

REPORT OF THE STANDING COMMITTEE ON SOCIAL SECURITY/OCCUPATIONAL HEALTH AND SAFETY

Introduction

1. The Standing Committee on Social Security/Occupational Health and Safety (SocSec – see Appendix I for participants) met virtually on 8 March 2022 and face to face on 25, 27 and 28 April to pursue its agenda. It elected Michelle Delinde (CTBTO) and Andrew Brown (ICAO) rapporteurs.
2. SocSec discussed the actions taken to implement the [decisions](#) of the 74th FICSA Council related to its focus areas.

Update on the [UN Mental Health and Well-Being Strategy](#)

3. The UN Mental Health and Well-Being Implementation Board was close to finalizing a template to support staff representatives in helping to implement the Strategy in their organizations. The FICSA ExCom would continue its active involvement in the Implementation Board. Activities undertaken during Mental Health Month (October 2021) included training for managers deployed across the UN system. All related documents and links can be found on the FICSA website, as well as FICSA communications on this topic.
4. Staff representatives need to ensure the implementation of the UN Strategy and encourage efforts to improve and support staff in this regard. SocSec members were encouraged to provide the FICSA ExCom with feedback about the implementation of the Strategy in their organizations, as well as how implementation could be improved, and any issues of concern as well as good practice.
5. The discussion included the example of what ICAO had done to provide virtual support to staff experiencing stress, including meditation and breathing techniques, and PAHO/WHO's efforts to implement the Strategy. It would be important to investigate how insurance plans supported mental health and wellbeing.
6. Key elements in implementation included taking a holistic approach to staff mental health and well-being, which would require the revision of all HR policies and health insurance plans to improve and support staff mental health and wellbeing; treating mental health equitably with physical health; and campaigning not only for treatment for mental health conditions but also emphasizing prevention, the recognition of cultural differences and improving the work environment to counter harassment and bullying. Training courses on the Strategy, available to all staff, needed to include psychological first aid, stress management and mindfulness.
7. While all UN-system staff could access psychosocial support via the United Nations Department of Safety and Security (UNDSS) without a referral, there were not enough staff

counsellors to respond to the increased demand. Staff needed to understand the options available to them within their own organizations, to which staff representatives could help to guide them.

Recommendation

8. SocSec recommended that the FICSA Executive Committee should continue active participation in the UN Mental Health and Well-Being Implementation Board, and share the guidelines for the implementation of the [UN Mental Health and Well-Being Strategy](#) with the FICSA membership once finalized.

UN Joint Staff Pension Fund (UNJSPF)

9. The UNJSPF had agreed to provide training to FICSA members, and an “Ask the FICSA Expert” session would be organized on this topic in the coming months. UNJSPF had also developed training specifically for all elected representatives on staff pension committees.

10. At the last meeting of the UN Joint Staff Pension Board (UNJSPB), a small number of staff had expressed concern about how some funds had been invested. The Chief, Office of Investment Management assured FICSA that the investments were solid and well managed and pledged continued transparency regarding the management of investments to the extent possible. The FICSA ExCom had not seen any reason for concern, apart from an obvious concern with respect to global markets given the many crises the world faced. The FICSA ExCom continued to monitor the activities of the UNJSPB, and invited all members to bring any concerns to its attention.

11. The President reminded the Committee that the concerns of staff would be included in a statement that FICSA would make at the June meeting of UNJSPB. All staff, not only staff representatives, needed to remain engaged in all matters related to UNJSPB and their staff pension committees

Recommendation

12. SocSec recommended that the FICSA Executive Committee should bring any concerns of FICSA members to the attention of the leadership of the UN Joint Staff Pension Fund, including the Chief Executive Officer or Representative of the Secretary-General for the investment of assets.

Medical-insurance-plans survey for minimum standards

13. The working group established at the 74th Council had completed a template for the survey, although it was later decided to gather existing information from the websites of different organizations. Eventually, terms of reference would be developed for a consultant to be hired to develop the background paper with full data and information on insurance systems. In light of this development, the Chair encouraged the working group continue working on that item.

14. Speakers reiterated the challenges posed by managing the 23 separate insurance plans throughout the UN system, and the differences in the benefits offered to staff and the management of after-service health insurance (ASHI). The latter remained a major issue for the UN Secretariat. Other speakers gave examples of well-functioning health insurance for staff in their organizations.

