

World Health Organization



Geneva Staff Association

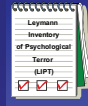
Harassment in the workplace

Slide 1

Definition

Mobbing/Bullying occurs if:

- somebody becomes a target and
 - is systematically harassed, offended, socially excluded or has to carry out humiliating tasks and
 - the person concerned is in an inferior position with difficulties to defend him/herself.
 - Mobbing/bullying behaviour occurs repeatedly (e.g., at least once a week) and for a long time (e.g., at least six months).
- It is not mobbing/bullying if it is a single event or occasional event.
It is also not mobbing/bullying if two equally strong parties are in conflict



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Methods (2)

- → English and French (professional translation & back-translation)
- Pilot questionnaire among Staff Committee members
- "Cultural validation" as done for World Health Survey



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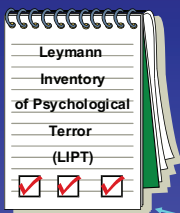
Purpose of the study

- Examine whether and to what extent harassment may take place at WHO/HQ
- If harassment prevalent, identify potential 'hotspots' in the organisation
- Work with administration and other stakeholders to explore possibilities of conflict resolution and harassment prevention

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Methods (1)

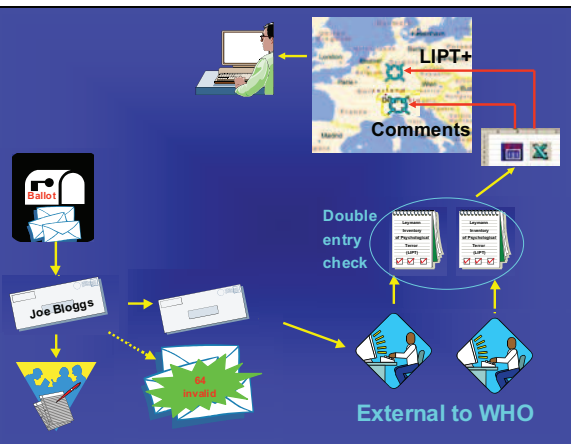
- Literature search to identify validated survey tools & experts



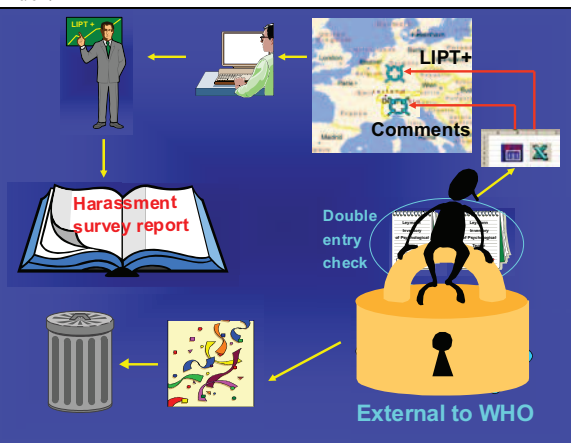
- Previously used in various international settings
- Examines individual harassment items
- Permits quantification of most severe form of harassment (mobbing)

Prof Dieter Zapf

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Results in a nutshell



- High prevalence of **mobbing** at WHO (31% overall, 7% after adjustment for non-response)
- 81% of harassers in survey were supervisors
- Harassment behaviours described indicate organizational and managerial problems
- Conflict resolution & formal procedures to deal with harassment are poor

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Raising awareness/training for staff



- Distribute WHO publication to ALL staff
- Train all staff in revised policy
- Regular seminars/workshops for managers and staff (delivered by *experts*)
- Reduce stress in organization
- Regular assessment of supervisors (360 degree appraisal)

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Where to go with a grievance at WHO?



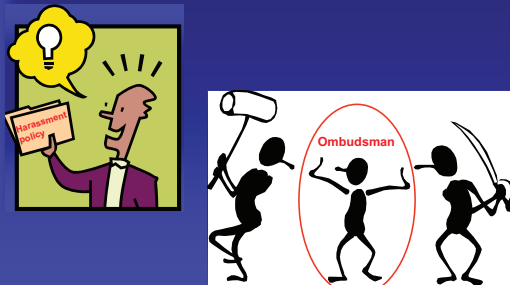
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Where to go with a grievance at WHO?



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Where to go with a grievance at WHO?



