Statement by the representative of the WHO staff associations

Mr Chairman, honourable members of the Executive Board, Dr Chan, delegates, and colleagues,

1. We would like to open our statement by expressing our gratitude for the excellent collaborative work in 2011 and by extending our best wishes for 2012 to our Director-General, Dr Margaret Chan, and to all Executive Board members. The WHO staff associations strongly believe that fruitful debate and consensus-building on important issues will pave the way for our Organization to overcome current difficulties and to meet the demands of Member States for renewed strategic WHO leadership in the global health arena. We appreciate your understanding that adequate time must be allocated for staff representatives to express the staff’s point of view and contribute to the reform process.

2. The WHO staff associations would like to start with the premise, succinctly articulated by Dr Chan, that “staff is the most valuable asset” of the Organization and with this common agreement we welcome every opportunity to actively engage with management to find solutions in these difficult times. We do so with a positive outlook and within the framework of the rights and responsibilities of international civil servants. Please allow me to reiterate that we do not pursue any “lobbying” activities to influence the work of WHO’s governing bodies. We adhere to the United Nations code of ethics and regard responding to queries from our governing bodies about our condition of work as part of our responsibility. We are sure that in the wisdom of your deliberations the distinguished members of the Executive Board already know this, but it is useful to put this fact clearly on the table first. We staff are committed to the mission of WHO. As the President of the headquarters Staff Association, I can safely say that I have not ever met a single staff member who has not put WHO’s goals and public health work first and foremost, and above any personal considerations. We are happy that the value of staff is recognized, appreciated and discussed with a view to improving WHO’s functions.

3. We also, in general, welcome the measures that WHO’s management has taken to address the budget deficit. In particular, the measures on “hedging” (in other words measures to protect WHO against currency fluctuations) to be taken for 2012, and more progressively in 2013, are most welcome. We also note, with regret, the lack of foresight by certain managers in dealing with the financial situation. In retrospect, if this precautionary measure had been taken in 2009, 2010 and 2011, we would be in a very different situation today, i.e. we would have less or no deficit. Instead, as a result of not having these measures in place, about 453 WHO fixed-term staff and about 120 short-term staff have experienced the cruel consequences of the financial crisis in 2011 and it is likely that another 100 to 200 staff in the coming biennium may be put at risk, which could have been otherwise avoided (see the details below of post abolitions as presented by the Director of the Department of human resources management during the last meeting of the Programme, Budget and Administration Committee of the Executive Board).
Distribution of total staff per category and organizational location currently assigned as of 31st December 2010

<table>
<thead>
<tr>
<th>Organization</th>
<th>Professional and higher category</th>
<th>National professional</th>
<th>General service</th>
<th>Positions abolished</th>
<th>Temporary staff with contract not renewed?</th>
<th>Additional positions that may be affected</th>
</tr>
</thead>
<tbody>
<tr>
<td>Headquarters</td>
<td>1 171</td>
<td>38</td>
<td>880</td>
<td>203</td>
<td>120</td>
<td>100–200</td>
</tr>
<tr>
<td>Africa</td>
<td>374</td>
<td>601</td>
<td>1 392</td>
<td>216</td>
<td>?</td>
<td>?</td>
</tr>
<tr>
<td>The Americas</td>
<td>90</td>
<td>5</td>
<td>53</td>
<td>?</td>
<td>?</td>
<td>?</td>
</tr>
<tr>
<td>South-East Asia</td>
<td>132</td>
<td>46</td>
<td>372</td>
<td>0</td>
<td>?</td>
<td>?</td>
</tr>
<tr>
<td>Europe</td>
<td>193</td>
<td>86</td>
<td>255</td>
<td>16</td>
<td>?</td>
<td>?</td>
</tr>
<tr>
<td>Eastern Mediterranean</td>
<td>167</td>
<td>48</td>
<td>481</td>
<td>5</td>
<td>?</td>
<td>?</td>
</tr>
<tr>
<td>Western Pacific</td>
<td>184</td>
<td>56</td>
<td>313</td>
<td>11</td>
<td>?</td>
<td>?</td>
</tr>
<tr>
<td>Total</td>
<td>2 311</td>
<td>880</td>
<td>3 746</td>
<td>453</td>
<td>120</td>
<td>100–200</td>
</tr>
</tbody>
</table>


(a) Source: WHO headquarters Staff Association, no accurate data are so far available and published by WHO.

