

## Topics

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## Renewing our commitment to change at all levels



WHO Regional Director Dr Ahmed Al Mandhari

We are now soon entering into the fifth year of WHO transformation and remain committed to moving forward. Embracing change in how we perform our duties in the Region is an essential part of our work to build back fairer for health.

We still have much to do. The evaluation and audit in 2021 found that transformation requires additional efforts in our regional and country offices, and that was also a strong theme at the recent WHO Representatives' (WRs) and Directors' retreats. Areas for further development have been identified.

While the COVID-19 pandemic obliged us to focus on urgent needs, transformation has continued and we are making progress. Countless examples show our unity and shared purpose as one WHO: peer support between country offices, new approaches to expanding our partnerships, a deeper connection with Member States and reactivating our Regional Transformation Team.

Transformation is a continuous process, a daily matter to which each of us contributes. We saw during the pandemic just how quickly our lives and the way we operate could change to meet an unprecedented challenge. The world is continuing to change, and we must change with it. Transformation calls for daily, efficient and lasting changes to improve WHO for the long term. There is no perfection, only progress. Together, as we re-evaluate our systems, reinforce our values and principles, and refresh on our purpose, our change will bear fruit. At this moment, I ask you to join me as an agent of change, to vouch for it with an open-minded approach and join us on our journey of transformation to internalize Vision 2023: Health for all, by all in the Eastern Mediterranean Region.

Regional team of preventing and responding to sexual exploitation, abuse and harassment (PRSEAH) established in February 2022

Diversity, Equity and Inclusion (DEI) regional catalyst group established in April 2022



## Transformation moving towards action in countries

Transformation is now moving forward in countries in the Eastern Mediterranean Region.

At the WRs' retreat in November 2021, participants looked in detail at shared challenges and ways to enhance positive impact on health in the Region, while a directors' retreat that took place soon after considered guidelines on what transformative requirements are needed at country level.

A key priority highlighted during the WRs' retreat is upholding WHO values, particularly preventing and responding to sexual exploitation, abuse and harassment (PRSEAH).

WHO is committed to enforcing a zero-tolerance approach to PRSEAH across the Region. A Regional Team for PRSEAH has been established to coordinate the implementation of activities, and recruitment of related staff is underway including a regional PRSEAH coordinator as well as technical officers in Afghanistan, Pakistan, Somalia, Sudan, and Yemen. Furthermore, the diversity, equity and inclusion (DEI) regional catalyst group has been established in the region.

Capacity building was identified as another major concern, and several significant gaps were

identified. Sixteen country offices in the Region have received legal training this year on legal topics such as corporate and contractual matters, privileges and immunities of WHO and its officials, and international, constitutional and global health law matters, as well as individual coaching sessions from representatives of several countries. Other areas for further capacity building include leadership and change management.

WRs are also keen to improve WHO's business processes, and discussion groups were created to study issues including staff recruitment, donor reporting, hiring consultants and procurement of goods and services.

Enhanced visibility has also been at the forefront of transformation, particularly in collaboration with the solidified and fully functional Communications, Resource Mobilization and Partnerships Department (CRP). The CRP Department ensures WHO's external engagements remain coordinated, transparent and risk managed, reinforces WHO's role as a trusted leader in health through evidence-based health information and implements strategic resource mobilization.

### >> Agreed roadmap for transformation in the Region

 <p>1 Upholding WHO values</p>	 <p>2 Legal issues</p>	 <p>3 Enabling services</p>	 <p>4 Transformation Change Network</p>
 <p>5 Monitoring &amp; Impact</p>	 <p>6 Emergency situations</p>	 <p>7 Country operations</p>	 <p>8 Communication &amp; Partnerships</p>
 <p>9 Health Leadership in the UN</p>	 <p>10 Leadership capacities</p>	<p><i>WHO Transformation</i></p>	

## EMRO reboots its Regional Transformation Team for wider engagement

The Regional Transformation Team has been reactivated with new members. The team is part of the overall transformation structure initially established in July 2019, and the Regional Director issued a new circular in March 2022 to reinforce the transformation structure.

WHO transformation seeks to revamp the Organization’s business models and systems and improve organizational culture and efficiency to ensure that it remains a catalyst for health and is accountable and fit for purpose. The Regional Transformation Team will work in close collaboration with the Global Transformation Team from WHO Headquarters and country offices for stronger coordination and guidance in implementing transformative changes.

*“Transforming the way how we work to become more impactful without compromising on a respectful workplace involves all of us and will make us more agile and results-focused” – Dr Christoph Hamelmann, Chef de Cabinet in the WHO Regional Office.*

The Regional Transformation Team (RTT) will provide coordination, manage initiatives and

increase staff engagement in transformation, with strategic direction and oversight from the Senior Management Team. It will help to identify bottlenecks and inefficiencies, drawing on relevant inputs such as findings from country functional reviews and action points proposed during the WRs’ retreat in 2021.

