



WFP Wellness Strategy

(2015-2019)

Staff Wellness Division – RMW

Department of Resource Management – RM

(Version VIII)

EXECUTIVE SUMMARY

WFP Strategic Plan (2014-2017)

1. WFP's greatest strength is its dedicated women and men working around the world who provide access to nutritious food and promote lasting solutions, often under very difficult conditions where security threats and risks to personal safety are considerable. Responding to humanitarian emergencies is and will continue to be a primary focus for WFP's dedicated staff worldwide.

WFP's Wellness Vision Statement

2. WFP is dedicated to promoting and maintaining the highest degree of physical, mental and social wellbeing of all employees. Accordingly, it seeks to offer a safe and healthy working environment which contributes to human dignity and self-fulfilment.
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Context

3. WFP Strategic Plan (2014-2017) recognizes the increasingly challenging and evolving operational environment in which WFP works, and provides the framework for delivering results to end hunger. It identifies drivers of change that are likely to have impacts on future demand for food assistance and on WFP's ability to respond to crisis and shocks while breaking the cycle of hunger and helping to achieve sustainable food security and nutrition. The Strategic Plan establishes the framework for guiding WFP's operations and articulating its contribution to local, national, and regional nutrition and food security plans; the parameters for achieving the WFP Strategic Plan's expected results are established in the Management Results Framework.
4. WFP's human asset capital is the key component to the successful implementation of the Organization's Strategic Plan. The Wellness Strategy presents the blueprint for how WFP intends to promote and maintain staff physical, mental and psychosocial wellness, fostering synergies and optimizing available resources.
5. Within the United Nations system and among partners and stakeholders, WFP is recognized for its capacity to deliver. Its capacity to produce results depends on multiple elements including the fundamental factor of the skills and wellness of its workforce and their commitment to WFP's mission to contribute to building a world without hunger.
6. The progressively demanding operational requirements create the need to enhance WFP employees' resilience, engagement and commitment by supporting their wellness as "a positive state in which the individual is able to function at or near their optimal level, whether defined and measured in terms of physical, mental, emotional and/or social functioning [...]" (Nuffield Health, 2012).

7. WFP provides its diverse employees¹ with an enabling and supportive workplace in which health and welfare risks are managed, and in which there are prevention measures as well as prompt and effective responses to incidents, accidents, and illnesses, so that they can channel their energy into feeding some of the world's most vulnerable people.
8. By doing so, the Organization also meets its human resources needs to retain, develop and reward its employees while attracting new and diverse talent.

Wellness Strategy – Purpose

9. The Wellness Strategy is a call for the Organization at all levels (e.g. governing body, managerial and employee) to take on the responsibility of creating and supporting the conditions for the WFP workforce to function at its optimal level. It presents an overview of the initiatives that WFP needs to undertake for its implementation to reap the rewards with the return of investment. (See Annex 1)

Guiding principles underpinning the Wellness Strategy

10. A number of guiding principles have underpinned the development of the Wellness Strategy. The overarching premise is the recognition that WFP employees are the Organization's greatest asset and that they are core to our success as an Organization.
11. The Wellness Strategy emerges from the WFP Occupational Safety and Health (OSH) Policy and stems from WFP People Strategy.²
12. The Wellness Strategy, strives to strike the right balance between Organization and employee needs, enabling our Organization to meet its growing challenges, while mindful of the impact on our employees and their families.³
13. The Wellness Strategy is a start-up corporate investment. By creating a virtuous circle of revolving savings on overall medical costs and liabilities, an initial infrastructural investment in the Wellness Strategy will generate returns in corporate efficiency, competitiveness and stakeholders' gains (donors and beneficiaries).

¹ WFP workforce is comprised of nearly 14,000 employees in more than 80 countries, representing 150 nationalities; 32 percent are women and 68 percent men, with significantly more men than women serving in hardship duty stations. Ninety percent work in the field, and the 20 largest operations account for nearly 66 percent of the total workforce. The employee profile is relatively young—the average age is 40 years old—with the exception at the senior management level.

² In particular imperative 3: Shift the Focus making the country level its central concern to better serve beneficiaries.

