Human resources: annual report

Report by the Director-General

INTRODUCTION

1. In addition to the workforce data as at 31 December 2021 made available on the WHO website on 22 April 2022 this report provides a summary of the trends in the workforce and of related activities with respect to the three pillars of the human resources strategy: attracting talent, retaining talent and fostering an enabling working environment. Major initiatives in human resources are an integral part of the WHO transformation agenda and are described in reports on the WHO transformation process. The human resources strategy aligns with the major transformation workstreams in the following areas: (1) an impact-focused, data-driven strategy addressing the alignment of the day-to-day work of all staff with the Thirteenth General Programme of Work, 2019–2023, through the performance management process; (2) “best in class” processes, which include recruitment and performance management; (3) a new, aligned, three-level operating model, with new service delivery models for human resources; and (4) measures to ensure a motivated and fit-for-purpose workforce, covering multiple initiatives across all three pillars, particularly in the areas of retaining talent and fostering an enabling working environment. In addition, 2021 was dedicated as the Year of the WHO Workforce, with a focus on activities and initiatives linked to the culture change objectives of the WHO transformation.

2. This report includes an Annex that proposes the introduction of a housing allowance for the Director-General by means of an amendment to the Director-General’s draft contract.  

TRENDS IN THE WORKFORCE

3. As at 31 December 2021, the total number of WHO staff members was 8688 (see Fig. 1 in this report and Table 1 in the workforce data available online), a 2.9% increase compared with the total as at 31 December 2020 (8447). Of the total, the percentage of staff members employed at each of the three levels of the Organization between December 2020 and December 2021 changed as follows: the percentage of staff employed at headquarters increased from 31.2% in December 2020 to 32.7% in December 2021; the percentage of staff employed at regional offices decreased from 24.5% in December 2020 to 24.1% in December 2021; and at country offices the percentage decreased to 43.2%, from 44.3% in December 2020 (Fig. 2). The relative increase in the proportion of positions at

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1 Available at https://www.who.int/publications/m/item/workforce-data-as-at-31-december-2021 (accessed 22 April 2022).

2 See also document A75/5.

3 All figures include staff in special programmes and collaborative arrangements hosted by WHO. They do not include staff working with the Pan American Health Organization, the International Agency for Research on Cancer or any agencies administered by WHO.
the headquarters level is due in part to the abolition of positions, particularly at the country level, due to the ramp-down of the Polio Eradication Initiative. The proportion of staff members holding long-term appointments in professional and higher categories increased during the same period. The distribution as at December 2021 (and December 2020) was as follows: 49.6% (48.2%) at headquarters, 30.4% (32%) in regional offices and 20% (19.8%) in country offices.

4. For the period from 1 January to 31 December 2021, staff costs amounted to US$ 1185 million or 32% of the Organization’s total expenditure of US$ 3718 million (39% for the period January–December 2020).

5. Regarding other contractual arrangements, the number of consultants and individuals on agreements for performance of work (see workforce data, Table 20) increased from 1674 full-time equivalents in January–December 2020 to 2107 in January–December 2021. At the same time, the number of individuals hired on special services agreements increased from 4408 in January–December 2020 to 5239 in January–December 2021.

Fig. 1. Distribution of WHO staff as at 31 December 2021, by major office
As at 31 December 2021, women accounted for 46.8% of staff members in the professional and higher categories holding long-term appointments (see Fig. 3 and workforce data, Table 3), representing an increase since December 2020 (45.9%). During the same period, the number of women at the P4 grade and above across the Organization increased from 43.5% in December 2020 to 44.2% in December 2021. Women accounted for 36.4% of staff at the P6, D1 and D2 grades as at 31 December 2021 – an increase compared with December 2020 (35.5%), while it is also noted that there has been an increase of 5 percentage points since 2017 (see Fig. 4). There has also been a notable increase since 2017 in the percentage of women at the P5 grade, from 40.3% as at July 2017 to 46% as at December 2021. As a result of the Director-General’s commitment to the goal of gender parity, the Secretariat is continuing to take steps to increase the number of qualified women on the roster for heads of country offices. As at 31 December 2021, 38.2% of heads of country offices were women, representing an improvement compared with December 2020 (37.1%).
Fig. 3. Percentage of women in the professional and higher categories, by major office

