Transcript Second Webinar
Governance of Civil Society Organizations

Meredith Schlussel: Good morning everyone and welcome to the second webinar in the Governance 3-part Series; Governance Challenges of Civil Society Organizations and their Governing Boards. My name is Meredith Schlussel. I am a project associate with the Leadership Management and Governance Project. And first I will go over some housekeeping rules before the webinar begins. Participants will be automatically muted, and you can connect your audios through the computer. You can provide feedback through function on the bottom of the chat panel, and please provide your questions in the Q and A box. And lastly if you would like to speak in the chat function send it to all panelists so everyone can see your questions and comments. I’m now handing over to Jim Rice.

Jim Rice: Good day, we welcome all of you to this webinar series. We’re continuing to explore the role of governing boards. The first webinar event was focused on governing bodies within the public sectors of low and middle income countries, and today we will be examining some of the opportunities for contributions that governing bodies make in the non-governmental area. We will be looking at three applications in the civil society organizations arena.

It’s important to recognize why we are looking at civil society organizations as well as governance within the public sector. There are three major contributions among many that civil society organizations make. They are an advocate for high risk population groups and their health challenges. They also are a point of service for service delivery of a variety of health services in many of the countries that we all work, and the third key contribution that they all make is to help hold government to account for their work. Undercutting several of these as we often see, the civil society organizations are a source of resource mobilization as well in their areas of concentration.

You’ll see on slide three that this webinar today is a part of a three part series. This webinar will be recorded, and it will lead up to an interaction with a large number of managers and governance leaders across the world on May 11th through 13th in a LeaderNet learning experience. You will have an opportunity to see more materials on this as we get ready for that event. As we go through the presentation of the series, we should keep in mind the key messages that are becoming evident in this work. First the governance occurs in many venues across the globe. Good governance is an essential enabler for those who deliver and manage health services, and it is also an important element if we focus on four essential practices of good governance, and that we look at ways to continuously improve and enhance those practices.
We’re going to move now to slide four to remind ourselves about what we mean when we deal with governance. On slide four we have a definition that is being used across the globe. Governance is a structured process wherein a group of people usually referred to as a governing body make decisions about policies, plans, and rules of collective action that wield power and resources to help support the pursuit of the organizations mission. You will see on the bottom of slide four that in order to accomplish and activate and implement this type of definition—[INFORMAL TALK] Implementing this definition requires us to embrace the four essential practices, and these practices play out in a variety of ways across the world in the health sector. We will be examining how they play out in three organizations today.

As we move to slide five we would also like to encourage the participants in this webinar to keep in mind that often good governance interacts with, and is interdependent with other key concepts like citizen engagement, there are multi-sectoral definitions and approaches to governance. For example, as we saw last webinar in the country coordinating mechanism arrangements that the global fund supports. On point four of slide five I would call our attention to the understanding that there are many types of organizations in the health sector. Some engaged in service delivery. Some involving supply of medicines, and materials and certainly in advocacy a set of organizations is engaged. It’s also essential as we look at point eight on the bottom of slide five that good governance of these types of organizations is a large contributor to the sustainability and resilience of countries and their health systems. Moving to slide six, the one main message we would like you to keep in mind as we listen to our presentations today and for those of you who join us in the LeaderNet program in the middle of May, all of this good work by governing boards, and the leadership role to support boards is done in a context where the social determinants of health interact in this logic chain that we see on slide six. Good governance enables good management, and good management enables the work of service delivery actors and activities. And with the people that we all exist to serve we all hope to have healthier populations.

