Conference Room Paper

FICSA COUNCIL

78th SESSION
Paris, 3 to 7 February 2025

FICSA/C/78/SOCSEC/CRP.1 Geneva, 18 March 2025
Agenda item 11 (c)

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

Introduction

The Standing Committee on Social Security/Occupational Health and Safety (SC – see Appendix 1 for participants) met virtually and in-person several times to address its agenda. It adopted the agenda and elected its rapporteur – **item 1 and 2** of the provisional agenda.

Agenda Item 3:

Report on activities undertaken during 2024

The Standing Committee officers presented the status of recommendations from the 77th FICSA Council. Out of the seven recommendations, six have been fully implemented, while one remains ongoing.

FICSA/C/77/D/22 – Partially Completed (Ongoing on Point b)

FICSA successfully raised concerns regarding inequitable access to benefits for staff with dependents living with disabilities in all relevant UN fora. However, the development of a white paper on benefits and allowances for staff with dependents living with disabilities is still in progress. During 2025, FICSA will gather inputs from members, engage with the ICSC, and draft a white paper to ensure evidence-based advocacy and policy alignment.

FICSA/C/77/D/23 – Completed

FICSA re-established its active participation in the UNJSPF Participants' Group, ensuring that members' concerns on pension sustainability, benefit adequacy, and governance are effectively represented. FICSA continued engagement – although FICSA has observer status - and its participation in discussions and advocacy efforts remains critical.

FICSA/C/77/D/24 – Completed

The Standing Committees on Social Security/Occupational Health & Safety and Staff/Management Relations successfully developed and finalized a toolkit on harassment, sexual harassment, and abuse of power. The toolkit, including a structured response matrix for staff representatives, has been published on the FICSA website for broad accessibility.

FICSA/C/77/D/25 – Completed

FICSA informed members about the JIU Report on Health Insurance (JIU/REP/2023/9) and encouraged them to integrate the recommendations into discussions with their organizations. FICSA continues to engage in HLCM, HR Network, and other forums to track and advocate for the implementation of the JIU recommendations.

FICSA/C/77/D/26 – Completed

FICSA successfully advocated in the HLCM for dedicated funding for the implementation of the UN Strategy on Disability Inclusion. FICSA secured a role on the Implementation Board for Mental Health & Well-being, the OHS Forum, and requested inclusion in the Diversity, Equity & Inclusion Working Group (DEI WG) to ensure ongoing representation.

FICSA/C/77/D/27 – Completed

FICSA advocated for improved benefits for UN staff living with disabilities in high-level forums, including HLCM and OHS discussions. FICSA also influenced the framework for the new OHS Board to prioritize disability inclusion. Although implementation is complete, FICSA remains committed to long-term advocacy to secure systemic improvements.

In conclusion, the Standing Committee has successfully implemented six out of seven recommendations from the 77th FICSA Council. The only ongoing initiative is the development of the white paper on benefits for staff with dependents living with disabilities, which remains a priority for 2025.

FICSA's engagement in pension, health insurance, disability inclusion, and workplace protection policies has significantly strengthened its advocacy and influence within the UN system. Moving forward, sustained engagement with ICSC, HLCM, and other key stakeholders will ensure that staff rights and benefits continue to be protected and enhanced.

Agenda Item 4:

Latest updates from FICSA members.

No inputs from the members were received.

Agenda Item 5:

Occupational Health and Safety (OHS) Related Issues, Including Mental Health & Well-being

The Standing Committee on Social Security (SOCSEC) discussed Occupational Health and Safety (OHS)-related issues, with a particular focus on mental health and well-being. The discussions included:

a. Update on the Work of the OHS Forum and FICSA Participation in the Last 12 Months

The FICSA President provided an update on FICSA's engagement in the OHS Forum, highlighting the Federation's contributions over the past year. FICSA has actively collaborated with UN system organizations to advance the discussion on mental health and occupational health and safety. The work has emphasized the importance of organizational leadership and managerial responsibility in fostering safe and healthy work environments, as well as the need for structured training programs to enhance awareness and support.