Fig. 4. Gender parity – trends over time from July 2017 to December 2021

<table>
<thead>
<tr>
<th>Indicator</th>
<th>As at July 2017</th>
<th>As at December 2017</th>
<th>As at July 2018</th>
<th>As at December 2018</th>
<th>As at July 2019</th>
<th>As at December 2019</th>
<th>As at July 2020</th>
<th>As at December 2020</th>
<th>As at July 2021</th>
<th>As at December 2021</th>
<th>Changes between July 2017 and December 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage of women in the professional and higher categories holding long-term appointments</td>
<td>43.7%</td>
<td>44.4%</td>
<td>44.7%</td>
<td>45.4%</td>
<td>45.6%</td>
<td>45.8%</td>
<td>46.2%</td>
<td>45.9%</td>
<td>46.4%</td>
<td>46.8%</td>
<td>Increase of 3.1 percentage points since July 2017</td>
</tr>
<tr>
<td>Percentage of women at the P4 grade and above</td>
<td>41.1%</td>
<td>41.9%</td>
<td>42.5%</td>
<td>43.4%</td>
<td>43.5%</td>
<td>43.5%</td>
<td>43.8%</td>
<td>43.5%</td>
<td>43.7%</td>
<td>44.2%</td>
<td>Increase of 3.1 percentage points since July 2017</td>
</tr>
<tr>
<td>Percentage of women as heads of country offices</td>
<td>35%</td>
<td>33.3%</td>
<td>33.1%</td>
<td>35.8%</td>
<td>39.3%</td>
<td>37.4%</td>
<td>37.9%</td>
<td>37.1%</td>
<td>38.7%</td>
<td>38.2%</td>
<td>Increase of 3.2 percentage points since July 2017</td>
</tr>
<tr>
<td>Percentage of women at the P6, D1 and D2 grades</td>
<td>31.4%</td>
<td>35.1%</td>
<td>37%</td>
<td>35.4%</td>
<td>37.5%</td>
<td>35.7%</td>
<td>36.1%</td>
<td>35.5%</td>
<td>35.8%</td>
<td>36.4%</td>
<td>Increase of 5 percentage points since July 2017</td>
</tr>
</tbody>
</table>
7. As at 31 December 2021, 29.9% of Member States (or 59 of the 197 Member States)\(^1\) were either unrepresented or underrepresented (see Fig. 5 and workforce data, Table 4). This percentage shows an improvement compared with 2020, when 30.1% of Member States were either unrepresented or underrepresented (59 of 196 Member States). Regarding changes in the composition, nine Member States moved from or to the desirable range in terms of representation.

Fig. 5. Distribution of WHO Member States as at 31 December 2021, by geographical representation

\(^1\) Including the three Associate Members.
### Fig. 6. Geographical representation – trends over time from July 2017 to December 2021

<table>
<thead>
<tr>
<th>Indicator</th>
<th>As at July 2017</th>
<th>As at December 2017</th>
<th>As at July 2018</th>
<th>As at December 2018</th>
<th>As at July 2019</th>
<th>As at December 2019</th>
<th>As at July 2020</th>
<th>As at December 2020</th>
<th>As at July 2021</th>
<th>As at December 2021</th>
<th>Changes between July 2017 and December 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage of Member States either unrepresented or underrepresented</td>
<td>32.1%</td>
<td>32.1%</td>
<td>31.6%</td>
<td>32.1%</td>
<td>31.6%</td>
<td>30.6%</td>
<td>30.1%</td>
<td>29.6%</td>
<td>29.6%</td>
<td>Decrease of 2.5 percentage points since July 2017</td>
<td></td>
</tr>
<tr>
<td>Percentage of staff in the professional and higher categories (including staff on temporary contracts) from developing countries</td>
<td>43%</td>
<td>43%</td>
<td>42.8%</td>
<td>42.5%</td>
<td>43.4%</td>
<td>44.5%</td>
<td>44.1%</td>
<td>44.2%</td>
<td>44.1%</td>
<td>Increase of 1.1 percentage points since July 2017</td>
<td></td>
</tr>
<tr>
<td>Percentage of staff in the professional and higher categories holding long-term appointments from developing countries</td>
<td>40.8%</td>
<td>40.7%</td>
<td>41.1%</td>
<td>41.1%</td>
<td>41.7%</td>
<td>42.6%</td>
<td>43.3%</td>
<td>43.8%</td>
<td>44.3%</td>
<td>Increase of 4.1 percentage points since July 2017</td>
<td></td>
</tr>
<tr>
<td>Organization-wide, percentage of staff members at the D1 and D2 levels from developing countries</td>
<td>32.2%</td>
<td>31.7%</td>
<td>30.8%</td>
<td>33.5%</td>
<td>33.8%</td>
<td>34.6%</td>
<td>35.9%</td>
<td>37.3%</td>
<td>38%</td>
<td>Increase of 6.9 percentage points since July 2017</td>
<td></td>
</tr>
<tr>
<td>Headquarters, percentage of staff members at the D1 and D2 levels from developing countries</td>
<td>12.5%</td>
<td>10.9%</td>
<td>13.8%</td>
<td>16.4%</td>
<td>15.9%</td>
<td>15.6%</td>
<td>19.1%</td>
<td>21.1%</td>
<td>18.7%</td>
<td>18.7%</td>
<td>Increase of 6.2 percentage points since July 2017</td>
</tr>
</tbody>
</table>

8. The proportion of staff in the professional and higher categories from developing countries, at the D1 and D2 levels in particular, has increased since July 2017. Specifically, between December 2020 and December 2021 the proportion of staff in the professional and higher categories from developing countries on long-term appointments has increased from 43.8% to 44.9% (Fig. 6). Organization-wide, the percentage of staff members at the D1 and D2 levels from developing countries has increased from 37.3% in December 2020 to 39.1% in December 2021. Figure 7 provides a comparison of the percentage of international professional staff from developing countries between July 2017 and December 2021, broken down by major office.

9. Human resources workforce data Table 11 shows the trends in applications from female candidates over time, while Table 11b shows the trends in the geographical representation category of candidates. These tables show that there has been a general increase in the percentage of female applicants over the past four years, but little progress in increasing applications from nationals of countries that are unrepresented or under-represented (bearing in mind that the categorization of countries themselves also changes over time). While significant efforts have been made across the Organization to bridge the gender gap, further expansion of sourcing and outreach efforts were initiated in 2021, including more investment in improving geographical representation (see paragraphs 11 to 16 below).
Fig. 7. Comparison of percentage of international professional staff from developing countries between July 2017 and December 2021, by major office

10. The number of senior management staff (P6 and above) on longer-term and temporary appointments has increased from 275 in July 2017 to 295 in December 2021 (+7%) (Fig. 8), reflecting the strategic direction of WHO’s transformation.