So let’s move now to the webinar for today. On slide seven you will see the three panelists that will shape our thinking and stimulate our conversations. We’re first going to hear from Karen Johnson Lassner. She will be joining us from Brazil. She will be examining some work that boards can do dealing with the challenge of HIV AIDS, and there’s a wide number of civil society organizations of course also public sector organizations dealing with this challenge. We will then move to Joseph Dwyer who is joining us from England, and he will be sharing some comments about another type of civil society organization. One that is involved in supporting victims of torture, and then finally we will complete this webinar with a short eight minute video and interview of a Member of Parliament in Uganda, Sylvia Ssinabulya who is going to be sharing her views as the chair person of a family planning organization. She was recently interviewed by Dr. Mahesh Shukla of the Leadership, Management and Governance Project supported by the US Agency for International Development. And she will be sharing some of the important roles that board chair persons and the boards can play in this arena of civil society organizations.
Let’s first then turn to our panelist Karen Johnson Lassner, Karen we welcome you and look forward to your observations about the challenges of civil society organizations dealing with HIV and AIDS, thank you Karen.

Karen Johnson Lassner: Thank you Jim, good day everyone. May I just review the first slide please? This morning –this morning where I am in Brazil I will be talking about the governance challenges of HIV and AIDS organization. And when I refer to HIV and AIDS organization I am referring to organizations involved in service delivery, whether it be prevention, treatment, care or support as well as organizations that are involved in research, in policy advocacy and other activities having to do with HIV and AIDS. I will go over the challenges that these organizations face, and then I would like to focus on three of what I consider to be the –the major challenges that the boards of directors of HIV and AIDS organizations face. Next slide please?

On this slide I’ve gathered together what in my experience I consider to be some of the biggest challenges that HIV and AIDS organizations face. You can see that some of the challenges have to do with how boards of directors organize their meetings. They are often poorly attended, or not well organized, or held. Other challenges have to do with the structure of the board of directors. The committee structure, it may not be effective, problems with leadership, with a weak chair, etc. Also with how decision making is carried forward, particularly in organizations where one might see what we call founder’s syndrome. There are also challenges having to do with board members. Board members who don’t know their roles and responsibility, there are also challenges with regard to the actual evaluation of the performance of the board, of the whole board and individual board members. Often times on boards of directors there’s conflict of interest. And then while these challenges, these governance challenges are similar to the governance challenges that many civil society organizations face, whether they work in reproductive health, or they work in other areas. There are some specific governance challenges that apply specifically to HIV and AIDS organization. And those I’ve pointed out in this slide. As Jim mentioned earlier in this webinar one of the governance practices is engaging stakeholders, and one of the ways that board of directors can engage stakeholders is through including people that live with HIV and key populations on their board of directors. And often times one sees that these very important stakeholders are not included on boards of directors, and then when they are included the board faces another challenge. And even when they are included and the board is seeking to include them another challenge has to do with the confidentiality of people who live with HIV and key populations, and the threat of human rights violations particularly in those countries in where those activities in which these board members, or potential board members are involved in. Whether that might be sex work, or injecting drug use, so these are the two sets of challenges, governance challenges that I believe affect HIV AIDS organizations that are different from other organizations. Maybe go to the next slide please?

So I would like to focus now on what I consider to be the three most important governance challenges facing HIV and AIDS organizations. That has to do with how meetings of boards of directors are organized. The second challenge is that of board members not knowing their roles and responsibilities and the third challenge is founder’s
The first challenges; board members don’t know their roles and their responsibilities. When we go to secondary school, or we go to university we don’t learn how to be a board member, so it’s only natural when one is invited to be a member of a board; it’s only natural that you don’t know exactly what your role or your responsibilities are, and it’s very important that the organization plan for board member education so that board members can learn about their role and responsibility. Some of the things that an organization can do to see that members know their roles and responsibilities is to make sure that the board members have terms of references. That they have agreements when they come on the board which they sign with regard to their duties, they should receive a new member orientation that includes a handbook or a manual with key information about the board. There should be continuing board member education throughout the year, not only at the new member orientation, and this can be done at every single meeting just a little bit of board member education, or it can be done at several times throughout the year. Often times boards have annual retreats in which a part of that retreat can be a part of continuing education. Boards should also have their evaluation or the performance of the board should also be evaluated. The board should be evaluated as a whole, and individual members should be evaluated perhaps every two years or so. And the results of these performance evaluations should be used to feed back to the board so that the board can correct its performance.