15. The FICSA President noted the link between SocSec’s intention to launch a survey on health insurance and issues related to ASHI, and advised the working group to determine what the expectations would be from the survey results. The Chair reiterated the need for the working group to ensure the survey would gather the widest range of information possible, which would allow the identification of a baseline of standards and best practices that individual organizations could use in the negotiations with insurance providers.

16. While a wide amount of information could be collected, the survey's objective needed to be clear. A UN working group with representation from many organizations had concluded that it would be impossible to have one insurance provider serve all UN staff equitably in over 180 countries.

17. The need to determine the expectations of the survey would be part of the discussions at the upcoming Council, including on whether the working group would continue its efforts. The Chair invited SocSec members to familiarize themselves with the reports from the UN General Assembly and joint inspection units, and noted that Heads of Delegations had been requested to send for information on the medical coverage at their respective agencies by June 2022.

18. FAFICS described the InterAgency Working Group on Medical Insurance Schemes undertaken at UN level, in which about 23 organizations had participated. The data collected could represent a base for further analysis. FAFICS agreed to be an informal member of the SocSec working group. SocSec requested that the ExCom retrieve all information on the 2019 InterAgency Working Group on Medical Schemes and send it to members of the SocSec working group, for follow-up decisions.

19. SocSec reaffirmed the need to analyse the data on the different medical insurance plans and to keep the Soc Sec working group tasked with follow-up, including developing clear terms of reference of a consultant to be hired to develop the standard guidelines and best practices to be used.

Recommendation

20. SocSec recommended that the ExCom retrieve all information on the 2019 InterAgency Working Group on Medical Schemes and that the information be circulated to members of the SocSec Working Group, for follow up decisions.

21. SocSec recommended reaffirmed the need to analyse the data on the different medical insurance plans and to keep the SocSec Working Group tasked with the follow up, including to develop clear Terms of Reference (TOR) of a consultant to be hired to develop the standard guidelines and best practices to be used by SRBs.

[UN Disability Inclusion Strategy](#)

22. The UN Secretary-General had launched the Strategy in 2019. Its implementation in all agencies, including specialized agencies, was an indication of the efforts made to ensure minorities and others received fair and better treatment. SocSec called for all disabilities mentioned in the Strategy to be included in medical insurance coverage.

23. Despite repeated concern that combining coverage could negatively impact plans that offer good coverage, especially for those with disabilities, all agreed the subject was relevant to ensure the work environment was all inclusive. Including that issue in the planned survey of insurance was important. In the discussion, several speakers described implementation efforts in their organizations and shared concerns such as the need to address all types of disability.

Recommendation

24. SocSec recommended that the FICSA Secretariat should inform members about the [UN Disability and Inclusion Strategy](#), and encourage staff representatives to learn about it and become involved in efforts in their organizations to develop strategies that would lead to the inclusion of staff living with all forms of disability.

Occupational Health and Safety (OHS) Forum: update on discussions

25. Implementing an OHS management system was fundamental to managing the hazards and associated risks faced by UN personnel. When OHS risk management was integrated into the core

business functions of any organization's corporate strategy, significant changes and improvements could be observed, by not only preventing harm to the physical and mental health of personnel, but also improving the overall business performance. Establishing, maintaining, and appropriately resourcing a well-functioning OHS management system in a UN organization was important for not only personnel protection but also attaining the desired productivity level.

26. While the OHS Forum launched a survey in 2019 and in 2021 that had provided some results on the state of OHS throughout the UN system, more organizations needed to respond. The analysis of the responses received indicated a slow implementation rate of the occupational health and safety framework in the work place.

27. The survey results received to date indicated that mental health was a concern, particularly given the impact of the COVID pandemic. Each and every UN organization ought to have an OHS policy implemented and an advisory body to negotiate with management.

Recommendations

28. SocSec recommended that the FICSA Executive Committee should follow the progress of the Occupational Health and Safety Forum's discussions and share with FICSA members the Forum's final recommendations to the High-Level Committee on Management (HLCM).

29. SocSec recommended that FICSA members should verify and ensure the implementation of the [OHS framework](#) within their organizations, including the establishment of advisory bodies for consultation/negotiation with management.