Fig. 8. Comparison of numbers of senior management staff between July 2017 and December 2021, by major office

<table>
<thead>
<tr>
<th>Major office</th>
<th>P6/D1</th>
<th>D2</th>
<th>Ungraded</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Africa</td>
<td>41</td>
<td>32</td>
<td>-22%</td>
<td>1</td>
</tr>
<tr>
<td>South-East Asia</td>
<td>23</td>
<td>22</td>
<td>-4%</td>
<td>2</td>
</tr>
<tr>
<td>Europe</td>
<td>25</td>
<td>28</td>
<td>12%</td>
<td>1</td>
</tr>
<tr>
<td>Eastern Mediterranean</td>
<td>28</td>
<td>29</td>
<td>4%</td>
<td>4</td>
</tr>
<tr>
<td>Western Pacific</td>
<td>16</td>
<td>13</td>
<td>-19%</td>
<td>2</td>
</tr>
<tr>
<td>Headquarters</td>
<td>86</td>
<td>79</td>
<td>-8%</td>
<td>29</td>
</tr>
<tr>
<td>Total</td>
<td>219</td>
<td>203</td>
<td>-7%</td>
<td>39</td>
</tr>
</tbody>
</table>
11. To date, outreach initiatives have been implemented in collaboration with Member States to improve geographical representation and gender parity. Targeted efforts continue through career counselling, mentorship and leadership pathway programmes to build the capacities of female staff members at junior levels and to prepare them for higher-level managerial positions. Agreements with external service providers are being used to conduct targeted outreach and recruitment campaigns in order to improve performance against diversity targets, in particular with respect to gender parity and improving geographical representation.

12. Starting in late 2020, the WHO Secretariat expanded its work with Member States and external service providers to participate in virtual career fairs with the aim of reaching out to female candidates, candidates from under-represented and unrepresented countries and young professionals.

13. In 2021, the Secretariat participated in nine virtual career events specifically targeting women, young professionals and/or nationals from under-represented countries. The Department of Human Resources and Talent Management participates in the WHO visitors service and provides information on employment and the young professionals programmes upon request.

14. In April 2021, the new global Careers at WHO website was launched to provide an engaging narrative outlining WHO’s working environment, categories of work and contracts, talent programmes and career development opportunities. The site (https://www.who.int/careers) presents WHO as an attractive employer by providing information on WHO’s public health mission, core values and the working environment. It has intuitive and simple navigation and informs prospective candidates about WHO’s areas of work, minimum employment requirements, contract types and descriptions, and also provides links to talent programmes. The careers site content is available in all WHO languages, includes all global generic careers content and is seamlessly linked to and from all WHO regional and country extranet sites and the WHO vacancy site. The site adheres to available accessibility recommendations and is designed to be inclusive and diverse. It showcases WHO workforce members from all over the world, presenting potential candidates from unrepresented or under-represented Member States, young people and women with a diverse workforce and real testimonials about their motivational journeys to and through WHO.

15. WHO vacancies continue to be shared widely by human resources and WHO technical staff, including on social media channels and platforms and through regular information updates to United Nations missions in Geneva and technical networks. For selected positions, external service providers have supported targeted outreach. These activities and career events are being evaluated in order to focus on measures that produce the best results.

16. In the second half of 2021, WHO launched the Young Professionals Programme, targeting candidates no older than 35 years of age from least developed countries. Fourteen vacancies were published in November and December 2021. Outreach was undertaken via the WHO Instagram, Twitter and LinkedIn sites, including outreach to the heads of country offices in the 46 target countries, the WHO library and technical networks. In addition, a career event was organized by ImpactPool specifically for the Young Professionals Programme. The event was open exclusively to eligible candidates and included workshops on how to write CVs, how to navigate WHO selection processes and how to prepare for competency-based interviews. It also allowed for one-on-one interactions with human resources specialists. The impact of this event is expected to go beyond the YPP in preparing
candidates for WHO selections at large. However, the immediate impact was that the number of eligible female applicants for the first six vacancies in the Young Professionals Programme increased from 31%, just before the career event, to 38% at the time of vacancy closure. The number of eligible candidates based on nationality and age increased from 59% to 68% in that same period, while 42 of 46 eligible countries were represented in the pool of applicants. The first cohort of these young professionals is expected to start with WHO in the first half of 2022. The outreach conducted for the Young Professionals Programme will be used to inform outreach efforts more broadly in 2022.

17. WHO completed the update of its policy on the employment of persons with disabilities, which was published in early 2022. The policy aims to facilitate equality of access to employment, advancement and retention in WHO for persons with disabilities, including the provision of reasonable accommodation, recognizing that it is in the interest of WHO to recruit and maintain a diverse and skilled workforce that is representative of the diverse nature of society, which includes persons with disabilities. The policy provides for the full and equal enjoyment of all human rights and freedom for all persons with disabilities without discrimination of any kind and is linked to the WHO Diversity, Equity and Inclusion agenda for the WHO workforce.

