on individual backgrounds and affiliations so as not to rely simply on photos.

In a few cases we contacted people who know these individuals and asked how they believe these people self-identify. We categorized people as white or persons of color. Persons of color include those who are Black/African American, Asian and Hispanic. We did not use the Other Racial category for any board members we researched.

This report is therefore based on data provided or confirmed by 18 of the eds and meds and data about 22 institutions based on careful research by our team. We would prefer to issue a report based solely on information from all the institutions about how their members self-identify. But there is currently no requirement that these institutions disclose the aggregate demographic makeup of their boards.

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Acknowledgments

WNLI extends deep appreciation to the **Philadelphia Foundation** and the **Fleishner Family Foundation** of the Philadelphia Foundation for their generous underwriting grant support for this report.

WNLI acknowledges with gratitude contributions to the research by **Drexel University’s Raj and Kamla Gupta Governance Institute**.

We are also grateful to the **Whitepenny, Maven Communications and Chatterblast** agencies for their collaboration and pro bono expertise in developing the report design, digital brand, public relations and social media strategies and campaign implementation work provided for this report.

Sincere thanks to the **distinguished individuals** who participated in the anonymous interviews and shared their insights and perspectives about the findings.

This report would not be possible without the support and participation of **WNLI’s membership**.

Who's *on* Board

Gender & Race in
Nonprofit Board Rooms

About Women's Nonprofit Leadership Initiative (WNLI)

The Women's Nonprofit Leadership Initiative (WNLI) is a 501(c)(3) nonprofit association of women leaders working to significantly increase the presence and diversity of women on the governing boards of the largest and most influential nonprofits—higher education and healthcare institutions, and to expand women's influence on and formal leadership of these boards. WNLI believes that diverse stakeholders, who have an interest in and are affected by decisions of the so-called eds and meds, must have their needs and perspectives represented at the tables where critical decisions are made—starting at the top with governing boards. Founded in 2012 in Philadelphia, WNLI's all-volunteer working members concentrate efforts on the Philadelphia area and collaborate with organizations nationally to effect change. WNLI has conducted and published regional and national research, published in regional and national media, and spoken on numerous national and local panels and webinars.