Staff wellbeing and the COVID-19 pandemic

30. SocSec members shared important experiences, especially with respect to the COVID-19 pandemic. Initiatives at a number of organizations addressed concerns of mental health in the workplace, including the issuance of weekly on staff wellbeing and the provision of rapid test kits to staff. Others included establishing a committee to identify issues requiring attention to ensure staffs' well-being, and an equity and inclusion survey that had led to a number of activities to provide staff with social support. In addition, managers need to acknowledge the issues raised by staff and receive training on people management and soft skills.

31. Efforts to support staff's mental health included the provision of counselling. Some administrations offered programmes through their insurance provider that provided some support for staff's mental well-being. Some organization had had monthly meetings to provide guidance to staff on self-care, including the need to take breaks and leave.

32. SocSec had received many complaints from staff who had not been compensated for working overtime while teleworking, whose contracts had not been and who had been denied leave during periods of high workload. Despite the support offered by organizations, requests for leave remained a challenge during the running of large events, such as conferences. Members with information on such challenges were asked to provide SocSec with any documentation of relevant administrative policies, and encouraged to reach out to other agencies for ideas that supported efforts for positive change.

33. Staff considered essential (such as security personnel and drivers) had faced special difficulties, including increased risk of exposure to COVID, that were worsened by the need to work in close proximity with others. In addition, such staff faced increased expenses resulting from the need to take private means of transport and procure food when businesses were closed. A mechanism could be sought that would allow for the recovery of such expenses in future by staff at all member organizations.

Recommendation

34. SocSec recommended that the FICSA Executive Committee should continue to gather information from the FICSA membership on lessons learnt and problems experienced in the context of the COVID-19 pandemic, including on cost-related issues.

Nomination of SocSec officers and core group members

35. The Chairperson and Vice-Chairpersons were reconfirmed. The following delegates were nominated as Standing Committee officers:

- Paola Franceschelli (FAO/UGSS) as Chair
- Michelle Delinde (CTBTO) as Vice-Chair
- Andrew Brown (ICAO) as Vice-Chair

Appendix 1. Participants

Officers

Chair/Coordinator	Paola Franceschelli (FAO/UGSS)
Vice-Chairs and Rapporteurs	Michelle Delinde (CTBTO), Andrew Brown (ICAO)
FICSA President	Tanya Quinn-Maguire (UNAIDS)
FICSA General Secretary	Cosimo Melpignano (UNGSC)
ExCom members	Veronique Allain (SCBD), Tracy Tollman (UNFCCC)

Staff association/union

AP-in-FAO	Florence Tartanac
WFP/FAO UGSS	Silvia Mariangeloni, Luca Vecchia, Cristina Lemmi, Marc Brown
IAEA	Andrea Kamara, Walter Koenig
ICAO	Marisa Collis, Sanya Dehinde, Viera Seben
IMO	Shereen Barry, Elene Sarria, Ivana Goode, Odulana Folake
OSCE	Milan Jelenkovic
SCBD	Lisa Pedicelli
UNFCCC	Marjorie Manduli, Mary Jean Abrazado
UNICTF	Maria Del Rocio Martin
UNIDO	Osadolor Akpata
UNGSC	Annarita Palumbo, Cosimo Chimienti, Salvatore Brunori
UPU	Szymon Pisarek
WHO/AFRO	Hamidou Bague
PAHO/WHO	Daniela Cracel, Glenda Moreira Lopez
WHO/GSC	Aizat Khalid
WHO/EURO	Tyrone Sy, Oleksandr Martynenko
WHO/HQ	Neddy Mafunga, Daniela Salmon, Jerome Zanga Foe
WHO/SEARO	Ritesh Singh, Kim Sungchol
WHO/WPRO	Kristel Ann Dena Siaga, Jasmine Vergara

Members with associate status

CTBTO	Glenda Wolstenholme
OPCW	Linda Moyo, Arshad Qadri

Members with consultative status

AMFIE	Svend Booth
EBRD	Marina Parsons
EMBL	Maria Cerezo

FAFICS

Jerry Barton

Members with observer status

FUNSA Guinea

Lucie Gnongo Beavogui, Virginie Beavogui, Bangaly Kaba