³ Given the challenging nature of the demands placed upon WFP, in particular the necessity for a high proportion of its employees to carry out their work in non-family duty stations, the workforce is constantly faced with the difficulty of balancing personal aspirations and organizational needs

14. The Wellness Strategy aspires to the highest corporate occupational health standards: this is achieved by managing health risks, offering evidence-based, quality controlled occupational health services, and nurturing trust in clients through professionalism with the highest regard for confidentiality and privacy.
15. The Wellness Strategy is based on a comprehensive review of WFP employee health.³ The *Survey Report* results provide a clear map of WFP employee health risks and call for structural shift from a traditional organizationally-mandated medical administration service to an up-to-date, articulated employee health management service through a coordinated approach to prevention, promotion and protection of employee health.

WFP Wellness Strategy

16. The five pillars of WFP Wellness (see Annex 2), all equally essential to the successful implementation of the Wellness Strategy, will support WFP's workforce by pursuing three goals, considered critical from several appraisal reports.^{4, 5, 6, 7, 8}
17. Each goal has specific objectives:
 - i. *OneWellness: shift the focus.* The country level and national staff become the focus of WFP wellness efforts. National staff, the backbone of WFP operations, comprise 82 percent of its workforce in both highly visible emergencies and in less publicized programs. The aim of *OneWellness* is to extend already existing health promotion and illness prevention programs to all employees in the field.
 - ii. *Promoting a corporate culture of health.* By placing employee health and safety high on the corporate agenda, the Organization engages managers and employees in pro-actively addressing their modifiable personal and professional risks prior for them to become an illness. This increases the chances of a future with reduced health risks, a healthier population and a more competitive and performing Organization⁹.
 - iii. *Creating an enabling and supportive workplace.* The Organization implements its Occupational Safety and Health Policy to which RMW contributes by providing complete and holistic health and wellness services, to employees and, as possible, to their families. The maximization of synergies with other corporate stakeholders allows the Organization to fully implement the Policy and to receive potentially recognition for this within the United Nations System (and relevant international certifications).

³ WFP Health Appraisal Survey was carried out in 2013 through a global survey to which 3,901 employees (32 percent of the employee population) participated. Respondents answered 61 questions on their health risk profile based on their demographics, reported medical conditions, reported stress level, occupational health issues, risky behaviours and their interest in participating in future prevention programs.

⁴ "Health Risk Appraisal Survey Report 2013" Medical Service June 2013

⁵ "Health and Wellbeing Mission to the Republic of the South Sudan" Staff Health and Wellbeing group, Medical Service October

⁶ Staff Health Visit: Regional Staff Health Advisor and HQ Staff Health Protection Advisor, Bamako Mali November 18 – 21, 2014

⁷ Occupational Health and Safety Mission to Kenya and Ethiopia 10-16 February 2013, Behan & Goldoni

⁸ "The link between workforce health and safety and the health of the bottom line": R. Fabius MD et al.: JOEM, vol. 55, n.9, 09/2013

18. The successful implementation of these three goals will positively impact the management of WFP's invaluable human asset capital. The implementation of the Wellness Strategy will be measured through WFP's corporate accountability framework – the Management Results Framework – to verify its impact on the overall organizational performance and its value for stakeholders and beneficiaries. The Wellness Strategy will allow WFP to assist its beneficiaries in a more efficient, competitive manner at lower costs.
19. The Wellness Strategy's three Goals are critical to its successful implementation:

Goal 1 – *OneWellness: shift the focus.*

20. **Desired outcome:** WFP strives to offer to the whole workforce, especially national employees in health critical countries, access to medical, mental and psychosocial health services.
21. **Case for change:** Historically WFP has outsourced its workforce medical administrative functions to other Agencies (FAO for International and HQ General Service and UNDP for National staff) limiting its control and capability to introduce enhancements and improvements aimed at meeting the unique health challenges faced by its employees. Despite minor changes, this model no longer meets the specific and unique needs of a mobile workforce exposed to harsh working conditions for several years in a lifetime career. Until now, the focus on international staff has created the feeling that the Organization is not cognizant of the efforts of its locally recruited employees permanently exposed to the risks of the environment in which they operate. *OneWellness* aims at shifting WFP focus from mere employee medical-administrative activities to the management of employee health while centering the organizational attention on the country office and increasing its occupational health services outreach to the field. By placing the solution closer to the problems, the latter will be solved more efficiently with a booster effect on employee morale.
22. **Expected RMW outputs:**
To attain the desired outcomes RMW will undertake:
 - i. *Central digitalization* (You can't manage what you can't measure): establish a common digital web-based medical database for all employees by up-grading and expanding the current system in place on cost-sharing with FAO and IFAD, by including the medical files of WFP locally recruited employees worldwide on fixed term or short term contracts;
 - ii. *Decentralization and outreach:* effectively and functionally merge the existing Medical and Staff Counselling Services into one Wellness Division, replicating its articulation in the field at least at the regional level. Wellness Regional Units, already existing for the Staff Counselling, will engage their regional teams and respective Country Directors in the Wellness Network, to take charge of supporting the local implementation of the OSH Policy and of the prevention, promotion, protection of health activities for employees;

