

Policy on the Prevention of Harassment at WHO

*Policy and procedures
effective 7 September 2010*

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Part One Policy

I. General

1.1 This policy: (a) seeks to promote a work environment free from harassment, in which staff members at all levels avoid behaviours that may create an atmosphere of hostility or intimidation; (b) provides a process for the consideration of claims of harassment and (c) provides for due process for all concerned.

1.2 This policy replaces Information Note 36/2004 and Cluster Note 2001/9, and comes into effect on 7 September 2010.¹

1.3 The policy applies to all WHO staff members, regardless of the type or duration of appointment, as well as to former staff members who allege that their separation was due to harassment, provided established time limits are respected.

1.4 Non-staff members (for example, persons providing services as consultants, or under special service agreements, APWs or other types of non-staff contract) will be made aware of this policy and will be expected to conduct themselves in accordance with its terms. Any allegation of harassment made against a non-staff member providing services to WHO will be guided by this policy as appropriate. The failure of a non-staff member to act in accordance with the requirements of the policy may result in termination of the contract under which they provide services, together with any other action that WHO may consider appropriate.

1.5 In addition, any non-staff member who considers that he or she may have been subject to harassment by a staff member or a non-staff member in a work-related situation may inform Director, **Human Resources Department** (HRD), who shall refer to this policy as appropriate.

2. Policy Statement

2.1 WHO is committed to creating a work environment that is free from harassment and where grievances are promptly and fairly resolved. WHO staff members are required to conduct themselves in a manner that demonstrates cultural sensitivity, and to treat their colleagues, whether supervisors, peers or subordinates, as well as external persons with whom they come into contact as part of their work with WHO, with dignity and respect.

2.2 Harassment in the workplace is an abrogation of the right of all persons employed by WHO to be treated with dignity and respect. Harassment is contrary to the WHO Staff Regulations and Rules and violates the standards of conduct expected of international civil servants. Behaviour determined by the Director-General to constitute harassment will thus be subject to the full range of disciplinary measures under Staff Rule 1110.

¹ All pending complaints of harassment filed with a Grievance Panel under the previous policy and procedures shall be dealt with under the policy and procedures in effect at the time the complaint was filed, unless the complainant requests and the respondent/s agree that the new policy and procedures shall apply.

3. Definitions

3.1 What is **harassment**?

3.1.1 Harassment means any behaviour by a staff member:

- that is directed at another staff member and has the effect of offending, humiliating or intimidating that other staff member ; and
- which that person knows or reasonably ought to know would offend, humiliate or intimidate that person ; and
- which interferes with a staff member's ability to carry out their functions at work and/or creates an intimidating or hostile work environment.

3.1.2 Harassment may take different forms, including sexual harassment (see 3.2 below). It may include conduct, comment or display related to race, sex, religion, nationality, ethnic origin, sexual orientation, disability, age, language, social origin, health status or other status. Some behaviours that do not necessarily constitute harassment under the terms of this policy, including those that are discriminatory in nature, may nonetheless be viewed as inappropriate in the work environment, and may be dealt with accordingly.

3.1.3 For harassment to occur, it is not necessary that the staff member actually intended the behaviour to be offensive, humiliating or intimidating. In their interactions with others, staff members should always consider the point of view of the other person in evaluating whether their conduct might be regarded as unacceptable under the present policy.

3.1.4 Harassment may involve a group and may occur among and between all levels of staff members.

3.1.5 Harassment is normally prolonged and persistent. However, in exceptional cases, a single incident may be viewed as harassment if it is sufficiently serious.

3.1.6 Harassment should not be confused with the usual performance by staff members of their functions and duties, including the discharge of managerial and supervisory responsibilities. This may include the provision of advice or counselling on work performance, attendance or other work related behaviours in the context of performance management, which might comprise critical comments indicating areas in need of improvement. It may also include the taking or implementation of difficult decisions on work-related issues that may be the subject of disagreement, recognizing that the ability to express differences of opinion is a normal part of work. Reasonable actions of this nature are not acts of harassment and are not dealt with under this policy. Actions are considered reasonable if they are in line with the Staff Regulations and Rules, the Standards of Conduct of the International Civil Service or generally accepted principles of managerial and supervisory duties and responsibilities.

3.2 What is **Sexual Harassment**?

3.2.1 Sexual harassment is a form of harassment (see 3.1.1, 3.1.2 and 3.1.3 above). It includes any unwelcome and unwanted sexual advance, request for sexual favours, or other unwelcome or unwanted written, verbal or physical conduct of a sexual nature.