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Formal investigation of grievances – Grievance Panel

Current

- All members are WHO staff
- Members are very dedicated to task
- Chair appointed by DG in consultation with SA
- Members appointed by DG and Staff Association (SA)
- SA can object to members appointed by DG but traditionally objections were ignored
- Members do not receive special training in harassment issues or interview techniques
- Panel takes no decision but reports on results of investigation -> DG decides

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WHO harassment policy

- Incomplete
 - Institutional harassment items not mentioned
 - Some harassment items misleading
 - No literature references
- Execution often poor
- Vague – how is supervisor training to be achieved?
- Supervisors' competence not followed up
- Good start
- Urgent revision of content
- Policy needs to protect against false allegations
- Detailed plan for implementation
- Description of monitoring and evaluation

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Formal investigation of grievances – Grievance Panel

Experts' view

- Members should be non-WHO (avoid conflict of interest, use of sensitive information)
- Panel should include external *experts* in harassment
- All members should be agreed on by DG and Staff Association (SA)
- Non-expert members require special training in harassment issues AND interview techniques
- Panel should take decision

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What happens after investigations?

Current

- DG makes decision (advised by one of the interested parties?)
- DG informs investigative bodies, as well as individuals involved of decision
- Sanctions against proven harassers not made public
- Re-training for harassers?

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What should happen after investigations?

Expert & staff view

- Decision maker should not be advised by an interested party
- Verdict whether harassment occurred should be made public
- Sanctions against proven harassers need to have clear mechanisms *known to staff*
- Sanctions taken should be made public
- "Those found guilty of harassment should be NAMED"....
- Provide re-training for harassers
- Monitor behaviour of supervisors and staff through anonymous 360 degree appraisal

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To put it simply...

- WHO Geneva has a harassment problem
- WHO has a policy & procedures which require urgent revision ("quality, not quantity")
- WHO needs a change of mind-set and procedures (including sanctions)

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Where next at WHO?

The Staff Association proposed...

Urgent stakeholder meeting to discuss and move forward on:



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Who are the stakeholders?

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- Ombudsman
 - WHO Medical Services
 - Staff counsellor
 - Human Resources Services
 - Grievance Panel Chairs
 - Occupational and Environmental Health Dept
 - Mental Health and Substance Abuse Dept
 - External harassment expert/s
 - Staff Association

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How far are we with our efforts?

1. Completed & reported on survey showing high rates of institutional harassment at WHO
2. Consultation with experts to interpret survey and current procedures
3. Regular staff briefings on progress
4. Commitment from administration to convene first Stakeholders Group (SG) in its proposed composition
5. Terms of Reference for SG and first meeting September 2004

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Thank you

WHO Staff Association Special Working Group on Harassment in the Workplace

- Marthe Everard (e-mail: everardm@who.int)
- Evelyn Kortum-Margot (Occupational & Environmental Health)
- Alison Katz
- Paul Kowal
- Maga Skold
- Claudia Stein (e-mail: steinc@who.int)

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Extra slides

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“Cultural validation” exercise

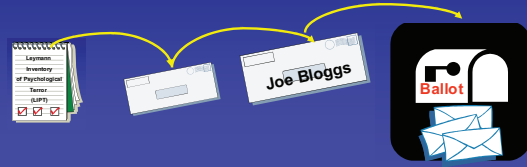
1. Translation & back-translation by both professionals and lay persons → identify differences in translations which could alter meaning
2. Discuss questionnaire step-by-step with people fluent in the language & establish cognitive understanding of items
3. Discuss questions with people from varying cultural backgrounds and ascertain whether culturally ‘acceptable’



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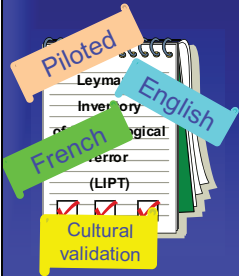
Methods (5)

- HQ staff complete questionnaire & return to Polling Officer



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Methods (3)

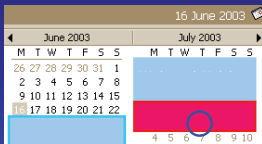


- English, piloted, validated version examined by Prof Zapf
- Advice from WHO Ethics Committee (information sought, storage, disposal of data)

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Methods (4)

- All HQ staff receive questionnaire in June 2003 (email & hardcopy)



- Disadvantage: Holiday period
- Advantage: Before transition
 - » Fewer departmental changes
 - » “Normality”

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