Let’s move onto the next challenge, which is poorly organized board meeting in my perception. We see a lot of boards or board members that complain about having to go to board meetings that are not effective or efficient. So how can we improve board meetings? One of the first thing of the meeting is make sure that the board of directors has a calendar of the meetings for the year, and the dates of those meeting should be aligned to the key decisions to be made by the Board. There should be a well-prepared agenda, prepared by the chair and the executive director. Board members should be invited in time even though they have the calendar they need to be reminded several weeks ahead of time they need to receive the materials the board packet ahead of time to be able to review the materials and be prepared for the meeting. And then the chair of the board also has an important role in making sure that during the meeting discussion sticks to the agenda and that time is managed. A very good tool that the board can use in their board meetings is the dashboard that presents key performance indicators, programmatic and financial, for the organization. At the end of the meeting the conclusion should be summarized and the next steps identified with persons responsible for these steps. The board meeting should be evaluated - very quickly - come on, just a quick round of what did we do this time and what we can do to improve our meeting, - and at the next meeting there should be follow up on the decisions and the actions that were recommended. Next slide?

And then the last challenge that I have chosen to illustrate as being one of the biggest governance challenges HIV organizations face is founder’s syndrome. Founder’s syndrome we usually think of as being a person who established the organization and
But actually founder’s syndrome is more than having decision-making limited to the founder. Founder’s syndrome could involve a group of people who brought the organization through difficult time and made it come up perhaps through the financial crisis. Some very hard decisions had to be made, and once the organization was in clear waters that group continues to dominate decision making. And, also founder’s syndrome can also involve a larger group of people who limit decision-making to themselves. The first thing to do if your organization has founder’s syndrome is to recognize that you have the syndrome and begin to do something about it. If you’re the founder, you really need a coach; someone who can orient you as to how to move the organization forward and redistribute the decision making authority. It is important also to restructure the board. Bring on new talent, new creative ideas. You also need to develop a vision based on your values. And I would like to give the example of MSH; we have a legacy on which MSH is founded called the Tao of Leadership. You also need to develop the succession plan for yourself, and who is going to lead the organization? And how is that person going to be developed? And make sure that someone is being groomed to take your place. So in summary those are three challenges can you go to the next slide, Meredith? That I consider to be the important ones facing HIV and AIDS organizations. My contact information is on the slide, and I would be happy to continue dialogue with any of you who are participating in the seminar on any of these topics. Thank you very much!

Jim Rice: Thank you Karen. Karen had done a good job of establishing a solid foundation of over 20 different activities that will help civil society organizations unleash their full potential. Many of those as we know in the field will also be useful for public sector organizations engaged in governance for health. We’re going to move to our second panelist now Joseph Dwyer joining us from England who will be addressing a civil society organization based in Tbilisi, Georgia. Joseph welcome to the webinar!

Joseph Dwyer: Okay, thank you Jim and welcome to everyone. Happy to see so many people participating and are attending. Thanks also Karen for setting a good foundation, because some of the issues that you described related to HIV and organization governance can apply to many CSOs in the world as you mentioned, and that can also be true within the field of people who are working with survivors of trauma and torture, and so on. Also just a little bit more specifically on one organization, to bring to light specific issues that they are dealing with, but many of the organizations that we work with, there are 9 others in 9 countries that face similar issues. So this first slide just shows Georgia has a very long history. It’s an important country, and the people in Georgia are very educated, talented, and very independent minded people. So it’s a pleasure working there. The next slide please?

