

The importance and status of duty of care in the UN system

Karina Pedersen, former FICSA intern

Evelyn Kortum, FICSA General Secretary

In 2014, the UN initially established the notion of Duty of Care to apply a framework in which UN Staff personnel were assessed, warned, and protected prior, during, and following their deployment to a high-risk, or non-family, duty station. As part of a multi-phase implementation process, in March of 2016, the High-Level Committee on Management (HLCM) established a *HCLM Cross Functional Interagency Task Force on Duty of Care in High Risk Environments*, also known as the Task Force, designed to examine Duty of Care deliverables in such work environments.

The implementation of Phase I goals required the production of 13 deliverables for those stationed in high-risk areas. Later, guidelines, also known as action points, were designed to produce the deliverables. To date, these guidelines, or action points of the Task Force, include the UN Strategy on Mental Health and Wellbeing; Duty Station Health Risk Assessment; Pre-deployment guide; UN Living and Working Standards; and training for managers. The Task Force was guided by the idea of safekeeping stationed personnel's mental, social, and physical health—achieved by supplying the necessary resources based on the principles that encompass all aspects of life in both low and high-risk areas.

A well-functioning Duty of Care framework is important because particularly in high-risk environments or duty stations, it is more likely than not that a UN Staff member could suffer from increased anxiety. This might ensue an increase of likelihood of heart disease, as well as many other comorbid chronic, or acute diseases. Not only do poor mental health outcomes directly influence the individual's physical health, but also their work ethic, energy levels, and ability to concentrate in the workplace is affected deleteriously.¹

The UN has not only set out to launch an approach on how to improve mental health conditions of those in high-risk duty stations, but also in lower-risk areas. In this way, the UN Strategy on Mental Health and Well Being (MHS), as a part of the Task Force's Action Points, was developed and is now being operationalized.

Employing over 105,000 staff globally, the UN system is, technically, considered the size of a small city. Currently, for this amount of staff, only 131 counselors exist to take care of individual staff mental health needs. This disparity between staff and the number of counselors amounts to 1 counselor to 800 staff members². Not only does this ratio mean long wait times, but it also is a direct reflection upon what needs to be done in the UN system in order to alleviate much of the mental health issues related to staff.

Though initially established as part of the Task Force's objectives, the Working Group for the UN System Strategy on Mental Health and Wellbeing developed a survey of which the results underline the purpose and importance of the Task Force itself. One major finding was a correlation between poor mental health and the number of years working at the UN, which is a worrying statistic. Another such finding was that 49% of all staff reported symptoms of a mental health condition, and 22% reported two. Only 2% of these individuals are seeking counseling within the UN system. Moreover, internationally recruited UN Staff were more likely to develop hazardous drinking.²

Introduction to some Tools in Development

For those living in high-risk duty stations, the *UN Living and Working Standards* are very important to accurately assess their safety and accommodation

Staff Management Relations

needs. Organizations such as UNICEF, UNHCR, and IOM have utilized new *online platforms* launched in 2019, such as the *Humanitarian Booking Hub*, for their staff living in field locations. These services, in accordance with the digital *Quality Assessment Checklist for the Humanitarian Booking Hub*, have not only increased access to services such as travel, accommodation, and health clinics, but also allowed for a more streamlined process to receiving these services.

Duty Station Health Risk Assessments are currently being developed along Occupational Safety and Health (OSH) risk management framework guidelines to better understand the risks involved in various duty stations. *Healthcare plans* for various countries and duty stations are currently being researched for suitability. *Self-assessment tools* have been launched to avoid unnecessary travel in order to determine Mandatory Health Support Elements in various duty stations.

A *how-to-guide* has been developed upon examination of various organizations' OSH systems and compiled into a document for use of all other UN Common System Organizations. This *how-to-guide* is the first step in this holistic approach to changing the UN system on the terms of the five Core Principles for

a healthier, safer, and more respectful workplace. Although OSH policies have been developed in some organizations, a survey conducted in August of 2019 revealed that only few organizations have OSH policies in place. This number needs to increase rapidly under the auspices of responsible heads of agencies.

Moving forward, it is imperative that the UN Common System continues to expand their OSH Framework and be cognizant of their own responsibilities and their staff needs. Recent International Labor Organization Administrative Tribunal (ILOAT) Judgments are reflective of upholding UN Duty of Care Policies. These judgments state that when an appeal regarding dignity, probation and terminations, harassment and health and safety are filed, that the Tribunal will now make a greater effort to ensure that rules, procedures, and appropriate measures are in line with the organizations' Duty of Care standards developed within the main framework. The Tribunal develops its processes further and relates them to the *Duty of Care* framework to determine if cases violating these policies will be punished more severely. The ILOAT will continue to recognize the importance of Duty of Care principles, making it imperative that the leadership of agencies and their staff offer support to the implementation of its framework.



¹ <https://www.unspecial.org/2019/09/prevention-is-better-than-burnout/>

² <https://www.un.org/en/healthy-workforce/files/Survey%20Report.pdf>