Recruitment and selection

18. As part of the WHO transformation agenda, an analysis of the recruitment process was conducted to identify areas that could be streamlined and improved. A pilot recruitment initiative was launched in early 2019, with the aim of reducing overall time-to-hire from an average of 156 calendar days to 112 calendar days (or 80 working days), primarily though the improvement of candidate screening services. By 2020, improvements were seen, with an average time-to-hire reduction to 126 calendar days and a range of 36 to 216 calendar days. The lessons learned from the pilot initiative have been documented and the final report has been submitted, accompanied by recommendations for the next phase of the pilot, which will explore additional new tools, including artificial intelligence and psychometric testing, as well as approaches to address bottlenecks.

19. Outside of the cohort of recruitments at headquarters level included in the pilot, the average time to recruit globally was 187 calendar days in both 2019 and 2020, with a range of 17 to 963 days in 2019 and a range of 25 to 627 days in 2020. The global average time to recruit decreased in 2021 to 141 days, with a range of 29 to 376 days, which may be due in part to the application of lessons learned from the pilot experience, with further analysis of 2021 data to be undertaken.

20. The selection processes to fill positions on the newly-established Global Sourcing and Recruitment team were ongoing in the second half of 2021. The new team is currently undergoing training and is expected to be fully operational in the second half of 2022.

GLOBAL INTERNSHIP PROGRAMME

21. As requested by the Health Assembly in resolution WHA71.13 (2018), the human resources annual report includes statistics on applicants’ and accepted interns’ demographic data, including gender and country of origin. Statistics on WHO interns are normally provided in Tables 16, 17 and 18 in the workforce data. In view of the coronavirus disease (COVID-19) global pandemic, the WHO internship programme was put on hold in 2020 and has remained so to date. In the absence of intern recruitment in 2021, Tables 16, 17 and 18 have been intentionally left blank in this report.
22. Nonetheless, it remains important to review the progress made in implementing resolution WHA71.13 between 2018 and 2021. During the temporary suspension of the programme (from 2020 to date), work has continued to update procedures and processes to ensure that the programme is fit for purpose once it is able to resume, as well as to ensure improved alignment across all WHO regions. Areas that are reviewed and updated on an ongoing basis include: the WHO eManual; financial standard operating procedures for living allowances and daily lunch vouchers; medical insurance; recruitment and onboarding processes; recruitment information technology platforms; internal and external webpages; communications; training and induction; and occupational safety, health and well-being.

23. At the time of writing, the suspension remains in effect and WHO is not recommending offering remote internships. Once the internship programme is able to resume, all internship opportunities will be announced on the external website.

RETYING TALENT

Performance management

24. Performance management is essential to building the workforce of excellence required to achieve the ambitious goals set out in the Thirteenth General Programme of Work, 2019–2023. Effective performance management is based on a strong performance culture and a healthy workplace ecosystem, supported by individual and management capabilities and accountability. An analytical review (with a report issued in March 2019 as one of the process analyses conducted as part of the transformation process) of WHO’s practice within key areas of performance management revealed a number of challenges when benchmarked against other organizations.

25. In 2021, the implementation of recommendations arising from the March 2019 report continued. The Team Objective in the Performance Management Development System was made mandatory and was aligned with the Respectful Workplace theme. Staff members and supervisors continued to set objectives linked to the Thirteenth General Programme of Work, 2019–2023. The Awards for Excellence Programme 2021 was successfully implemented in December 2021.

26. The Department of Human Resources and Talent Management launched a request for proposal for a performance management audit at the global level in August 2021. The objective is to review all related policies, systems and processes, through consultation at all three levels of the Organization, and to take corrective actions based on lessons learned. This review will also take into consideration the recommendations made to the Seventy-second World Health Assembly in 2019 by the Independent Oversight and Advisory Committee for the WHO Health Emergencies Programme,1 as well as those made in the report in 2021 of the Independent Expert Oversight Advisory Committee on its thirty-first and thirty-second meetings.2 The evaluation committee has reviewed the bids received and submitted its recommendations to senior management. The audit is expected to start in April and end in the third quarter of 2022.

27. The Business Management System project includes a module on performance management and working sessions in this area with the new enterprise resource planning service provider are ongoing.

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1 See document A72/6.
2 Document EBPBAC33/2.
This module will replace the existing tool (eWork) and its design will be informed by the global performance management audit.

**Staff learning and development**

28. The Leadership Pathways programme, led by the African Region, continues to be implemented. In 2021, a cohort exclusively for francophone female staff was held and the programme was rolled out in the European Region. Implementation in other major offices is planned but was delayed due to the COVID-19 pandemic.

29. During the biennium 2020–2021, WHO has offered the following leadership courses organized by the United Nations System Staff College to staff members at different levels worldwide:

- Executive Management Programme: 44 senior managers at P5 level and above;
- Leadership, Women and the United Nations: 71 female staff members at P4/P5 level;
- United Nations Emerging Leaders Experience: 33 staff members at the national professional officer, P2 and P3 levels; and
- Leadership Skills for Programme Support and Administrative Functions: 55 staff members at administrative support level.