FICSA has also been engaging with SECOS (Senior Executives on Occupational Safety and Health) in the area of disability and mental health, particularly in the development of training materials, collection of best practices, and creation of mental health repositories. The importance of stigma reduction was emphasized as a key component of future work.

b. 2025 and Beyond Version of the UN Mental Health Strategy

The UN Mental Health Strategy, originally developed in 2019, has evolved to include a broader and more preventive approach to workplace mental health. The upcoming 2025 strategy aims not only to address mental health conditions but also to prevent risks that contribute to their development. A key focus is strengthening support systems, including family and peer networks, to ensure that staff members receive holistic care.

Recognizing that mental health challenges and solutions vary across organizations, the Committee emphasized that there is no one-size-fits-all approach. FICSA has continued its advocacy for tailored and adaptable solutions, ensuring that the diverse needs of UN personnel are met.

Key Discussion Points and Recommendations:

Expanding Prevention Efforts: Mental health strategies must go beyond treatment and place stronger emphasis on prevention, including early intervention programs and support for both staff and their families.

Workplace Behavior and Practices: The impact of workplace behavior, culture, and managerial practices on mental health is often overlooked. Addressing toxic workplace dynamics, excessive workloads, and lack of support structures is crucial for sustainable well-being.

Collaboration, Analysis, Adaptation, and Innovation: Organizations must take a collaborative approach to address mental health challenges by analyzing current workplace conditions, adapting strategies to fit different organizational needs, and fostering innovative solutions.

The Role of Leadership and Management: Leadership plays a critical role in shaping a mentally healthy workplace. Ensuring that managers receive appropriate training to recognize and address mental health concerns among staff is essential.

Cost-Sharing for Mental Health Services: The financial burden of hiring mental health professionals remains a challenge, particularly for smaller organizations. Exploring cost-sharing models for mental health counsellors among multiple agencies could expand access to mental health support.

Staff Associations as a Support Mechanism: Staff associations can play a pivotal role in supporting staff well-being by promoting awareness, knowledge-sharing, and access to mental health resources. Some organizations have established peer-support programs, where volunteer staff members receive training to assist their colleagues. These initiatives have been recognized as innovative approaches to fostering a supportive workplace culture.

Mental Health Counsellor Overload and Resource Constraints: Concerns were raised about the increasing workload placed on mental health professionals, particularly in organizations with limited resources. Expanding training for staff to support one another and ensuring that counsellors are not overburdened were identified as key priorities.

Training and Awareness-Raising Initiatives: Some organizations have successfully engaged mental health counsellors to provide targeted training for staff, helping them better position themselves in workplace well-being efforts. The importance of staff representatives participating in well-being initiatives was also highlighted.

Conclusion

The Standing Committee reiterated FICSA's commitment to advancing workplace mental health initiatives within the UN system. Moving forward, the Committee emphasized the need for continuous collaboration, proactive prevention efforts, and tailored strategies to address the evolving mental health needs of UN staff and their families.

Recommendation

The FICSA Executive Committee should continue its advocacy for the development of a shared services model by the Mental Health and Well-Being Hub to ensure equitable access to mental health services across all organizations in the UN common system, particularly those without dedicated resources.

Agenda Item 6

Social Security-Related Issues

Under agenda item 6, the Standing Committee addressed key social security-related topics, with a focus on health insurance, including after-service health insurance (ASHI), and disability-inclusion efforts.

a. Health Insurance, Including After-Service Health Insurance (ASHI) and Results from the JIU Report

The Committee reviewed the Joint Inspection Unit (JIU) report, which provides an extensive analysis of health insurance policies, including ASHI, across UN system organizations. Several key recommendations were identified, including:

- Standardizing minimum health insurance standards across organizations.
- Harmonizing eligibility criteria for ASHI to ensure fair and consistent access to post-retirement health benefits.
- Strengthening governance and representation in health insurance committees, ensuring that both active and former staff are adequately represented in decision-making processes.

Key Issues and Challenges Identified

Financial Sustainability of ASHI

- The financial burden of ASHI has significantly increased, now reaching approximately USD 20 billion.
- Some organizations finance only 20% of their ASHI liability, while others finance up to 80%, leading to inconsistencies in coverage and potential financial instability.

- Proactive financial planning is essential to ensure ASHI remains sustainable.