- iii. *Access to services:* support and advise field management in the daily provision of enhanced access to services through the UN Clinics and/or more efficient local alternatives; maximize the collaborative approach between the health insurers, the employer and the employee to roll out prevention and health promotion programs in the field.

Goal 2 – Promoting a corporate culture of health

23. **Desired outcome:** WFP Wellness promotes a corporate culture of disease prevention through lifestyle and behavioral changes in the workplace.
24. **Case for change:** To shift the organizational attention to health, WFP engages managers and employees in pro-active preventive behaviors at primary care level, rather than passive hospital care when diseases cannot be prevented anymore. This increases the chances of a future with reduced health risks, a healthier population and a more competitive and performing Organization.
25. By focusing on prevention and wellness, WFP chooses to shift from the current system focus on financial transactions of healthcare – not lowering health costs, but shifting them to retirement, to a focus on reduction of the burden of health risks and illnesses, leading to a healthier population and actual and measurable total cost decrease. In the area of psychosocial health, the focus on prevention and wellness is geared towards building the psychological resilience of staff given the challenging nature of some of the environments in which WFP operates
26. *Wellness paradigm:* focus prevention and promotion efforts away from expert care to consumer-directed care. Wellness professionals acknowledge that individuals are the experts on their own lifestyles.^{9, 10} With this in mind, the individual decides the best preventive care approach, with support provided by Wellness experts: self-efficacy becomes the core of Wellness programs and the individual's engagement the key to their success.
27. **Expected RMW outputs:**
To attain the desired outcomes, RMW will undertake:
 - i. *Risk Stratification:* Use the Health Risk Appraisal results to stratify WFP employee population as low, moderate and high health risk carriers, offering tailored health risk reduction programs aimed at shifting down high and moderate health risk carriers and at maintaining those who are in the low risk category.
 - ii. *Know, improve your health and measure wellness:* offer employees multiple opportunities to self-assess their individual medical, mental and psychosocial health risks along with individually tailored risk reduction plans aimed at engaging them in a virtuous behavioral change of lifestyle while allowing them and the Organization to monitor their improvements.

⁹ M. Swan: "Emerging Patient-Driven Health Care Models: An Examination of Health Social Networks, Consumer Personalized Medicine and Quantified Self-Tracking": Int. J. Environ. Res. Public Health 2009, 6(2), 492-525; doi:10.3390/ijerph6020492

¹⁰ F. Khan: "The Shift to Consumer Driven Healthcare: the future of patient engagement": <http://healthcareexecutive-insight.advanceweb.com/Features/Articles/The-Shift-to-Consumer-Driven-Healthcare.aspx>. (Feb. 10, 2014)

Goal 3 – Creating an enabling and supportive workplace

28. **Desired outcome:** WFP Wellness supports the corporate effort to implement the WFP OSH Policy to offer staff a healthy and safe workplace where risks are identified and promptly managed.
29. **Case for change:** In line with the OSH Policy, WFP employee wellness depends not only on individual health, but also on career arrangements, working and living conditions, and work-life balance. This requires a "whole of Organization approach" wherein RMW with other WFP Divisions (e.g. including Security, Administration, Infrastructure and Facility Management and Human Resources) are tasked for the implementation of the OSH Policy at HQ and regional levels.
30. **Expected RMW outputs:**
To attain the desired outcome RMW will undertake:
 - i. *OSH Policy Implementation:* RMW will be an active player in the Advisory Committee on Occupational Safety and Health (ACOSH) in the development and implementation of an effective occupational safety and health (OSH) management system to identify, assess, manage, control and monitor safety and health risks at workplaces deriving from medical, psychological and physical work environment factors. Furthermore, RMW will promote the daily implementation of the OSH Policy and the required support to the ACOSH both at HQ and Regional levels as required, creating opportunities in the field to address the most prevalent health risks.
 - ii. *Internal Partnerships:* RMW will provide the evidence-based medical and psychosocial support to employees worldwide in partnership with internal stakeholders in order to guarantee to WFP workforce a holistic support to their wellness. In particular, in consideration of the important relationship between the physical work environment and Wellness, RMW's partnership with Administration and Field Engineering is crucial for the development and implementation of minimum standards for WFP workplaces, living accommodations, associated facilities and basic services (i.e. sanitation, access to potable water, etc.)
 - iii. *External Partnerships:* RMW will represent WFP in all interagency and private sector fora on corporate wellness to share experiences, benchmark with key comparators and seek opportunities for joint ventures, especially with other UN Agencies with comparable operational model.

