



UNAIDS/PCB(29)/11.22  
30 November 2011

**29<sup>th</sup> Meeting of the UNAIDS Programme Coordinating Board**  
**Geneva, Switzerland**  
**13-15 December 2011**

**Report by the UNAIDS Secretariat Staff Association**

**Additional documents for this item:** UNAIDS/PCB(29)/11.21

**Action required at this meeting - the Programme Coordinating Board is invited to:** *take note* of the contents of this report

## Introduction

1. Since June 2004, the UNAIDS Secretariat Staff Association (USSA) has reported annually to the Programme Coordinating Board. At the 28<sup>th</sup> meeting of the Programme Coordinating Board in June 2011, the USSA requested the opportunity to address the Board at its 29<sup>th</sup> meeting in connection with consideration of the human resources-related recommendations of the Second Independent Evaluation, as well as the workforce functional review and ongoing change processes in UNAIDS. The USSA is grateful for the Board's favourable consideration of this request. This document serves as complimentary information to the oral presentation that will be made to the Board by the USSA Chair.

## USSA assessment of the UNAIDS Workforce Functional Review

2. Since the presentation of our last report to the Board, the UNAIDS Secretariat has carried out a workforce functional review focused on the Geneva headquarters and seven Regional Support Teams (RSTs). The USSA monitored the process and participated in the Functional Review Steering Committee since its inception in July 2011. The USSA maintained a scorecard tracking key process elements (e.g. participation, measures to reduce potential negative impacts on staff). We successfully advocated for further consultations with staff in October, as well as a dedicated meeting with General Service staff in Geneva.
3. The USSA had very high expectations for this exercise. The first phase of the workforce review – which concluded in April 2011 and focused on countries – was widely viewed as a success, and in our view set a solid foundation for an equally participatory and strategic next phase. At the time of writing a set of recommendations from the second phase was under review by the UNAIDS Executive Director but his decisions are not yet known: staff expect to hear these in early December.
4. The USSA Executive Committee met with the Executive Director on 16 November 2011 to discuss the Functional Review and next steps in the transformation of the Organization. During the meeting, we expressed our concern to the Executive Director that the Functional Review paper and the process for reviewing headquarters and the RSTs did not meet the high expectations we had at the outset and as a Committee we therefore could not endorse the draft recommendations. We reiterated our full support to the Executive Director, however, in taking forward change that makes UNAIDS stronger and positions us to respond to a new generation of challenges, towards the vision of *Zero new infections, Zero discrimination and Zero AIDS-related deaths*. The Executive Director has been very clear that change must have a human face, and that he will be prioritizing measures that protect staff as we go forward.
5. In our June 2011 report to the Programme Coordinating Board, the USSA proposed eight key elements of "success" for the functional review process. Our brief assessment follows each of the eight elements:
  - **Staff members must be meaningfully engaged in the workforce functional review, contributing knowledge and creative thinking that will strengthen UNAIDS and our ability to deliver on the Strategy.**

6. Full engagement and participation is a hallmark of national AIDS responses, and staff expect that this principle is central in how we manage our own house. While the process that guided the functional review could be characterised as adequate in comparison with standard practice in other parts of the UN System, or in many public and private sector organizations, we feel that there were missed opportunities to bring out the best thinking of staff and harness the collective passion and expertise of colleagues. We were particularly concerned that General Service staff in Geneva were consulted far too late in the process. As a result of sub-optimal engagement, opportunities to strengthen the draft recommendations were missed. The USSA has shared its views on how shortcomings can be overcome going forward.
  - **The process must be fair and transparent, based on clear, known criteria – developed together with staff – that guide the overall process and apply to all parts of the Organization.**
7. Terms of Reference were published at the outset of the exercise, stating the general criteria for the development of proposed changes. However, uneven opportunities for input undermined the sense of fair process.
  - **All staff members must have clarity about their role and the roles of their colleagues (in Geneva, regions and countries) in relation to the UNAIDS Strategy, and their skills and experience must be used to the maximum benefit to UNAIDS and the AIDS response.**
8. At the time of this report, UNAIDS staff are awaiting the announcement of next steps in the transformation of the Organization and specific changes in structures and functions. Staff engagement in the implementation phase will be critical to a smooth and fruitful transition, with a view to seizing opportunities that maximise our impact and optimise processes in terms of excellence and efficiency.
  - **Measures to protect the current staff members that UNAIDS has invested in must be used to the maximum extent possible.**
9. Temporary staffing measures during the functional review have been generally successful in limiting the number of external recruitments and prioritising internal processes for filling critical vacancies. The USSA has called for a comprehensive review of non-staff contracts, including *Agreements for the Performance of Work* and consultancies, from the perspective of “value for money” and the potential to perform such functions in-house if the relevant expertise exists and where such a move would enable the Organization to retain staff who would otherwise risk separation. The USSA has called for an end to the abusive use of retirees, aligning to the new WHO policy published on the subject on 1 November. We are advocating for active workforce planning to manage upcoming retirements, using this as a means of reducing staffing numbers as appropriate and creating internal opportunities to take on new professional challenges. External recruitment should be kept to a minimum, limited to situations where the required expertise can only be found outside. We have recommended that the Organization develop commensurate packages for staff in the event of mutual separation or an offer of early retirement which takes account of their service to UNAIDS and their personal circumstances and provides support for retraining and outplacement. We see opportunity for innovative measures to maximize staff retention including for part-time work and job-sharing.