3.2.2 When sexual harassment is committed by a staff member who is in a position to influence the career or employment conditions of the staff member who is sexually harassed, or where sexual harassment is made an implicit or explicit condition of employment, it is more offensive.

3.2.3 Both male and female staff members can be the victim or the perpetrator of sexual harassment. Sexual harassment may occur between persons of the opposite or same sex.

4. Preventive and corrective measures

4.1 WHO is committed to promoting a work environment free of harassment in which the dignity of all colleagues is respected, and every staff member understands and is able to carry out their responsibilities. As such, WHO has the duty to take all appropriate measures towards ensuring a harmonious work environment and to protect its staff from exposure to harassment in the workplace through preventive and corrective measures.

4.2 To this end **all staff members are responsible for:**

- Reading and ensuring they understand WHO's policy on the prevention of harassment.
- Completing any mandatory training related to the policy.
- Treating all people in the workplace with courtesy and respect.
- Being mindful of their own behaviour at all times and of how it may be perceived by colleagues.
- Taking a stand against incidents that could constitute harassment and supporting those concerned.
- Cooperating fully with those responsible for dealing with a complaint of harassment and ensuring that confidentiality is respected.

4.3 **Staff members must not:**

- Engage in verbal or physical abuse, or act in a way that creates an atmosphere of hostility or intimidation.
- Encourage or attempt to encourage other staff members to engage in behaviour that might constitute harassment.
- Retaliate against, or encourage others to retaliate against, a staff member who has made, or who has supported someone else in making, a complaint under this policy.
- File a false or malicious complaint under this policy knowingly and deliberately, or with a reckless disregard for the truth of the statements contained therein.

4.4 In addition to the above obligations, **all staff members with supervisory and/or managerial responsibilities must:**

- Act as role models by maintaining a high standard of personal conduct and treating all colleagues with courtesy and respect, and promoting a harmonious work environment that is free from harassment.
- Encourage staff members under their supervision to participate in available training related to prevention and resolution of harassment.
- Take appropriate managerial action to examine and, where appropriate, address, any concerns about personal behaviours of staff members under their supervision that may be offensive to others.
- Intervene promptly when alerted to alleged or potential acts of harassment and act promptly to attempt to informally resolve such incidents, including the referral of staff members to available resources for appropriate assistance.
- Assist the rehabilitation of working relationships where possible.

4.5 Under the overall leadership of the Director General and the Regional Directors, **the Organization is responsible for:**

- Providing leadership in the prevention of harassment by fostering a climate of mutual respect and by providing role models of required standards of behaviour.
- Ensuring that all staff members are informed of the required standards of conduct, informing them of this policy, and ensuring that all staff are aware of their responsibilities and rights, and of how to obtain support if needed.
- Developing training related to the prevention of harassment, including targeted training for managers and supervisors in informal resolution procedures, and providing staff with opportunities to attend such training when available.
- Developing mechanisms for ensuring that non-staff members providing services to WHO are informed of the required standards of conduct, including the terms of this policy.
- Where appropriate, taking disciplinary or other corrective measures to deal with breaches of this policy.

Part Two Procedure

5. Overview: Conflict Resolution Procedure

5.1 In order to resolve problems that could potentially give rise to instances of harassment, staff members are encouraged to take action as early as possible. The Organization shall ensure that open channels of communication are maintained so that staff feel free to raise their concerns with a trusted person of their choice², without fear of adverse consequences.

5.2 Where instances of harassment have allegedly occurred, staff members are normally expected to use informal means to try and resolve the situation promptly in a non-threatening and non-contentious manner. However, it is acknowledged that such an approach may not be appropriate in certain cases due to particular circumstances. Where informal resolution is not considered feasible or appropriate for sound reasons³, or has otherwise been unsuccessful, staff members may proceed to file a formal complaint.⁴ Details of both procedures are set out below.

5.3 All complaints and allegations of harassment shall be handled with sensitivity in order to protect the privacy of the individuals concerned and ensure confidentiality to the maximum extent possible.

6. Informal resolution

6.1 Informal resolution is the primary method for the resolution of incidents of alleged harassment within the Organization. Its objective is to settle any conflict as soon as possible in a fair, constructive and respectful manner, through open communication and cooperation. Staff members are normally expected to participate in informal means of resolution and to make good faith efforts to address and resolve the problem.⁵ An unsuccessful attempt to resolve an allegation of harassment informally does not preclude it from being considered for possible resolution under the formal procedure.