4. We note that reforming WHO is definitely a way to prepare our Organization to meet new challenges, yet we must do this in such a way that it builds on and strengthens our assets and meets our unique mandate. We also must not confuse the issue by imagining that staff cuts are due solely to the global financial downturn. We believe that these cuts were also due to certain managerial shortcomings, poor resource mobilization, weak corporate communication efforts and ineffective planning, as well as lack of foresight and wisdom when the Organization was financially healthier. We also understood that the reform process started by asking the Director-General to review the financing of the Organization and to align as much as possible the programme priorities to the predictable budget as well as to introduce efficiency saving measures.

5. However, WHO management’s reaction to the budget deficit has been mainly to significantly downsize staff, and this started at the end of 2010 and is expected to continue during 2012. It is true that a vulnerability exercise was conducted and its process was published and discussed with the headquarters Staff Association. We understood that its aim was to align strategic directions and priorities against a predictable funding. We participated in this process and we expressed our concerns on several occasions as we did not accept the rationale of the staff cuts proposed but we were not listened to. We still believe that staff cuts are not the solution. When there is a budget deficit the first thing that comes to mind as a solution almost automatically is staff cuts. We question this. Staff are perceived as a burden and managed as a commodity. Staff are not an “expenditure item”. Staff are the “invisible human capital”. Actually, staff in a knowledge-based organization are visible and are an essential asset – WHO’s main resource for developing and implementing solutions towards global health challenges.

6. Job cuts are only a part of this picture, as natural attrition primarily due to retirement, but also to career mobility, is much more important in terms of numbers. Natural attrition alone will reduce staffing levels across the entire Organization. The same human resources report, document EB130/26 Add.1, mentions: “Current projections show that 16.2% of the workforce is due to retire within five years (Table 9 and Figure 10). In the professional and higher categories over the same
period the proportion is 22.2%; cumulatively, 29.0% of such staff members are due to retire in the next 10 years.” If we combine these projections with staff cuts this means WHO may lose about 40% of its senior technical expertise. If no emergency plan for retaining and recruiting staff is implemented to address gaps in the technical areas, WHO will be sorely pushed to meet the priorities as laid out by the WHO reform agenda.

7. In the same human resources report it was said that the “Secretariat needs to be able to manage the workforce proactively – on the one hand, adhering to the needs for a reduced workforce due to financial restrictions and, on the other hand, ensuring the systematic strengthening of priority programmes and clusters. The staff retirement projections show clearly that about 10% of the total workforce will retire per biennium, thus providing the Secretariat with a clear opportunity to decrease the headcount without making significant future layoffs.” Moreover, the statement made by Dr Mohammed Jama, the Assistant Director-General of the General Management Cluster during last week’s meeting of the Programme, Budget and Administration Committee indicated that “financial vulnerability has reduced from US$ 340 million down to US$ 100 million.”

8. Without emergency actions that retain and recruit staff, WHO will hardly be able to maintain its technical excellence, independence and neutrality which, as noted above, are considered as WHO’s flagship assets. Knowing the above challenges, the staff associations across WHO demand that management’s plans be seriously reviewed and our assertion is that the current proposals will not result in a more competitive, effective or efficient WHO. Planning to shift most of the workforce to the countries is not the best solution as some corporate and normative functions are unique to the global level and should remain at headquarters. On the contrary, they will seriously undermine some of WHO’s comparative advantages. Based on the challenges discussed, we as WHO staff associations would like to request the Executive Board and the management to:

- Review the staffing model proposed to ensure and maintain best conditions of services based on the principle of retaining and attracting the best staff. In the proposed new staffing model, the human resources vision is undermined by the need to reduce the financial burden of staffing without looking at the negative impact in terms of the quality of expertise that will be recruited and retained. WHO management indicated that United Nations salaries are no longer competitive. One obvious impact is that WHO will become a much less attractive employer for hiring the “right” level of expertise, contrary to the expectations of Member States.