30. Under the United Nations System Staff College’s initiative for administrative staff, 143 were staff members given access to online and virtual training courses in the following areas: delivering engaging live virtual training; effective writing skills; fundamentals of knowledge management; leadership skills for programme support and administrative functions; pursuing your career in the UN; supervisory skills: managing people and performance; trainer essential skills; and virtual events facilitation skills for programme support and administrative functions. All United Nations System Staff College programmes will continue in 2022.

31. In addition, at the end of 2021, the Global Learning and Development Committee has approved 23 global and 35 regional learning initiatives for the biennium 2022–2023. The global learning initiatives include the areas of Chartered Institute of Personnel and Development courses for human resources professionals; project management; access to more than 5000 short courses on LinkedIn Learning platform; global procurement; performance management; coaching for managers; and disability awareness and inclusion. Regional initiatives include capacity-building for WHO Representatives; resource mobilization and donor engagement; country strategic planning; and conflict management.

32. For mandatory training, WHO’s compliance rate is as follows:

- Prevention of sexual exploitation and abuse (PSEA) training: assigned on 3 November 2021 to all members of the WHO workforce (more than 15 000 individuals), who were required to complete the training by 3 February 2022. By 31 December 2021, 5671 staff and non-staff had already completed the training;
- United Nations online training course entitled “To serve with pride: zero tolerance for sexual exploitation and abuse” (92.5% compliance); it should be noted that the course was decommissioned in October 2021 and was replaced by the above-mentioned PSEA course;
• United Nations training course entitled “Prevention of harassment, sexual harassment and abuse of authority” (90% compliance); it should be noted that the course was decommissioned in January 2021 and was replaced in March 2022 by a new course entitled “United to Respect: preventing sexual harassment and other prohibited conduct.”;

• United Nations BSAFE security awareness training course (completed by more than 12,260 members of the workforce to date);

• Cybersecurity essentials and preventing phishing training course (89% compliance);

• Cybersecurity refresher training course (84% compliance).

33. Future mandatory training initiatives comprise the WHO United to Respect mandatory training (to be issued during the first quarter of 2022) and the WHO Ethics Empowerment mandatory training (to be issued during the fourth quarter of 2022).

34. During the biennium 2020–2021, 3,225 staff members participated in Arabic, Chinese, English, French, German, Portuguese, Russian and Spanish language courses: 40% of participants were based in WHO headquarters, 23% in the African Region, 13% in the South-East Asia Region, 12% in the Eastern Mediterranean Region and 6% in the European Region and the Western Pacific Region, respectively. The language course catalogue has been expanded, with new topics and delivery formats. About 300 staff have participated in intensive courses and 135 took part in special training courses focusing on communication-related soft skills. Through the Global Language Programme, 236 candidates have participated in Language Proficiency Examinations in 2020 and 2021, an increase of 27% in the number of candidates as compared with the previous biennium.

35. Due to the COVID-19 situation, since 2020, the headquarters induction programme has been delivered online. Under these circumstances, it was necessary to readjust the programme to a virtual environment and reduce the length of the sessions. This presented opportunities as well: during the biennium 2020–2021, there were no restrictions in terms of capacity and an average of 75 participants were invited to participate in each of the sessions, while only 20–30 staff were invited to the face-to-face induction programmes in previous years. Also, as sessions are recorded, participants can view them if they are unable to participate live.

36. A consultancy company was recruited in December 2021 to roll out a 360 degree feedback process as a staff development exercise globally in order to provide the workforce with an opportunity to build on their strengths and realize their full potential. The exercise, which is part of the WHO transformation journey, aims at improving organizational effectiveness, transparency and performance. It is expected that the process will serve to build a culture of trust and feedback across the Organization, will strengthen performance and accountability at all levels and will provide staff with valuable information for learning and development purposes. The process will be rolled out at the end of the first quarter of 2022 in a phased approach, with the first cohort of staff represented by all Directors at headquarters and a team of up to seven people from each department. The exercise will involve communication tools and information sessions with all staff prior to the launch of the 360 degree feedback process. Following the receipt of the feedback, a report will be made available to each staff member and an individual debriefing session will be held with an external consultant on the results contained in the report.
Mentoring

37. The WHO global mentoring programme is part of an organizational development approach to support staff in career development, on-the-job learning, knowledge-sharing and capacity-building. The number of mentors currently available is 177, with staff of all grades and from all WHO regions participating in the programme. Training and briefing sessions for mentors in support of “confident career conversations” with mentees have continued to facilitate career development discussions.

38. Since January 2021, 42 staff have started a mentoring relationship. Many of these mentor pairs received training and guidance through online workshops offered by the Career Management and Development Team. In 2021, collaborative mentoring initiatives have also been conducted: in February 2021, thanks to a collaboration with the United Nations Secretariat, an initial cohort of 25 WHO staff members were offered the opportunity to take part in the United Nations Together Mentoring programme, thus expanding the networking and development opportunities for our staff members throughout the world. In March 2021, WHO mentors and mentees joined the International Training Centre Mentoring Programme for Women for the first time. This programme aims to increase gender parity and empower women at all stages of their careers through one-to-one mentoring, mentoring circles and various learning events and workshops offered to mentees.