6.2 The Director General shall designate a Focal Point on Harassment at Headquarters, and the Regional Directors shall make a similar designation at each Regional Office. The primary role of the Focal Point is to provide information and advice to staff members about the policy, the

² This may include the persons and entities listed in 6.4 below.

³ Where such reasons are cited, the final determination shall be made by Director, HRD.

⁴ The time limit for filing of a formal complaint is set out in 7.4 below.

⁵ Subject to the provisions of 7.1, below.

conflict resolution procedures and the resources available to assist them in dealing with instances of alleged harassment.

6.3 Where possible, a staff member who considers that they are being subjected to harassment should make their views known to the other staff member as soon as possible, as in some instances, the other staff member may not be aware that the behaviour in question is objectionable. The staff member should make it clear what behaviour is unacceptable, and request that such behaviour stop. However, it is acknowledged that actual or perceived disparity in power, or other considerations, may mean that direct communication is not possible.

6.4 Alternatively or in addition to the action described in 6.3 above, a staff member who is involved in an incident of alleged harassment may ask for informal assistance from a third party. Depending on the situation, their level of comfort with one person or entity rather than another, and the accessibility of resources, a staff member may seek the assistance of any of the following resources available within the Organization in an effort to settle the conflict and address concerns before consideration is given to the filing of a formal complaint:

Focal Point on Harassment	Information and advice regarding policy, conflict resolution procedures and contacts
First or second level supervisor	Practical support to address alleged incidents, Consultation with/referral to specialist services
Staff counsellor/Staff psychologist	Psycho-social support Support for decisions taken Recommendations for referral for in- house or external support
Office of the Ombudsman	Confidential/impartial advice on resolution options Mediation/facilitated discussion Referral
Staff Association	Support Advice
Human Resources	Administrative support Policy guidance
Health and Medical Services (HMS)	Medical support

6.5 Following preliminary consultation with the staff member/s concerned, the persons or entities referred to in 6.4 above may refer the case to Director, HRD, for consideration of appropriate interim measures to be taken pending the completion of the informal resolution process. These persons or entities may also recommend to Director HRD that the case be considered immediately under the formal resolution procedure (for example, in particularly serious cases)⁶.

Conciliation

6.6 Conciliation is a voluntary, confidential process designed to afford the parties the opportunity to resolve the complaint with the assistance of a designated neutral person (**the conciliator**). While the conciliator will manage the process, it is the responsibility of the parties to fully participate with a view to arriving at a satisfactory outcome.

6.7 The Ombudsman will normally conduct the conciliation. However, in cases where the Ombudsman considers that it is inappropriate for him or her to act in this role (i.e., due to

⁶ See 7.13 below. In such cases, should Director HRD agree with the assessment of the referring entity, the case would be referred to the Director General for a decision to be taken on whether an investigation should be initiated.

significant prior involvement or conflict of interest), an appropriately qualified person, mutually agreed to by the parties, shall be appointed to act as conciliator.

6.8 Once the complaint is referred to the conciliation process, the parties may agree to participate in a facilitated discussion or other informal process in an attempt to resolve the issues raised in the complaint. During the first phase of the conciliation process, the complainant and the respondent will have the opportunity to meet with the conciliator individually to discuss the allegations and surrounding circumstances. The conciliator will work with the parties to develop a process to resolve the matter.

6.9 Following the conciliation process, the parties may decide that one of the following approaches shall be taken:

- The staff member who has made the allegation of harassment (**the complainant**) decides that the matter is resolved, the matter shall be closed and no further action shall be taken.
- Managerial or administrative action may be taken as requested by one or both parties to address issues raised by the complainant, pursuant to the agreement of the parties and/or the resolution plan.
- The parties do not reach agreement, and the complainant chooses to proceed with the formal complaint process described below.
- Other appropriate action

6.10 The 180 day formal complaint deadline as set forth in section 7 below is applicable in all cases to be considered under this policy, including those of staff members who make efforts to resolve allegations of harassment through informal methods, including conciliation.

7. Formal resolution procedure

7.1 In circumstances where informal resolution is not considered feasible or appropriate for sound reasons,⁷ or has otherwise been unsuccessful, the complainant may submit a formal complaint of harassment, which will be dealt with in accordance with the formal resolution procedure set out below.