I will give just a brief history because people aren't quite so familiar with NGOs that work in this sector. The EMPATHY organization was founded in 1996, but then became officially registered in 1998. Was one of the first not for profit organizations in Georgia, and they have implemented many projects. They have a good reputation, they have a good track record, the founders are in the profession of psychiatry and other
society members. And their values from the beginning were based on the principles of democracy which were very important at that time and still are in the post-Soviet era that people in Georgia we're facing. Next slide?

Mission of EMPATHY - I won't read all these areas but they provide medical, psychosocial, and legal support to the types of survivors and victims that are listed here including the victim of torture. And their main goals of EMPATHY are assistance in persecution so that it can help to prevent this in the future if torture is taking place. Assistance in rehabilitation of the victims of torture, and also they provide support for family members. I will talk also some of their unique challenges later on. The next slide?

Jim Rice: Joseph I also want to acknowledge for the audience that when you said torture persecution is their goal, I know that you meant the prosecution of torture.

Joseph Dwyer: Yes it is people who have perpetrated torture or who are engaging in that, so they (EMPATHY) do the medical investigations, the legal investigations and so on, yes that is a good clarification. So I just wanted to show you a picture, this is 5 of the 8 board members and Mariam Jishkariani who is second to your left is the founder, one of the founders and is the director for the organization and the president of the board. That has many positive aspects, but it can also sometimes have stressful aspects in terms of all the work that ends up falling on her shoulders. Members are presented here, they face unique situations in this sector because when organizations like this are set up it is often at a time of conflict or post-conflict, and they are dealing with or identifying the survivors torture and trauma, and providing services. And so often times they can collaborate with a new government that may come in after post conflict situation. In the longer term so they are often dealing with the current government, but yet sometimes impunity or other things maybe going on within the political or other systems within the country. Impunity where people are acting without accountability, and so bringing those things sometimes is very delicate and it's critically important to have a very credible and respected board as EMPATHY does in Georgia. Next slide?

This is a dedicated board. I mention they have a wealth of experience, which is connected to the professional work. They have professional reputations, and as I mentioned the director is the founder. Karen mentioned founder’s syndrome which sometimes can cause conflicts and problems. There also can be very positive aspects to the founder being continually involved in the organization. In this particular case they really embody the values and the vision of this organization and they are very strong group of people. Next slide?

These are some of the gaps and opportunities. The same board is continued since the inception of EMPATHY when it was incorporated in 1998, a lot ends up falling on the shoulders of Mariam, the director and the board president. The other board members are influential people in society, but also very busy. They don't really have very much of a committee structure, and then all eight board members are trained in psychiatry except for one who is the former diplomat. They have done some governance assessment and I will mention the tool in just a bit, that we've helped them with. I'm looking at what skills
they have, and what strengths they have but they also realize that they don't have very much fundraising capability or interest from other board members because they often have to raise funds for some of their own organizations that they represent. They don't have someone who brings from the board so much of a finance background, and especially and human resource management, so these are areas that we've been able to help them with. And then as they're moving towards the future as I will mention having a little bit broader international perspectives, so these are some of the challenges that they are facing. Next slide?

And some of the steps that can help; they've used the good governance and civil society eManager publication of MSH that helps do a governance self-assessment and look at their strong and weak areas, look at issues of board member recruitment and how to diversify the board a bit more often. And they were really thought for a vision for the future, and I will get to that on the next slide in relation to more regional center. I think we're going to the next slide forward?

Okay great and this brings in a little bit as Jim and the others have mentioned some of the good governance practices as well comment setting strategic direction is one of those and this group has really reviewed their current situation. They have a regional program where they are dealing with countries now beyond Georgia like Armenia [inaudible 27:15] Chechnya which is in the region and they are really thinking about how they can set up a regional trauma center that would be for research and education beyond Georgia, within Georgia and beyond, and that adds another whole list of things that the board can help with, but also requires a lot of energy from the board. Articulating the case of why a trauma center would be needed, and especially engaging with stakeholders which is another good governance practice with the government of Georgia to see if they can get land or a building as well as engaging with other potential interested stakeholders from abroad to form an International Advisory Council related to the trauma center. So these are things that they're looking at and at the end of this whole presentation you will see a list of resources that can be beneficial. We can go on to the next slide.