39. In the African Region, complementary developmental programmes targeting staff in non-leadership positions were designed to strengthen organizational effectiveness, transform the organizational culture and establish a robust leadership programme. Two people-centred initiatives have since been developed. The first of these is the WHO Regional Office for Africa’s mentorship programme, under which senior or more experienced staff support junior colleagues’ professional development and help to enhance their performance. The objectives of the programme are to strengthen collaboration among staff and to empower junior staff. The first cohort (July–December 2020) of 33 senior staff mentors was successfully trained and paired with 65 junior staff mentees. The mentorship initiative is a six-month programme conducted using a virtual platform. A second cohort joined the programme in February 2021. A total of 115 mentors (including staff from other regions) and 249 mentees have been trained and paired on the basis of their selected individual and professional values. The second initiative is the Team Performance Programme. It is based on the WHO competencies framework and consists of 32 training modules and individual coaching sessions. The programme aims to develop high-performing teams and enhance collaboration within and across technical areas in the Regional Office and country offices in the African Region. To date, 58 staff members have benefited from this capacity-building initiative. Four workshops and 30 individual coaching sessions have been delivered to 21 technical and operational staff.

Career pathways and career development

40. A high-level career management framework has been established, focusing on two potential career streams in WHO: public health and operations. The input and feedback received through a global survey sent out to the entire WHO workforce in February/March 2021 has been used to map out illustrative examples of career paths in these two main career streams. An unprecedented number of staff members (3585) from across all major offices responded to the survey and a report on its main outcomes was shared in July 2021 with the Director-General, senior management and the entire WHO workforce. Interviews with directors in the operational career stream started in October 2021 and will be followed by focus group discussions with staff representatives from the three levels of the Organization with a view to mapping out the career paths in further detail. In order to keep all WHO staff updated on the progress made in this area, five online career pathways and development newsletters were sent out to the entire workforce throughout the course of 2021.
41. In 2021, career management activities, coaching, mentoring, emotional intelligence training and team-building sessions, as well as career counselling, continued to be offered remotely, facilitating a truly global reach. Based on the recommendations of the 2019 task force on career pathways and capacity-building, a new career development programme entitled “Advance” was introduced and delivered twice in 2021 to promote women’s leadership while addressing the specific career development needs and challenges of female national professional officers and general service staff. The programme is complemented by coaching support provided by a group of WHO internally qualified coaches. The programme received an award for innovation in staff engagement at the Career Development Roundtable held in Milan in December 2021 and new cohorts will be rolled out in 2022.

42. Five online and interactive masterclasses with internationally renowned speakers were offered in 2021, allowing more than 2000 staff globally to actively take part in them and be exposed to topics related to nurturing a culture of respect at work, leadership, communication and change management skills.

43. A talent management platform, which will be integrated into the new enterprise resource planning system, has been selected, with the capacity to meet the requirements of talent pool management. The business process optimization phase has started, during which key requirements, technical features and process steps will be defined.

Mobility

44. The number of staff members in the professional and higher categories holding long-term appointments who moved from one duty station to another for the period January–December 2021 stands at 225, exceeding the total of 162 for the period January–December 2020 (see workforce data, Tables 14 and 15). There has been a decrease in the percentage of moves from one major office to another: 38% of moves in 2021, compared with 47% of total moves in 2020.

45. In April 2019, a task force on mobility, comprising staff members from all three levels of the Organization, was established by the Director-General. The goal of the task force was to develop guidelines on the mandatory mobility practices outlined in WHO’s geographical mobility policy. The task force carried out extensive consultations with staff members, conducted a benchmarking exercise against the policies and practices of other United Nations agencies and partners, and prepared recommendations. The recommendations were reviewed by WHO’s global human resources community and the Global Staff/Management Council and served as a basis for updating the geographical mobility policy for the consideration of the Global Policy Group. Additional investments were made in improving the human resources dashboard tool for mobility, which provides up-to-date information on staff members and their mobility data.

46. A simulation exercise was launched in October 2020 to validate the accuracy of the data currently available on staff and positions and test implementation of the major components of the proposed policy and governance mechanisms. In early October 2020, a meeting for all staff on mobility was followed by an invitation to participate in the simulation exercise offered to 1051 staff members around the world who had reached or exceeded the standard duration of their assignments. Of those, 128 staff members accepted the invitation and participated in the application and deferral processes between November 2020 and January 2021. The Deferrals Subcommittee met in the second quarter of 2021 to refer the simulated deferral requests and presented their recommendations to the Mobility Advisory Board. The Mobility Advisory Board met in the fourth quarter of 2021 to make recommendations on simulated placements and to formulate feedback on the simulation exercise. A total of 65 simulated placements were made based on the principle of achieving the best fit for the
Organization as well as for the concerned staff members. The extensive feedback received from the staff members participating in the simulation exercise will be included in the final report and used to inform the implementation plan. The simulation was concluded in December 2021 and the lessons learned and recommendations from the simulation exercise will be reported in 2022.

ENABLING WORKING ENVIRONMENT

Diversity, equity and inclusion

In 2020, the first draft of a diversity, equity and inclusion approach for the WHO workforce and an associated action plan were produced. The purpose of the approach is to lay the foundations for measures to attract and retain a diverse workforce and create a work environment that is welcoming to all, where everyone feels valued and can perform at their best. The Organization has engaged diversity, equity and inclusion experts to advise WHO in this area and to guide the Listen, Learn and Act Together (LLAT) Initiative. The approach and action plan have undergone additional review to align them with the advice provided by experts. Publication of the first version of the approach and action plan is planned for 2022 and further updates will be informed by the outcomes of the LLAT Initiative.