Formal complaint

7.2 A formal written complaint, dated and signed by the complainant, shall be sent under “strictly confidential” cover to Director, **Internal Oversight Services (IOS)**.

7.3 The formal written complaint must include the following information:

- describing the specific act(s) or conduct that are the subject of the harassment allegation(s), and the date(s), time(s), location(s) and circumstances.
- providing any other information and evidence relevant to the complaint, including information on any ways in which the alleged harassment has offended, humiliated or intimidated the staff member; has interfered with the staff member's ability to carry out their functions at work; and/or has created an intimidating or hostile work environment.
- identifying the staff member/s who are alleged to have engaged in the harassment (**the respondent/s**), any alleged witnesses, and anyone to whom the alleged harassment was mentioned at the time.

⁷ See footnote 3.

- describing informal resolution efforts made, and the outcome of such efforts.
- in the event that no informal resolution efforts have been made, describe the reasons, recognizing that staff members are expected to make informal resolution efforts prior to submitting a formal complaint.

Timing

7.4 Formal written complaints must be received by Director IOS within 180 calendar days of the date upon which the alleged harassment occurred. In the case of alleged harassment of an ongoing nature, the limitation period shall begin on the date of the most recent act of harassment.

7.5 Any complaint received after the deadline specified in 7.4 above will normally not be considered. However, Director HRD may extend the time limit for the submission of a formal complaint in exceptional cases.⁸

Screening and acknowledgement of complaint

7.6 Director IOS will screen the complaint to ensure that it meets formal requirements, and will acknowledge receipt of the complaint, normally within ten working days of its receipt.

7.7 If the IOS screening indicates that the complaint is incomplete, it will be returned to the complainant with a request that it be completed.

7.8 The Director General shall be informed by Director IOS of all formal complete written complaints filed under this policy.

Initial review of complaint

7.9 On acceptance of a formal complete complaint, Director IOS will conduct an initial review of the substance in consultation with Director HRD. As a result of this review and consultation, Director HRD may take or recommend any interim measure considered appropriate pending the resolution of a formal complaint.

7.10 If Director IOS determines that an investigation should be undertaken, IOS is responsible for the investigation and shall proceed in accordance with paragraph 7.15 below.

7.11 If no investigation is undertaken at this stage and there is no direct referral for disciplinary action (see 7.14 below), Director HRD, in consultation with Director IOS, shall determine that one of the following approaches shall be taken:

- The matter shall be closed as there is no *prima facie* case of harassment and no further action shall be taken.
- The matter shall be closed as there is no *prima facie* case of harassment, but managerial or administrative action shall be taken to address issues raised by the complaint. Such managerial or administrative action may include mandatory training, counselling, change in function or responsibilities, warning or other appropriate corrective measures. This action may be implemented by Director HRD or another appropriate official.
- The parties shall be given an option to attempt to resolve the matter via conciliation as described in paragraphs 6.6 - 6.9 above. In the event the parties choose conciliation at this stage, the formal complaint procedure shall be suspended up to 90 days pending conclusion of the conciliation process.
- Other appropriate action.

⁸ See also 7.13, below.

7.12 Both the complainant and the respondent shall be informed in writing of the approach to be taken in the matter.

Investigation at Director General's request

7.13 As indicated in 7.3 and 7.4 above, a complaint of harassment is normally considered only on the basis of a formal complaint received within the deadline and complying with the prescribed requirements. However, the Director General may request the investigation of any alleged harassment at his or her own initiative, including without reference to a formal complaint, or with reference to a formal complaint received after the deadline, and/or not complying with other requirements of this policy.

Direct referral to Director General for disciplinary proceedings

7.14 Director IOS in consultation with Director HRD/Director of Administration and Finance (DAF) may recommend to the Director General /Regional Director that disciplinary proceedings be initiated immediately (for example, in particularly serious cases).

Formal Investigation

7.15 All investigations will be conducted by or under the responsibility of IOS in accordance with its guidelines, as summarized in the IOS document, "The Investigation Process", available to all staff on the WHO intranet. The services of external investigators may be used when considered necessary by IOS, in consultation with the Director General/Regional Director.

7.16 At the conclusion of the investigation, a confidential investigation report will be prepared which presents the established facts and evidence that have been gathered. The results of the investigation are reported to the Director General/Regional Director who has responsibility for deciding on the course of action to be taken.