- Reconsider some of the proposals put forward, such as the replacement of internationally recruited staff by national professional officers to carry out global functions. This policy is in blatant contradiction to the United Nations common goal of geographical diversity throughout the international civil service system and is against the Staff Rules as indicated in the WHO Manual. We support the use of national professional officers as recommended in the WHO Staff Rules and we do consider these staff as very valuable expertise that deserve the right to receive the same salary and benefits of internationally recruited staff when performing these international functions.

- Implement limited recruitment capacity and ensure the quality of recruitment to fill the gap. Knowing the best practices of recruitment within the Organization, the impact of the current wave of post abolitions, expected natural attrition, limited human resources capacity – as no additional investment has been made in this area – and the implementation of the reform agenda, it is expected that several activities will definitively impact the timeliness of human resources selection and recruitment processes. The quality of recruitment will be affected as there will not be enough resources to maintain quality and speed of recruitment. Rehiring will be more expensive: the Organization will have no choice but to engage in a massive
recruitment drive before long that will be more costly and time-consuming than if the Organization retained valuable in-house expertise. In the worst-case scenario, the Organization will have no choice but to recruit more expensive consultants or avail itself of more non-staff contracts – which are currently not even documented in the human resources annual report, as confirmed by the Director of the Department of human resources management, and which accounted for about US$ 500 million in the previous budget.

- Be aware of the danger of WHO not being in a position to meet Member States’ expectations. The Organization will not be able to implement the Programme budget that is currently being announced through the reform agenda. Nor will the Organization be able to make any meaningful strides towards achieving the Millennium Development Goals.

- Reconsider the decision to upgrade the Global Management System. In effect there is a difference of perception between high-level senior managers and staff about the effectiveness of the System. So far, no formal assessment has taken place of the real cost-effectiveness of the System since its launch in 2008. Now a further upgrade of the System is foreseen. We foresee increased staff time and costs in training and in processing transactions; we foresee extensive problems and delays in adjusting to a new system; we foresee levels of staff frustration rising in an environment where delivery levels will be expected to remain the same. As in 2008, the technical departments will be the ones to pick up the burden, without core resources. The current System is already slow, inflexible, unable to meet certain demands and is not sufficiently user-friendly to allow good programmatic and planning management. The staff view many aspects of the Global Management System as a burden and as of today the System has not increased transparency and accountability; on the contrary, it has decreased the efficiency of functioning technical programme teams.

- Support transparency, fairness and justice. Staff reductions have led to several procedural irregularities and the unfair treatment of well-serving staff. The cost-efficiency saving measures led to the abandoning of established procedures, such as allowing the staff associations to review post descriptions before they are published, which in turn has allowed opportunities for unfair treatment of well-serving staff, and for staff members to be singled out for special treatment or exclusion through manipulated job descriptions. Furthermore, the staff associations have increasingly not been fully consulted when decisions have been implemented that affect conditions of service. Where can staff turn? The first step for some is an investigative request to the Office of Internal Oversight Services, which is by definition and design, not independent. The first step for others is an appeal to the Board of Appeal, which is currently overburdened. Last year saw a doubling of new cases compared to 2010, with more than half of these directly related to the current downsizing. There are currently more than 150 cases pending within the office of the Headquarters’ Board of Appeal – about twice as many as in 2006 – with an average 18 months’ time frame before a case report is finalized. Even with human resources and headquarters Board of Appeal staff, and appointed and elected panel members, working hard, the number of new headquarters Board of Appeal cases is overwhelming and most of them get delayed. Remember: “justice delayed is justice denied.” To seek justice, the second step for some staff is a long, expensive procedure through the ILO Administrative Tribunal. We predict, based on experience, that investigations will either not follow due process, or that investigations will take several years with a risk that they are likely to be translated into enormous legal fees for the Organization. Just to remind you what the Director of the Department of human resources management reported during the last meeting of the Programme, Budget and Administration Committee: each case at the ILO Administrative Tribunal costs WHO management around US$ 20 000. If there is delay – and most of the cases are delayed – each one costs about US$ 40 000, without
counting staff time in managing such cases or the monetary awards based on a judgment if the staff member wins the case.