Additionally, the Regional Transformation Change Network will be activated to work closely with colleagues from various departments to contribute and support transformation within the Organization. The primary objective of the Transformation Change Network is to foster positive change in the Organization. Network members bring new energy to different initiatives, provide feedback on how they are being received, embed transformative decisions into their day-to-day activities and support leadership and change management.

EMRO’s Transformation is housed under the Chef de Cabinet’s Department and coordinated by the Transformation Team Lead. (Ref. Regional Director’s Circular No. 1341)

### >> The governance structure



## A collaborative experience for a dynamic WHO



Regional HR Manager Gerard Mc Donnell at the WRs' retreat in Cairo, Egypt

Managers and staff are being urged to explore modalities of work that give staff opportunities to broaden their experience while helping WHO meet changing business needs.

Surge support and short-term developmental assignments offer both immediate and long-term benefits to staff members and the Organization.

Surge support is typically associated with emergencies and is used for acute events that require enlarged staff capacity for a duration of some months. Although travel restrictions were in place during the COVID-19 pandemic, surge support remained ongoing.

Short-term developmental assignments (STDAs) provide opportunities to partake in a programme and/or provide support for a specific standard of time.

Both arrangements allow staff members to use and build their skills in a new context within WHO without transferring permanently, while WHO benefits from developing internal talent, facilitating networking, increasing its flexibility, and more.

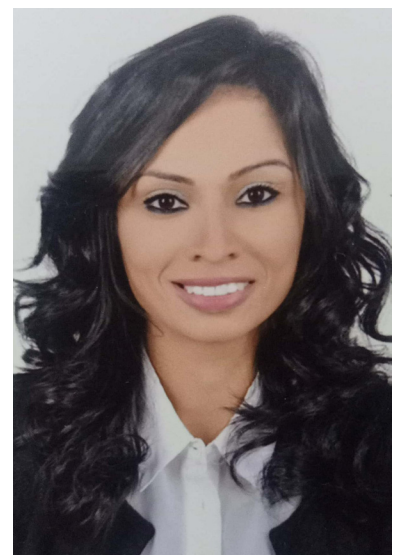
Regional HR Manager Gerard Mc Donnell encourages the use of STDAs. He emphasizes that STDAs can raise the ceiling for participants' future professional and career growth, and managers also gain from the

enhanced skillsets, networks and motivation of their staff.

"Everyone should get an equal chance" he says, noting that guidelines are available to ensure that short-term assignments are effective development opportunities.

Mc Donnell stresses the value of using STDAs to gain experience beyond the Regional Office and within country offices. While travel restrictions during the COVID-19 pandemic limited such mobility, more options are now becoming available.

Maryam Ibrahim, a programme assistant from the GHI Department currently undergoing an STDA in the Chef de Cabinet's Department, says her current role assisting in arrangements for the World Health Assembly and Regional Committee has given her a new perspective.



Maryam Ibrahim, Programme Assistant at EMRO

*“In such a short period, I saw the administrative issues from different views that have widened my horizons” – Maryan Ibrahim*

Datu Marsuali, another staff member who previously served as an HR assistant in the Business Operations Department at EMRO, agreed that her STDA had added value to her career by expanding her network, exposing her to best practices in field operations and teaching her how to deal flexibly with changing environments. She is currently based in WHO Headquarters as an HR associate within the Global Human Resources unit.

*“Regardless of the line of work and rank within an organization, setting realistic milestones for the foreseeable future made me more productive” – Datu Marsuali*

STDAs can last for up to six months and need to be approved in advance by the staff member’s supervisor through a one-to-one developmental dialogue. For each STDA, terms of reference must also be formulated by the supervisor or manager in the receiving office.

Obtaining data about these work modalities can be challenging because applications for surge support are carried out between country offices rather than through the Regional Office. Gerard Mc Donnell is keen to establish a central focal point in the Regional Office to run applications for STDAs and surge support, and believes advertising for both modalities of work through formal recruitment platforms would assist in gathering and obtaining data more efficiently.

>> Short-term developmental assignments at EMRO from 2020-2021 in figures.

**16** STDAs were implemented through **Stellis**

**12 out of 16 (75%)** were undertaken by female staff members

**13** were general staff and **three** professional staff

**12** STDAs situated in EMRO, **three** in the Egypt Country Office and **one** in the Jordan Country Office

**Procurement staff** showed the highest interest in **undertaking STDAs**



Datu Marsuali, HR Associate at WHO Headquarters

### >> News Brief – 2021 performance audit of WHO transformation

A performance audit of WHO transformation took place in October 2021. WHO management have now provided their written response and the report will be presented to Member States at governing bodies meetings during 2022.

The audit report found that 16 out of 40 planned transformation initiatives had been achieved since 2017. Transformation activities had continued throughout the COVID-19 pandemic, even though WHO had devoted much of

its efforts and resources to the COVID-19 response. However, additional resources need to be devoted to ensure that transformation at country level is achieved, including reforms in human resources, sustainable financing and culture change, among others.