I just put this at the end, the beginning was kind of this historic picture in the centre of Tbilisi this is also the river that runs through the beautiful town of Tbilisi and it is the Peace Bridge that is bringing together two sides of the river, and I think it's a nice way of kind of looking towards the future. So I will turn it over to the next session and if there are questions we can deal with them at the appropriate time. Thank you!

Jim Rice:  Thank you Joseph. We have now heard from Karen who has identified a large number of challenges that face the good work of people that step up largely as a volunteer to serve on governing boards in civil society organization settings. Many of those challenges we acknowledge could also apply to public sector health system boards and service delivery boards and advocacy boards. Joseph has also reminded us the talent that we attract into the boards is an important way of dealing with those challenges, and we need to find ways to harness those talents within the MSH’s essential practices of governance model. As we move to the next panelist that –which will be a recorded video—I want to remind us what those four essential practices are.
The first is to establish a culture of accountability; both boards in the public sector and civil society organizations work together to accomplish that first of four essential practices. The second essential practice is stakeholder engagement. It’s sometimes a challenge, and that is to engage diverse stakeholders. Karen’s remark about HIV and AIDS organizations, one of the challenges is to involve the high risk or most at risk populations in the governance decision making process. So that’s second of four essential practices is sometimes a challenge to accomplish. The third essential practice is the one that Joseph identified in his remarks with the Tbilisi, Georgia EMPATHY organization, and that is the board can help set strategic direction for the organization. The fourth goal is to look at resource mobilization, and how can we be good stewards of those resources? So four essential practices and we’re going to look now at how a board chair can look at playing a role to accomplish some of those in a challenging arena of reproductive health services in Uganda. If we’ll go to the background of this organization is shown to you on slide 26. The Honorable Sylvia Ssinabulya is going to be sharing observations with us. This is a challenging video. We hope you will be able to see it. This was recorded from an interview conducted on Skype by Dr. Mahesh Shukla, and so we ask your permission to be flexible on the video quality, but the messaging is very powerful and very important. We call your attention to that. On slide 27 we have four questions that were asked of Sylvia, the first is looking at board support that they provide, looking secondly at how to improve the work of the board. The commitment that is essential for continuing board development and education, and then finally some closing observations. Let’s turn to the video now Meredith and see if we can invite our participants to watch along with us. This is 8 minutes and 5 second video, so pace yourself as we listen to this practical wisdom from a board leader in Uganda.

Sylvia Ssinabulya: [VIDEO INAUDIBLE FOR TRANSCRIPT]

Jim Rice: All right, we thank Sylvia remotely for her observations. I hope that you will take from her remarks a couple of important messages. First of all the value of a talented and experienced chair person is absolutely invaluable to unleash the potential of governing board effectiveness in civil society organizations, and of course in the public sector as well. She also mentioned the value of having a positive sense of partnership between the executive director, the chief executive, the managers of the organization, and the governing board members. I think she used the expression that you heard there, “eyes on but hands off” is the balancing of her message gained and shared with us from Uganda. So we’re going to have about 15 minutes for some conversation with participants. We’ve had over 180 signed up for the webinar. We’re going to take a couple of questions from the filed that have come in, and then we have participants in the Boston area that will be providing questions and comments, and then some of us here in the Washington DC office of Management Sciences for Health.

Karen shared that the real value of civil society organization boards is unleashed when we are explicitly identifying challenges and finding ways to work around those. She left a message with us that structured policies and some infrastructure for decision making are important ways to avoid the negatives and maximize the positives.

Joseph shared some very useful incites about the value of having talented board members that are experienced and that they are there to be champions for, and protectors
of the mission of the organization, and they also help chart a strategic vision and a strategic plan into the future, and then as we just commented on the important role of the chairperson.