Prevention of abusive conduct, including sexual harassment

In March 2021, the WHO policy on preventing and addressing abusive conduct was adopted, covering harassment, sexual harassment, discrimination and abuse of authority (collectively, “abusive conduct”). The policy, which applies to all staff members, non-staff personnel and other individuals who work at WHO, strengthens the coherence of the complaints process, while taking into account the need to pay particular attention to and escalate allegations relating to sexual harassment. Since the adoption of the policy, the implementation plan is being rolled out and includes the development of a robust communication campaign and the dissemination of new communication materials and resources that regularly remind the members of the workforce of their duties in preventing and addressing abusive conduct. A code of conduct for external participants in WHO events is available and sets out participants’ obligations with regard to abusive conduct and the consequences of engaging in such conduct. New training sessions, both optional and mandatory, tailored to the needs of different audiences, were developed and are being delivered across the three levels of the Organization. Particular emphasis is being placed on background verification through, in addition to other tools, the use of ClearCheck, a United Nations system-wide electronic database that permits the screening of candidates and the sharing of, among other things, information on former personnel against whom allegations of sexual harassment or sexual exploitation and abuse were substantiated. Moreover, a system was established to ensure the implementation of the policy’s prevention measures in all offices. In addition, action is being taken in coordination with the department responsible for prevention and response to sexual misconduct in order to build institutional capacity to ensure the effective prevention of and response to sexual exploitation and abuse and sexual harassment.

Internal justice system

The Secretariat continues to monitor the reform of the internal justice system launched in 2016; the resulting improvements have included a greater emphasis on the informal resolution of disputes, which has significantly reduced the number of appeals. The Secretariat looks forward to a review of the internal justice system reforms of 2016, with a view to achieving further improvements based on the lessons learned. The Secretariat has selected a consultant to review the relevance, efficiency, effectiveness and independence of the internal justice system. The review process started on 17 January 2022 and will conclude on 17 April 2022. In addition, the Joint Inspection Unit has
commenced a review of the internal justice systems of organizations within the United Nations system for the period September 2021–December 2022, with a view to mapping approaches to internal justice mechanisms and assessing the adequacy and capacity of such mechanisms to deliver on the objectives set out in the applicable regulatory frameworks.

Flexible working arrangements

50. Guided by the framework prepared by the WHO task force established by the Director-General to review flexible working arrangements and endorsed by the Global Policy Group in May 2021, the Department of Human Resources and Talent Management has developed a draft policy to introduce a holistic approach to implementing flexible working arrangements across all levels of the Organization. The policy is currently at the final stage of the formal consultation and approval process with the aim of starting its implementation during the third quarter of 2022, subject to necessary system enhancements and accounting for major office specificities. Supporting measures for the launch are under preparation.

Contractual modalities

51. In November 2020, a three-level global task force was established to review the use of WHO’s existing contractual arrangements to: determine how these arrangements can be designed, adapted or used more effectively; establish how the related processes can be further improved to support the business needs of the Organization; support hiring managers in choosing the approach that best meets their needs; and ensure that WHO’s working environment is supportive and enabling, while remaining productive and responsive to the needs of the workforce and key stakeholders. The task force is expected to complete its work and deliver recommendations in 2022.

Human Resources Global Operations

52. Human Resources Global Operations is an integral part of the Human Resources and Talent Management Department, comprising a dedicated human resources service centre operating from the Global Service Centre in Kuala Lumpur. Human Resources Global Operations plays a significant role in the Secretariat’s efforts to modernize and standardize WHO’s human resources services.

53. In addition to regular transaction processing services during 2021, Human Resources Global Operations continued to provide support to all the transition measures related to the COVID-19 pandemic. Multiple complex business scenarios were addressed to ensure smooth operations during these challenging circumstances.

54. Improvements and new services introduced in 2021 by Human Resources Global Operations includes measures to enhance WHO’s recruitment portal, Stellis, to separate selection and onboarding services in order to ensure data security and the segregation of duties; onboarding and step determination services for headquarters operations, with potential for expansion to other major offices; and a dedicated service desk for the Joint United Nations Programme on HIV/AIDS, providing services related to appointments, separation and statutory travel. For Geneva-based WHO staff members, Human Resources Global Operations now provides Organization-assisted shipment services and personalized entitlement induction services are scheduled to be introduced for new WHO staff. Moreover, Human Resources Global Operations now coordinates the updated online exit survey for all staff members leaving the Organization and is accumulating important data for future decision-making and policy formulation.
Staff health and well-being

55. The health and well-being of the workforce underpins the Organization’s ability to achieve its strategic goals and are essential components of organizational success. Recognizing that healthy organizations achieve more, WHO is aligning its health and well-being strategy with its new operating model at all levels of the Organization to ensure a healthy work environment for all.

56. To achieve a healthy working environment, WHO’s Department of Staff Health and Wellbeing has contributed to various programmes and initiatives, including the United Nations Medical Directors Network; the United Nations System-wide Forum on Occupational Health and Safety, chaired by WHO; the revitalization and rebranding of the Organization’s Health, Safety and Well-Being Committee; and the WHO Mental Health Task Force to implement the United Nations Mental Health and Well-Being Strategy.