Director General/Regional Director Decision

7.17 Upon receipt of the report, the Director General/Regional Director shall forward it to a Global Advisory Committee on future actions in harassment complaints (the Committee). The Committee shall review the report and provide its views to the Director General/Regional Director concerning an appropriate course of action, in accordance with the options set out in paragraph 7.19 (i) - (iv), below.

7.18 The Committee shall be composed of one staff member and alternate designated by the staff associations; one staff member and alternate designated by Director, HRD; and one senior staff member and alternate designated by the Director-General, following consultation with the Regional Directors. The terms of reference of the Committee shall be determined by the Director-General.

7.19 Following a review of the confidential investigation report and the views of the Committee, **the Director General/Regional Director shall decide on the following courses of action:**

(i) **Decide to close the case with no further action** -if the facts resulting from the investigation appear not to substantiate the complaint of harassment, or if there is insufficient evidence or information to determine whether the alleged harassment occurred. The complainant and the respondent will be informed in writing of the Director General/Regional Director's decision.

(ii) **Decide to close the case with managerial action** - if the report indicates that there was some factual basis for certain allegations but that, while not sufficient to justify disciplinary proceedings, the facts warrant managerial action, which may include mandatory training,

counselling, a change of functions or responsibilities, warning or other appropriate measure/s. The complainant and respondent will be informed in writing of the Director General/Regional Director's decision.

(iii) **Initiate disciplinary proceedings in accordance with the Staff Rules** if the report indicates that:

(a) the allegations appear to be well-founded and that the conduct in question may amount to harassment, and the respondent is a serving WHO staff member; and/or

(b) the filing of the complaint could constitute an abuse of this Policy. An abuse of this Policy could occur, for example, if a complainant were to file a complaint knowing it to be false or if a complainant were to intentionally make an untrue statement in connection with the complaint.

Once the disciplinary proceedings are concluded, the Director General/Regional Director will decide whether the staff member committed misconduct⁹ and, if so, the nature of any disciplinary measure to be imposed.¹⁰

(iv) **Other appropriate action.**

8. Appeal mechanisms¹¹

Appeal against final decisions

8.1 Decisions referred to under paragraphs 7.11 (except if the matter is referred to conciliation), and 7.19 above are **final decisions** in the context of the present policy and Section 12 of the Staff Rules. All other determinations referred to in the policy are interim measures only.

8.2 Final decisions taken under this policy may be appealed to the **Headquarters Board of Appeal (HBA)/Regional Board of Appeal (RBA)**, in accordance with Section 12 of the Staff Rules and the rules of procedure applicable to the relevant Board.

8.3 Decisions of the Regional Director on the recommendation of the RBA may be appealed to the HBA in accordance with Staff Rule 1230.85.

8.4 Decisions of the Director General on the recommendations of the HBA may be appealed to the **International Labour Organization Administrative Tribunal (ILOAT)**, in accordance with Staff Rule 1240.2 and the ILOAT's statute and rules of procedure.

Allegation of harassment contained in appeal

8.5 Should the RBA or HBA receive an appeal which includes an allegation of harassment as that term is defined in this policy, it shall deal with this aspect of the appeal in accordance with its Rules of Procedure.

9. Additional considerations

⁹ Misconduct is defined in Staff Rule 110.8

¹⁰ Available disciplinary measures are set out in Staff Rule 1110.1

¹¹ Paragraphs 8.1 - 8.5 are now under review. Any revision(s) to paragraphs 8.1 - 8.5 would apply to all appeals, including any appeal filed in respect of an allegation/complaint of harassment that was initiated before the revision took effect.

Withdrawal of complaint

9.1 If a complainant wishes to withdraw a complaint at any stage before the Director General /Regional Director takes a final decision, they must address a written request to Director, IOS. Following consultation with Director IOS and Director HRD/DAF, the Director General /Regional Director may accept the withdrawal of the complaint or may nonetheless decide to pursue the matter.

Claims for service-incurred illness or injury resulting from established harassment

9.2 In accordance with the HR e-Guide III.20 Annex 7.E, paragraph 26, when a claim is filed for recognition of a service-incurred illness or injury which is claimed to have been caused in whole or in part by alleged harassment as that term is defined in this policy, the **Advisory Committee on Compensation Claims** (ACCC) shall not consider the claim:

- (i) unless the allegation of harassment has been pursued by the claimant in accordance with this policy; and
 - (ii) until a decision is taken pursuant to this policy and communicated to the ACCC.
-