One of the first questions up from the field is how does an organization, both the managers and the governing board members look at self-assessment? They called attention to Joseph’s remark about the value of doing a self-assessment to continuously enhance and improve the work of the board. There are a number of tools that are available. We will provide examples of that to the registrants of this webinar. We also are in the process of pilot testing some cell phone based self-assessment tools that are referred to as GovScore that you will be able to access later this year as a tool for governance and board self-assessment using cellphone.

There are examples of this in some of the publications that you will find on the web portal for the USAID-supported Leadership Management and Governance project. I want to call your attention to that in a moment. On the screen in front of you is just a reminder of these four essential practices in the middle of the bottom there; cultivating accountability, engaging stakeholders, setting strategic direction, and stewarding scarce resources. If you will move to slide 28 we will keep those set of governance learning resources up on the screen as we go through additional questions and comments. We’re going to first turn to colleagues that are joining this webinar in our Boston area office. Do you have questions or comments from the Boston or Medford office? We have now unmuted the line so we will be able to take questions from there as well as the field. We have one, Sylvia if you would introduce yourself and raise your comment or question please?

Sylvia: Hi, I have one request, and that is whatever tools are referred to that you make sure that they are in the One MSH Toolbox so that everybody can access them, and then I have a question for Karen, and thanks to Joseph and Karen for [inaudible 45:24]. Karen I’m particularly interested in the founder’s syndrome. A long time ago under FPMD probably we worked quite a bit on this with Women for Family Planning in Bangladesh, and also we worked on this with Center for African Family Studies in Kenya, and so there is a body of case studies and stuff that you may already have, but just wanted to remind you that that’s way back, and then one comment about the founder’s syndrome I like your list of actions to take. However, if people maximize founder’s syndrome then three-quarter of the battle is won, and the problem is that people don’t. And it gets a little delicate at times, and I’m just curious if you could give us some—some examples where you have encountered this, and how you get past that very delicate point? We’ve actually looked at it ourselves within MSH. Some of you who have been here for a long time know, and so if you could give us an example of what you did to help people get to awareness of the founder’s syndrome?

Karen Johnson Lassner: Thank you Sylvia for your question about founder’s syndrome. I’m thinking of one particular example in which it was a group of board members, and the chief executive officer who recognized that the organization was suffering from founder’s syndrome, and began a group coaching process with the founder over a rather long period of time to basically increase that person’s—the founder’s confidence that the organization could be run by a larger group of people, and was able to
move this founder from chief executive position. Initially this person was chief executive officer when founder’s syndrome was actually diagnosed the person had moved to be board chair. And over a period of time of actually working, coaching that founder, that founder, and I’m referring to an example that is happening right now. That founder will be stepping down as chair of the board in June. But it has been a long process, and it has to do with a lot of—a lot of conversation, a lot of—a lot of back and forth, and it’s not something that happens overnight. And the founder needs to feel the confidence that the organization will be able to move forward without his/her leadership or with him/her not at the helm.

Jim Rice: Thank you Karen, I have a question for Joseph. Joseph in your work with both public and civil society organizations, you appropriately called their attention to their important role to set a shared—or establish a shared strategic direction, to articulate a vision, and then work on ways to accomplish that. Can you give us a few comments about how you are supporting some of these organizations to think of their work as strategic planning champions, and to some of the ideas that might help boards accomplish that more effectively?

Joseph Dwyer: Can you hear me?

Jim Rice: Yes we can, thank you.