Implementation - Timeline and Costing Principles

31. The implementation plan outlines how WFP will initially translate the Wellness Strategy into action in a phased approach: (Figure 1)

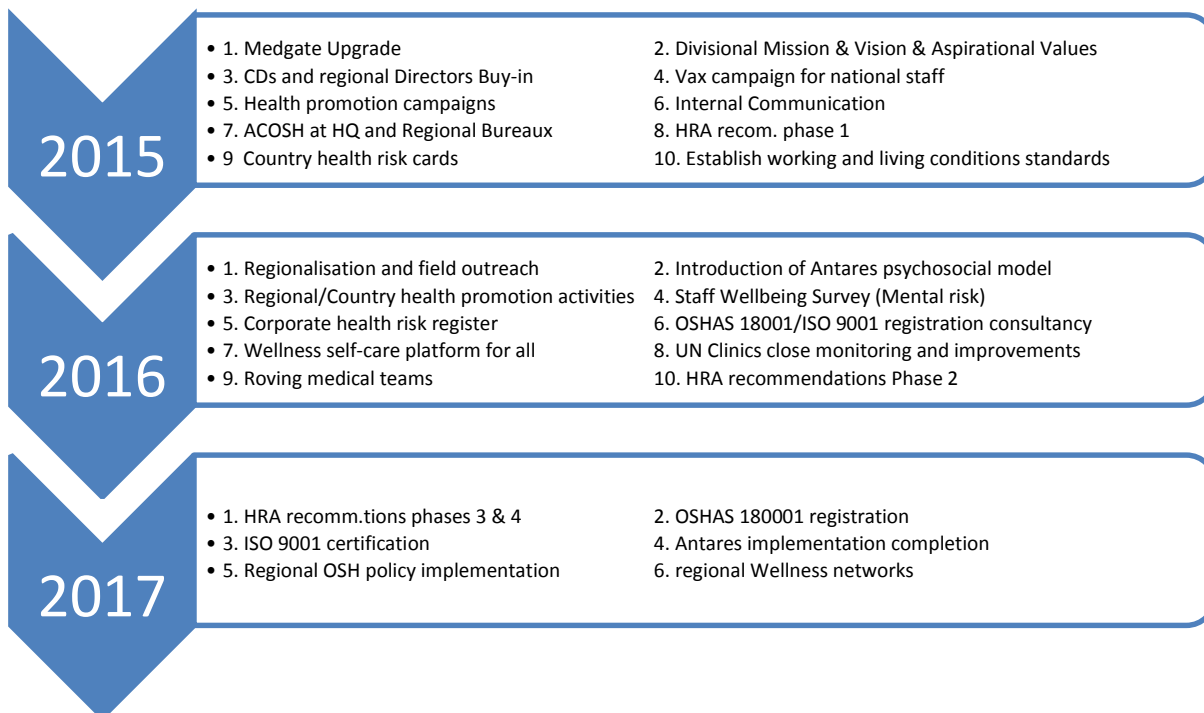


Figure 1: Wellness Strategy Phased Approach

32. The Wellness Strategy will be resourced through the regular budgeting process of the Management Plan.
33. To ensure timely and effective implementation, WFP will seek funding for specific projects – such as leveraging technology to have a central medical digital database or national staff vaccination campaigns – from extra-budgetary resources.
34. Detailed cost breakdown and budgetary proposals will be made through the regular budgeting process to ensure that investments in staff wellness are linked to other corporate priorities.
35. The underlying principle that RMW will follow to mobilize resources, will be to plug in areas of medical cost savings (e.g. medical insurances rebates), to re-invest them in health prevention in order to minimize costs on the Organization Management Plan while inducing a virtuous financial circle which ideally should reach self-sustainability.

