



WORLD HEALTH ORGANIZATION

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Statement by the representative of the WHO staff associations on matters concerning personnel policy and conditions of service

Mr Chairman, honourable members of the Executive Board, Director-General, Regional Directors, colleagues,

1. On behalf of the staff associations of WHO and IARC I have pleasure in submitting this statement to the Executive Board and I thank you for giving me this opportunity to brief you on several points concerning staff matters.

IMPORTANCE OF WHO STAFF AND ROLE OF THE STAFF ASSOCIATIONS

2. WHO is above all a specialized health agency whose staff – men and women working at headquarters, in the six regional offices and in over a hundred WHO country offices – support the Member States in the development and implementation of their national public health policy.

3. As members of the WHO staff associations we are in a unique situation: we all work in support of public health programmes and are committed to our areas of expertise; in parallel, however, we have a particular interest in personnel matters. We therefore have a significant role as the interface between the technical departments and WHO's human resources services. In our daily work with colleagues, fighting diseases like Ebola haemorrhagic fever, avian influenza, HIV/AIDS, tuberculosis and malaria – to name but a few – we are acutely aware of the ways in which administrative procedures can contribute to or hinder the implementation of work in the field. Staff associations are there to keep the administration informed about such matters.

4. Staff Rule 910 clearly recognizes how important it is for the Organization to have staff associations, “for the purpose of developing staff activities and making proposals and representations to the Organization concerning personnel policy and conditions of service”. Staff Rule 920 stresses the obligation for the Organization to recognize the duly elected staff representatives, “as representing the views of that portion of the staff from which elected”. Recognizing the staff associations in this way is very positive, however we would like to emphasize that effective functioning of the staff associations depends on the facilities that are made available. While some offices have excellent practices in this regard, we regret that experiences elsewhere in the Organization have been mixed. We wish therefore to reiterate the hope expressed during the last Global Staff/Management Council, namely that WHO's management will ensure that good practices prevail in a uniform manner throughout the Organization.

ISSUES FOR FOLLOW-UP

5. **Rewards and recognition.** Among the different issues that we regularly raise with you, some are being followed up; however, others still need work. We would like to express our support for the recommendations made by the last Global Staff/Management Council concerning the introduction of a WHO-wide financial reward and recognition system and we look forward to its implementation.

6. **Rehiring of retirees.** We note with disappointment the continuing practice of rehiring retirees. We believe that it is wise to oblige staff members to retire at a certain age, and we encourage the management to respect this principle. The practice of rehiring of retirees, often the result of favouritism, has an adverse effect on the morale of serving staff whose opportunities for career advancement may be restricted as a consequence.

7. **Types of contract within WHO.** As you may have noted from recent human resources reports, the proportion of temporary contracts is now very significant. September 2003 data indicate that 57.7% of WHO's staff hold temporary contracts. This figure varies between locations, ranging from 31.7% in the South-East Asia Region to 73% in the African Region, with three regions and headquarters having a proportion of temporary staff higher than 50%.

8. A considerable effort has been made, particularly at headquarters, to regularize the position of staff serving under temporary contracts over very long periods (between four and 13 years). We are grateful to the Director-General for his strong support and commitment to this effort, which has resulted in the creation of some 80 time-limited fixed-term positions at headquarters, and we hope that a similar approach will be adopted, where applicable, in the regions.

9. With regard to temporary contracts, we wish to draw your attention to the following points:

- Temporary contracts are not subject to the rules of geographical representation and gender balance; this introduces significant bias towards recruitment of staff from certain parts of the world. This is an extremely important point and all staff associations are wholly in support of equitable geographical representation among WHO staff, which, in our view, should be coupled with a more even distribution across the different offices. We are therefore deeply concerned about the present arrangements which are contrary to this key principle.
- The new contract rules for the Organization, which came into effect in July 2002, place a four-year limit on temporary contracts. In other words, any person who has been working on temporary contracts for the last four years will have to leave WHO for one year. We shall see the effects of this rule for the first time in 2006. This measure might be of value if these time-limited contracts were used for what is genuinely temporary, time-limited work. In practice, however, this is not yet the case. According to our calculations, which are based on figures as of May 2004, about 1800 employees, representing about 20% of the current staff will have to leave WHO between July 2006 and February 2007. More than half will leave in the month of July, which is four years after the new scheme began. This massive departure will have a major impact on the Organization's current and future work, and will lead to a loss of technical expertise, institutional memory, reputation, efficiency and productivity.

10. Given that 57% of WHO staff are on temporary contracts and with a first wave of staff members leaving WHO in 2006, we would like to share with you the questions that we have put to our Director-General, knowing that he has inherited problems that are not easy to solve:

- Should WHO continue to be an Organization that depends largely on staff serving under temporary contracts?
- Is there an acceptable alternative to the current arrangement, a solution that would permit the Organization to fulfil its mandate and meet its health goals, while at the same time guaranteeing a better balance between staff on temporary contracts and their colleagues with fixed-term appointments?
- If WHO is to become a socially responsible employer enjoying a more stable and motivated workforce it must offer its staff appropriate career development perspectives, guarantee equitable geographical representation, and adhere to international codes of conduct. What kind of human resource structure should WHO develop to achieve these goals?

11. We are fully aware that there may be no easy or straightforward replies to these questions, but they merit great attention and are probably central to WHO's future.

Thank you for your attention.

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