Updates on transformation initiatives, including prioritized actions from WRs’ and Directors’ retreats in 2021, were included in regional updates at the 2022 Global Policy Group retreat.

## WHO Yemen Country Office lends a helping hand to Sudan amid emergency



Sudanese citizens await their COVID-19 vaccination, 2021

Sudan faces multiple health challenges. Approximately 94% of the country's people are not vaccinated against COVID-19, and its case fatality ratio of 7.69% is among the highest in the Eastern Mediterranean Region. Simultaneously, it is confronting outbreaks of other communicable diseases such as dengue fever, malaria and hepatitis E. And a military coup in October 2021 added further uncertainty and complexity.

While working with stakeholders to tackle these challenges, the WHO Sudan Country Office needed additional assistance to deal with essential administrative tasks towards the end of the biennium, including the

closure of incumbrances and donor reporting.

It was an opportunity for Amna Al-Kilidar, Administrative Officer at the WHO Yemen Country Office, to step in at the request of her operations office and Dr Adham Abdel Moneim, WHO Representative to Yemen.

Drawing on her experience gained from the emergency in Yemen, Amna was tasked with leading the operations team to process operational funding and assist in implementing audit recommendations.

*“The exposure of one office to another other adds to the individual in seeing a different context, a different approach to solving things, a different challenge, and a different management style” - Amna Al-Kilidar*

### United for global health

Dr Adham was keen to arrange the surge support. He believes strongly that exchanges between staff members reduce silos within the Organization and make the aim of One WHO a reality. The Organization has more than 250 staff in Yemen, tackling a complex, protracted emergency situation, so there is a deep reservoir of expertise.

*“Gaining experience in dealing with other country offices, governments and entities is something to exemplify as a norm” - Dr Adham Abdel Moneim*

He also notes that surge placements can provide a great platform for staff members to develop their careers.

## Overcoming hurdles

The surge support was initiated as a way of providing additional hands to fill gaps in administrative capacity and exchange experiences. Dr Nima Abid, WHO Representative to Sudan, says the presence of a colleague from another country office aided their emergency response. It came at a crucial moment, helping to prevent the loss of precious funds through the timely submission of reports and the termination of purchase orders to conserve resources for Sudan.

**“Surge support builds the capacity of WHO personnel, especially national staff, by exposing them to international experience and promotes the culture of one WHO” - Dr Nima Abid**

The complex situation in Sudan made COVID-19 vaccination particularly challenging, and the available vaccines were expected to expire by mid-October and mid-January. However, the WHO Country Office resorted to direct implementation due to the coup and was able to successfully vaccinate 700 000 people by November 2021. As a result, Sudan’s vaccination rate increased and donors were satisfied.

## A backbone during an emergency

Working during the coup could be stressful at times, and Amna notes the importance of maintaining a work-life balance. Communicating with her family through



Amna Al-Kilidar, Administrative Officer at the WHO Yemen Country Office

several calls proved crucially helpful, though this was complicated by a temporary communication blackout. She also found it useful to meditate during stressful moments, walk around the block and make time for entertainment.



Sudanese citizens await their COVID-19 vaccination, 2021

## Empowering female staff in Pakistan



WHO Regional Director Dr Ahmed Al Mandhari playing with the children at the daycare center in Pakistan's country office.

WHO is making gender mainstreaming a priority across its offices in the Eastern Mediterranean Region. The Organization's Country Office in Pakistan offers a good example.

In June 2021, Regional Director Dr Ahmed Al-Mandhari and WHO Representative to Pakistan Dr Palitha Mahipala inaugurated a well-equipped daycare centre in the office to support all staff. The service is currently used by mainly female staff. Designed for children under five years of age, the new centre includes a breastfeeding room, an outdoor playground and more to accommodate for their needs within a safe and secure environment.

***“The facility enables women to continuously play their pivotal role in addressing multiple health challenges on the platform of WHO Pakistan” – Dr Palitha Mahipala***

their work opportunity and rights with dignity and peace of mind.

Working mothers' nannies take care of their children at the daycare centre during office hours,

The daycare has positively contributed to creating an inclusive, respectable and equitable environment where female staff can exercise and utilize

meaning they can concentrate on their jobs while still being able to see their children when they need to.

Syeda Sara Saeed, a Team Assistant in the Health Systems Development Department who has been based in the Pakistan Country Office for nine years, says the centre enables mothers to forge ahead with their careers without sacrificing precious contact with their young children.

In addition, a state-of-the-art gym at the office provides dedicated time slots in which women staff can exercise in a way that is comfortable and suits their preferences.

Currently, most staff members in the Pakistan Country Office are male, and initiatives such as the daycare centre and culturally sensitive gym arrangements are helping to ensure that there is a suitable working environment for all.

***“The working mothers are happy as they can fully focus on their work, and also check on their little ones” – Jelena Davis, former Operations Officer in WHO Pakistan***

***“It is always convenient for mothers to be able to check on their young ones when they have the time” – Syeda Sara Saeed***