Joseph Dwyer: Okay great, thanks Jim, before I answer that I just wanted to acknowledge that one of the key managers of the EMPATHY CSO in Georgia is attending this seminar. Ekaterina, so I’m very happy to see that she was able to find time to check in on this, and you know, she maybe willing to answer some questions too if there’s something specifically related to their good organization. Related to the strategic direction, it is a very good question often times for all of us in CSOs or public sector, we could get so caught up in just facing what’s in front of us. Operating almost in crisis mode frequently, and I’m sure that resonates with a lot of people that we don’t find time to step back and remember why was this setup in the first place? What are we really trying to accomplish? And then what is a little bit of a longer term vision. Some organizations are able to do this well within themselves, and in fact EMPATHY has been looking toward the future, partly because Mariam always has a future vision for them, but they as a board have really looked about what they can now do regionally to take some of their expertise and help to other countries in the region.

In some other places we’ve kind of helped to facilitate that process where we helped the board step back from their day to day onslaught of what they are doing, and really there is a 7-8 step process that can be fairly streamlined. I mean it could be very elaborate, but often they don’t have time for that. But with many of the boards of these CSOs we’ve helped them to really think about what their purpose in the world is, what it was, and what it isn’t, and is it still on track, and if they’re really successful with that purpose what will that look like in three years or five years down the road, and really take time. Sometimes it could be done in a few hours even to really examine what that vision of success would really look like, and then what’s standing in the way? Why aren’t they achieving that vision that they want to go to take things to another level, but often times
having somebody facilitate that process helps people get a little bit away from the day to day onslaught that they are often facing.

Jim Rice: Thank you Joseph. We’re going to have a few minutes for one or two questions. On the screen you have some of the resources available to help boards and management teams deal with the challenges of governance. Joseph has acknowledged that Ekaterina is joining this webinar from Tbilisi. [FOREIGN LANGUAGE] Do you have a question or comment that you would like to share with us? We will see if we can unmute you Ekaterina. Ekaterina, do you have a question or comment? You don’t need to, but you have an opportunity. All right, thank you, are there questions or comments here in the Washington office of MSH? Any questions or comments here?

Unidentified Female: How is governance affected when the same person is the executive director of the organization as well as the chair of the board?

Jim Rice: All right, the question is, on the screen is how does governance get affected when the same person may be the executive director as well as the chair person on the board? I will make a brief response to that myself, and then we’ll turn to Karen and Joseph. In my work with many governing boards, in a number of different settings and countries; often times you will see at the early stages of a civil society organization a strong proponent for the mission being both the executive director and also the chair person. This has advantages at the beginning, but it loses a real opportunity in the future where you don’t have an opportunity for a civic or business or community or health leaders to step into the chair person’s role. And he or she then can not only bring more talent, but an objectivity to the mission of the enterprise or the organization that sometimes can get confused or conflicted if the same person is occupying the same role. This is a debate that’s occurring over the last 20 years across the globe. There’s not an easy answer for it, but usually the answer is you miss an opportunity to get more talent engaged in the governance process if you have one person try to play two roles. Joseph or Karen would you like to respond to that, and then we have time for one more question?

Joseph Dwyer: Yeah I could say some thing quickly and that is the case in the EMPATHY as I mentioned, and that maybe what prompted the question. If the person who is the—I agree with what Jim said. It’s often said to be a lonely job to be the director of an organization anyway, but having a good chair who’s another person to support you and help you, and work with you can be very useful when you’re playing both of those roles you kind of miss out on really having that other strong person on your team to help you. The other thing though is if your values and accountability are all in good order it’s not so bad, but sometimes you can get a person you who is not like that, then you start to wonder what the organization is about, or there may be a conflict of interest, and if one person has all that power and he or she really is not aligned with values then it can become a very big accountability issue for the board.

Jim Rice: Thank you Joseph, Karen I have a question for you. Sylvia made reference to the important role of having ongoing board development, board orientation, board education. You’ve worked with a number of public and private sector boards, what are one or two ideas that you would suggest for our audience today about how the board can
pay attention to board development, board education? What are some practical things that they may want to consider?

