Statement by the representative of the

WHO staff associations

1. The Staff Associations of all the offices of WHO have a vision for the Organization. In a number of these aspirations we as an Organization have already come a long way, on others we still have a long way to go. We would then like to have your ideas and thoughts on this vision, and talk about how Member States, WHO’s management and staff can support each other in reaching our common goals.

2. We see a WHO whose staff believes that better health is not just the mitigation of disease or the prolongation of life, but the attainment of physical and mental well-being that can allow each of us to contribute to our community and have a life that we can be proud of. We see health as more than a desirable goal, rather as a human right, and therefore special attention is paid to those areas of the world that have the most profound health deficits. We see that a strategic and meaningful investment in health is a fundamental and catalytic action that will drive development, increase equity and fairness, and give hope to the bottom billion who would prefer to contribute to our collective prosperity rather than succumb to the trap of despair.

3. To this end, we see investment in health as even more essential during times of economic downturn. We see Member States committing themselves to a policy of counter-cyclical investment because they realize that health is a key driver to renewed prosperity, and they realize that proportional cuts in health during times of economic hardship will accelerate the downward spiral rather than reverse it.

4. We see a WHO whose staff have joined the Organization because they hold these truths to their hearts and know that the application of their knowledge and experience in countries can make a difference. We see a WHO staff that recognizes that the world today is a more complex place than it was in 1949, that the days of monolithic top-down approaches are over. We see a WHO staff that is more collaborative, nimble and resilient to the more complex challenges facing us, a WHO that must respond quickly to a rapidly changing environment and unpredictable health challenges. We base as much as we can on evidence, but also are not afraid to innovate and act in a measured way on available evidence when the evidence base is still being developed. We will nurture within ourselves an ability to apply anticipatory awareness to be proactive when unforeseen challenges arrive. Lack of evidence will never mean lack of initiative.

5. This WHO staff recognizes both our strengths and our weaknesses. This WHO staff does not assume that the impressive gathering of expertise in our offices has the monopoly on health knowledge, nor should it. This WHO staff recognizes that in today’s world we must use our knowledge and expertise through our normative and convening functions to break out of the “gate keeping” mold, to become the catalysts for local knowledge and empowerment, in countries, in districts, in communities and in families. We see Member States explicitly investing in country-level
work or investing without earmarks so that the Organization is free to manage the budget in a way that will have the most impact on the ground.

6. To do this, we see a WHO that organizes itself in a way that reflects these values and goals. We see a decentralized WHO, in the classic business-school sense, in which the role of administration, whether in Geneva, Washington, Brazzaville, Copenhagen, Cairo, Delhi or Manila, is not to manage the day-to-day operations of the line workers, but to provide clear strategic direction, based on sound health strategy and evidence rather than political considerations, and to empower the line workers with the resources, the knowledge, the tools and the decision-making authority to catalyse positive change with our partners in-country. We see a WHO that practises joint planning and collaboration at all levels of the Organization from country office to headquarters and across technical programmes. We see an administration that does not see its staff as appendages to carry out the orders of some central mind, but as knowledge workers who are hired because they have the knowledge to act in their area of expertise and are empowered and funded to do so. We see a WHO administration that trusts its staff, and we see a staff that is proud of its Organization.

7. We recognize that this happens only when our daily practice encourages and rewards both evidence-based decision-making and informed innovation, even when that evidence points to problems, or a calculated risk leads to failure. We see an Organization that recognizes when multimillion dollar investments are not working, and, rather than spin the news or fall silent and hope staff simply stop bothering to complain and accept or ignore a failed initiative, that this Organization actively encourages open discussion and dialogue. This Organization does what it must to examine and learn from the mistakes made, and, in a fully transparent and accountable fashion, shares the result of the analysis publicly and commits itself to real constructive change. This Organization recognizes that, in order to promote transparency, accountability and evidence-based decision-making, we must practise it ourselves at all levels and in every area. We embrace and build on both our successes and our mistakes in equal measure and openness.

8. This Organization makes responsible choices. We recognize growing problems in advance and invest as necessary to manage them before they become crises. This Organization recognizes that the traditional boundaries of management and staff are less meaningful in an Organization where most staff are supervised by somebody and supervise someone else. This vision recognizes that we are all members of one Organization, and because we recognize that our goals and challenges are virtually identical, close collaboration on decision-making is the assumption on all critical decisions affecting staff. This Organization recognizes that an empowered staff does not undermine the authority of decision-makers, it simply gives them the tools to make better decisions.

9. This WHO is a model organization for all United Nations organizations and all health organizations in the world. We know that, in order for the Organization to be this model, each one of us must take personal responsibility to behave the way that reflects our agreed on values, from the Director-General down to our interns.

10. By achieving this model, our credibility and our power to influence positive change in health systems will increase manifold, and we will spend less time convincing others what must be done, as they will have no need of convincing. They will see by our example, and we can spend more time on getting down to work.

11. We now invite the Executive Board to comment on our vision and consider what actions we can take to achieve these ideals collectively and to make WHO more effective in today’s rapidly changing world.