Health Insurance for Staff in Remote Duty Stations

- Staff in remote locations face significant challenges in accessing health care due to limited insurance coverage and lack of travel reimbursement for medical treatment.
- Two recent surveys have identified disparities in health insurance coverage between HQ staff and those in the field, particularly for Professional (P) staff serving outside major duty stations. The problem described was that staff living far away from major cities have increased transportation costs to reach a doctor, and this is not included in the health insurance.
- Some national health insurance schemes have been proposed as alternatives, but transitioning to these schemes is complex and not always feasible.

Health Insurance Reimbursement Delays

- Concerns were raised regarding delays in health insurance reimbursements, which can create financial strain on staff and retirees who rely on timely payments for medical expenses.

Participation of Spouses in ASHI

- Some organizations have discontinued ASHI coverage for non-dependent spouses after a certain period of service.
- This has left former staff without viable insurance options, as they no longer qualify for alternative coverage after leaving the UN system.
- The Committee emphasized the need to review organizational contributions to ASHI and assess the long-term impact of discontinuing spouse participation.

Cost Containment and Protection of Acquired Rights

- While cost-cutting measures in ASHI may be necessary, they should not weaken acquired rights of staff members and retirees.
- Any new policies should be applied prospectively and should not affect existing staff already covered under ASHI.

Stronger Coordination Among Staff Associations and Retirees

- The Committee stressed the need for regular discussions between active staff and retirees to ensure their interests are aligned in negotiations on ASHI.
- Monthly meetings on health insurance and long-term care were proposed as a way to share information, monitor developments, and coordinate advocacy efforts.

b. Disability-Inclusion Topics and Focal Points for Staff Associations

The Committee also discussed the need for a system-wide approach to disability inclusion, particularly in social security policies. FICSA has received inquiries from multiple staff associations requesting that each organization designate a focal point for disability inclusion to ensure:

- Stronger advocacy for disability rights in UN system workplaces.

- Better coordination and information-sharing on disability-related policies.
- Training materials, repositories of best practices, and stigma reduction initiatives are widely accessible to staff members.

FICSA's ongoing collaboration with SECOS on disability and mental health was highlighted, with a focus on developing training resources and improving workplace inclusion for staff with disabilities.

Next Steps

Address ASHI Financial Sustainability

- Advocate for better financial planning and liability coverage across organizations.
- Engage with UN system entities to promote cost-sharing measures without undermining acquired rights.

Improve Health Insurance for Remote Staff

- Continue monitoring the disparities in coverage between HQ and field staff.
- Advocate for better travel reimbursement policies for medical treatment.

Strengthen Governance and Representation in Health Insurance Committees

- Push for equal representation of active and former staff in health insurance decision-making bodies.
- Ensure staff representatives are adequately trained to engage in discussions on ASHI and other health-related benefits.

Improve Coordination Between Staff and Retirees on ASHI Matters

- Establish monthly meetings on health insurance and long-term care to enhance collaboration.
- Increase information-sharing on health policy developments affecting both groups.

Enhance Disability-Inclusion Efforts

- Support the creation of focal points for disability-inclusion across organizations.
- Continue collaborating with SECOS on workplace inclusion and stigma reduction initiatives.

Conclusion

The Committee reaffirmed its commitment to advocating for equitable and sustainable health insurance policies, improving disability inclusion, and ensuring that both active staff and retirees are adequately represented in decision-making processes. Moving forward, FICSA will continue to engage with key stakeholders, monitor policy developments, and push for concrete solutions to address the challenges identified.

Recommendation:

The FICSA Executive Committee should organize Ask the FICSA Expert sessions to follow up on the action taken to support initiatives related to well-being ambassadors and the UN Disability Inclusion Network (DIN).

Agenda Item 7:

Nomination of Standing Committee officers and core group members

The following delegates were nominated as Standing Committee officers:

- Sotirios Markopoulos (CTBTO) as Chair
- Alberto Machado (IARC) and Sarah Klinghammer (UNFCCC) as Vice-Chairs.

The following participants in the SC were nominated as members of the core group: YILMAZ, Suleyman (UNIDO), Leedwine David Pichon (IMO)

Agenda Item 8:

Request for training courses

Training requests were made in the context of information sharing about the mental health and wellbeing volunteers and this will be covered in an Ask the FICSA expert session.

Agenda Item 9:

AOB

Nothing discussed

Appendix 1. List of participants

No list received