Karen Johnson Lassner: That’s an excellent question Jim. I think that often times board education or board development is within the responsibilities of the governance committee of the board, and I believe that one of the—one of the things that the governance committee or the board could do is actually develop a board development plan. And decide - exactly when is the best opportunity to provide continuing education for the board. Whether it’s something that’s in addition to the new member orientation, whether it should be done once a year, whether it should be done several times throughout the year, if it can be done in short snippets during board meetings, but I believe that board development plan is probably a key tool. And there’s not a set answer for all boards, it depends on the board of directors and their availability, and of course their interests.

Jim Rice: Thank you Karen, we have time for maybe one more question. We will look at those, there are several coming in on the participation from across the world, but any questions in the Boston office or Washington offices here before we take more from the field? I have one more question for you Joseph, and that is - you have focused on the value of talented people serving on the board, and you have mentioned that one of the real strengths of the board in Tbilisi, Georgia is the rich clinical experiences that the psychiatrists bring to that important mission of EMPATHY. What are some of the conversations that you are having with that board, or advice that you would give to other boards about how to recruit additional talent, people that are dedicated to the mission, and may bring additional experiences, and different skill sets into the mix of the governance decision making process?

Joseph Dwyer: Okay, thanks Jim. That’s a good question. One of the discussions that we had and EMPATHY is a little bit unique in that situation in the post soviet context. They have—you know, helped me understand also that there isn’t a big voluntary sector participation pool where people really want to be board members, or really looked a lot at volunteering, so getting people who are willing to do is not so easy in the first place. One of the things that they’re looking at, and sometimes people can get themselves on a board, and then not use that organization for the purposes that it was originally setup for. So there’s a little bit of nervousness about expanding beyond a group of fairly trusted board members. So one of the issues that we’ve been discussing, that could be relevant for other CSOs too, - is setting up something that could also be functioning as an advisory board to start with. Advisory committee where they’re not taking over decision making that the board has, but they get to know people, and the people get to know them, and then basically from that pool of people it becomes another group of people where you could start to select people that you really do think resonate with your mission, and what you’re trying to accomplish, and are shown to have some of the skills that fill some of the gaps that the board may recognize that they have like fundraising, or human resource management, or even bring in international perspectives. So that’s one of the key discussions that they’ve been having.

Jim Rice: Thank you very much; we’re going to bring to a close these two webinars. I would acknowledge that these two webinars are being recorded. They are available for
future reference, and we have a large number of individuals that have expressed interest to participate in an interactive session in the middle of May from May 11th through the 13th continuing this journey to understand what are the scope and nature of responsibilities and opportunities for governing boards to play a role to champion, and to protect the mission of their organization, whether that organization is an extension of the ministry of health in the public sector, whether that organization is involved in advocating for the health service and human rights needs of high risk populations, or dealing with maternal and child health, or HIV AIDS, or malaria, or TB, or family planning, and whether those organization are in the civil society sector or not. We’ve acknowledged in the two webinars thus far that governing boards work at all levels from the small village and community up to the national level. We have not focused on governance across the nation states, but we do know that governance is being addressed in that way by the World Health Organization, the World Bank and others. The work in Management Sciences for Health MSH and its flagship project dealing with CCM governance, the GMS project supported by USAID, and also the LMG project supported by USAID - are looking at how governance of these organizations that are involved in service delivery and the movement of money can be most effectively strengthened and expanded.

We have identified a number of resources for you to follow up with after the webinar. We thank you for your interest, and your support for this journey towards smarter governance. Governance that embraces the essential practices of good governance that are continuously improved, setting a culture of accountability, engaging stakeholders, setting strategic direction for the organization and being a good steward of resources entrusted to the organization. We want to continuously improve these opportunities for knowledge exchange. We encourage you to complete a survey on the webinar that you will be receiving by email. We’ll be sending information out to all registered participants. Thank you again for your interest. We will adjourn this and hope to see several more of you in the middle of May at the LeaderNet seminar. Thank you!

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