57. In 2021, the Mental Health Task Force proposed and facilitated activities to support and promote mental health at the workplace. Individual support, interactive webinars and support to teams on a range of topics were facilitated. The Task Force has commissioned the development of an application to provide well-being resources to the WHO Workforce, which will be launched in 2022.

58. The Department of Staff Health and Wellbeing plays an essential role in outbreak and emergency response activities by protecting and promoting the health and well-being of WHO’s global workforce. During the current COVID-19 pandemic, the Department has contributed to business continuity planning at WHO headquarters; worked with technical experts, human resources, building management and communications partners to develop occupational safety and health measures and guidance; and offered ongoing medical, psychological and social support to personnel, including contact-tracing and additional measures to protect and promote employee health during the COVID-19 pandemic. During the pandemic, the Department continued to provide support other Grade 3 emergencies, including in Afghanistan, Democratic Republic of the Congo, Ethiopia (Tigray and northern Ethiopia), and Guinea.

59. In addition, as part of the global COVID-19 response, the Department of Staff Health and Wellbeing has taken the lead within the United Nations System Task Force on Medical Evacuations (MEDEVACs) to establish a MEDEVAC Medical Coordination Unit. The 24/7 MEDEVAC system aims to support United Nations and humanitarian aid workers to stay and deliver their mandates during the pandemic. Since May 2020, the Unit has conducted 445 MEDEVACs from 70 countries in all six WHO regions. The Task Force has recently extended the COVID-19 MEDEVAC mechanism until December 2022, subject to quarterly review.

60. The Department of Staff Health and Wellbeing continues to provide counselling and support prior to, during and after deployment. Despite the progress, additional human and financial resources are required in order to ensure equal support for the WHO workforce across the three levels of the Organization.

ACTION BY THE HEALTH ASSEMBLY

61. The Health Assembly is invited to note the report and to consider the proposed application of a housing allowance for the Director-General, presented in the Annex, recognizing the corresponding amendment proposed to the draft contract of the Director-General, contained in document A75/5, in respect of a proposed amount of US$ 7000 per month.
ANNEX

HOUSING ALLOWANCE FOR THE DIRECTOR-GENERAL

BACKGROUND

1. A housing allowance is one element of the compensation package that may be provided to executive heads of the organizations of the United Nations system. It is payable in addition to the net salary plus post adjustment and representation allowance and replaces the rental subsidy that is available to all international staff. The form and amount are approved by the relevant governing bodies.

WHO SITUATION

2. Pursuant to resolution WHA15.4 (1962), the Executive Board at its thirty-first session considered a report on housing allowance or housing for the Director-General,¹ and adopted resolution EB31.R23 (1963), in which the Board decided to keep the matter under review for the time being and requested the Director-General to prepare a further report on the subject as such time as more specific recommendations could be made. Pending submission of such a report, the general provisions for rental subsidies have been applied instead.

3. These provisions foresee that the reasonable maximum rent level (i.e. the maximum rent taken into account for purposes of calculating the individual rental subsidy amount) is increased by 20% for staff members at the level of Assistant Director-General and above (eManual III.3.14.240). The actual monthly amounts payable under the rental subsidy scheme depend other than on salary, on the family size and number of bedrooms authorized accordingly.

4. In the past, no or only very marginal rental subsidy payments resulted from this scheme and were paid to the Director-General. The current Director-General has not been eligible for a rental subsidy to date.

SITUATION IN OTHER UNITED NATIONS ORGANIZATIONS

5. Across duty stations, United Nations organizations use a variety of means to support the rental accommodation of executive heads, including the following: provision of accommodation directly; rental subsidies in accordance with United Nations common system entitlements; separate housing allowances; and the full payment of rent. There are, however, some United Nations organizations that provide no support. As at January 2021, the following list provides an overview in respect of allowances provided to executive heads of other specialized agencies:

- FAO: directly rents appropriate housing accommodation and pays related expenses
- ILO: provides 100% of monthly rent and fixed charges
- UNESCO: provides a flat and covers related expenses
- ITU, WIPO, UNIDO, UNWTO: provide a housing allowance

¹ Document EB31/32.
- IFAD, UPU, WMO: provide a rental subsidy
- ICAO, IMF, IMO, World Bank Group: no housing allowance is indicated

6. Specialized agencies that are comparable to WHO in terms either of their size and complexity or of their location provide housing allowances or cover housing costs directly for their executive heads as follows:

<table>
<thead>
<tr>
<th>Agency</th>
<th>Annual Amount Original Currency</th>
<th>Annual Amount US dollars</th>
<th>Monthly Amount US dollars</th>
</tr>
</thead>
<tbody>
<tr>
<td>FAO</td>
<td>€ 180 000 (max)</td>
<td>US$ 200 160 (max)</td>
<td>US$ 16 680 (max)</td>
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<tr>
<td>ILO</td>
<td>Sw.fr 144 000 (max)</td>
<td>US$ 156 769 (max)</td>
<td>US$ 13 064 (max)</td>
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<tr>
<td>WIPO</td>
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<td>US$ 83 986</td>
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<td>ITU</td>
<td>Sw.fr 71 400</td>
<td>US$ 77 731</td>
<td>US$ 6478</td>
</tr>
</tbody>
</table>

Note: based on exchange rates as at 1 March 2022.

7. Accordingly, a housing allowance in the amount of US$ 7000 per month is being proposed for the Director-General of the WHO, in line with practice in other comparable specialized agencies.