9. Based on the above, the staff associations propose that some urgent managerial decisions be taken:

- To retain WHO expertise by stopping planned downsizing in 2012. We recommend freezing all planned post abolitions and reviewing the staff levels due to natural attrition.

- To recommend to the Director-General that an automatic extension be granted of the reassignment period for all staff currently under reassignment.

- To recommend to the Department of human resources management that advance succession planning be introduced and enforced. This plan should consider the gaps in personnel that will be the outcome of the staff cuts and natural attrition expected.

- To review the staffing model to ensure its consistency with the United Nations system recommendations with the aim of maintaining within WHO the best prevailing United Nations conditions of services.

- To establish a central reserve or a fund in order to allow technical programmes to borrow funds and to deal with financial difficulties that may lead to staff cuts and the reduction of programme activities.

- To establish a central reserve or fund for entitlements to reduce the financial burden on technical programmes, facilitate transfers or reassignments of staff locally and globally and meet the Organization’s liability.

- To develop managers’ and staff members’ ability to initiate effective resource mobilization plans. The ability to raise funds should be a requirement when recruiting future managers. Managers today should be held accountable for this requirement and should take the necessary steps to develop this expertise rather than relying on “handouts”.

- To strengthen the accountability of WHO managers: whether a programme performs well or badly, obtains or loses resources including staff, retains or fires well-performing staff, some managers still feel they are not accountable for the Organization’s assets. The staff associations have repeatedly recommended measures to ensure that WHO hires and retains only good managers, managers who demonstrate the agreed WHO management competencies, which include showing respect for their staff and abiding by WHO rules and policies.

- To improve resource mobilization efforts and plan and initiate immediately a fundraising campaign to address priority issues. Why cannot we learn from other organizations that use innovative financing mechanisms?

- To promote the establishment of “one WHO” across all WHO regions by facilitating an inter-major offices flexible and fair rotation/mobility system that takes into consideration staff family and/or career development opportunities, to retain and build on internal expertise.
• To respect Staff Rules by discontinuing the malpractice of hiring national professional officers for functions they were never envisaged for in the first place. This is in direct violation of the WHO Manual provisions and of the tenets of the International Civil Service Commission.

• To ensure that appeals are handled without “undue” delay while the staff member is still employed and to give priority to those appeals that have resulted from the recent downsizing.

10. We the staff at WHO are proud of our Organization and of our contributions. We long to read only of WHO’s achievements in the field of public health and to know that we have contributed to these achievements. Today, WHO’s media image is poor and this in turn does not bode well for attracting funding or for building up staff morale. A strong WHO, with a clear vision for global health, will be to everyone’s advantage. Why not start by setting up two flagship, focused, time-limited health initiatives – initiatives that can appeal across low-, middle- and high-income countries – that would demonstrate that WHO still has its teeth? WHO relies on its staff to make a difference. However, an organization with staff looking over their shoulder, hoping to get their next contract or looking at other organizations where staff remain valued and where acquired rights and entitlements have not been eroded, will not be a healthy or stable organization.

11. We thank you for listening to our concerns and proposals and we turn to you to help re-create a WHO that is the undisputed leader in the global health arena.