- **Any analysis related to possible outsourcing or “off-shoring” of specific functions must be based on clear and comprehensive criteria.**

10. The USSA has not seen sufficiently detailed analysis of outsourcing and off-shoring potential that takes into account (a) the full range of contributions that individuals and teams are making to the Organization’s performance, and (b) potential risks associated with shifting the modality for the performance of the function. An analysis based narrowly on costs does not provide a solid foundation for sound decision making. Of particular concern, there is no analysis of the real potential for the WHO Global Service Centre in Kuala Lumpur to perform additional tasks. The general assertions that this is a viable option are unconvincing, especially in light of the dramatic recent slow downs and related frustrations and hardships experienced by staff (e.g. related to the processing of education grant entitlements).

- **UNAIDS must expand investment in the professional development of staff, supporting them into new roles that take the UNAIDS Strategy forward.**

11. There have been preliminary discussions on support to learning and development for staff in relation to the Strategy and a new generation of challenges. This needs to become much more concrete, and linked with a plan to retain staff in the event that some positions are significantly re-profiled. No-cost innovations, such as the implementation of a 360 degree performance evaluation system, should be given urgent attention in the context of a draft policy on “*people development and performance*”.

- **Workforce decisions should not have negative implications for diversity in the Organization.**

12. It is too early to assess what will be the likely implications of the decisions related to the transformation of UNAIDS. We are pleased with messages from the Executive Director that support diversity, and in particular recognise the important contributions of young professionals in the Organization. Downsizing exercises tend to leave younger professionals vulnerable and this tendency will need to be countered through proper workforce planning.

- **All people performing staff functions for UNAIDS must be in possession of a UNAIDS staff contract.**

13. A review of all non-staff personnel in country and regional offices has been initiated, and data are currently under review by Human Resources Management and senior managers. We think UNAIDS can become the first UN entity that is fully aligned with the principle of *staff work, staff contract* whereby all people performing staff functions are in possession of a UN staff contract. We see alignment with this principle particularly important in view of our mandate in relation to health. A number of employees contracted under UNDP-issued “Special Service Agreements” (SSAs) are in reality performing staff functions despite use of the SSA contract modality. They are denied normal staff benefits such as health insurance and pensions. The USSA is grateful for the commitment of senior management to ensuring alignment with the “*staff work, staff contract*” principle becomes a reality. We will continue to track and report on this issue.

## **Mobility**

14. At the time of writing this report, staff have not received information about the 2012 mobility exercise nor the implementation of the postponed 2011 mobility round. The USSA remains concerned about a possible situation where there will be more international staff on mobility than posts available. Should there be a reduction in force, affected staff need maximum advanced notice and relevant career support so that they can plan their next steps, together with their families. We also remain concerned about the potential large-scale shift in expertise and institutional memory happening in a short time frame, due to the 2011 and 2012 exercises being combined, and including additional changes related to the workforce functional review. Careful planning is needed so that possible negative consequences are foreseen and addressed accordingly. We look forward to continuing our dialogue with management on how to optimise mobility as a mechanism that: advances professional development; places the right people in the right roles to advance the Strategy; and, is family-friendly in its implementation.

## **Transition to a Single Administrative System**

15. The USSA commends all colleagues involved in ensuring a smooth transition to a Single Administrative System. For many years staff had called for “One UNAIDS, one UNAIDS staff contract”, in response to the situation where UNAIDS country offices had two separate systems and conditions of service – UNDP and WHO. Between July and September, over 240 colleagues moved from a UNDP contract to a UNAIDS contract administered under WHO staff regulations and rules.

## **Concerns about WHO Staff Health Insurance**

16. Staff transferring to UNAIDS contracts in the context of the Single Administrative System have expressed serious concerns about the poor quality of service offered by WHO Staff Health Insurance (SHI) in terms of the lack of recognition at local level (and as a result, high out-of-pocket expenditures or complicated pre-payment negotiation), long delays in reimbursement, and outdated, paper-based claim procedures. For staff with dependents, they have seen their health insurance premiums increase in comparison with the insurance offered in connection with their previous UNDP contract. The USSA has brought these concerns to the attention of the Chief of Human Resources Management, the Deputy Executive Director for Management and External Relations, and WHO SHI officials. Based on our various discussions, we see a window of opportunity for UNAIDS to drive change by piloting a reformed SHI that features the following: (a) electronic submission of claims using the existing Records Management System (with onus on the staff member to keep originals on file, subject to audit); (b) 15 calendar day reimbursement guarantee; and (c) local level agreements with facilities for direct payment in all UNAIDS duty stations.

## **Conclusion**

17. We look forward to continuing dialogue with the UNAIDS Administration on the above matters and will report to the Programme Coordinating Board in June 2012 on progress to address them and other priority issues affecting staff and the Organization.

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