ACRONYMS

ACOSH: Advisory Committee on Occupational Safety and Health

COMMS = Communications

DFS/DPKO = Department of Field Support/Department for Peacekeeping Organization

FAO = Food and Agricultural Organization

HR = Human Resources

HRA: Health Risk Appraisal

HQ = Headquarters

MEDGATE= Occupational Safety and Health Software Program

OSE = Emergencies

OSH: Occupational Safety and Health

RBx = Regional Bureaux

RMMI: Infrastructure and Facility Management

RMMA: Administration and Travel Branch

RMB = Budget

RMMH = HQ Security

RMMI = Field Engineering

RMT = Information Technology

RMW: Staff Wellness Division

RMQ: Field Security Division

UNDSS = UN Department Safety and Security

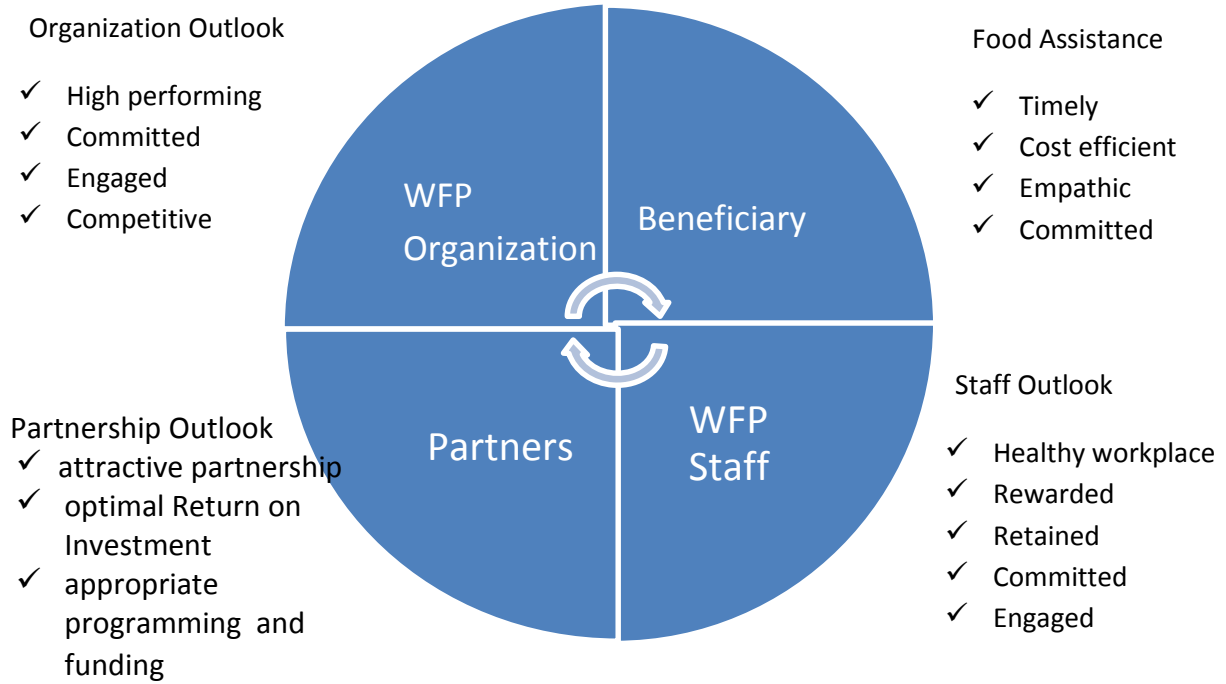
UNHCR = UN High Commissioner for Refugees

UNMDWG: UN Medical Director Working Group

UNSSCG: UN System Staff Counselling Group

WB = World Bank

Annex 1: Wellness Added Value for stakeholders



Annex 2: WFP Wellness Strategy 2015-2019:

| Goals | Objectives | Pillar 1 Medical and Mental Health | Pillar 2 Psychosocial health | Pillar 3 Work/living conditions | Pillar 4 Safety | Pillar 5 Workforce Stewardship |
|---|--|---|--|--|---|---|
| <p>GOAL 1: <i>OneWellness: shift the focus</i></p> | <p>Central digitalization</p> <p>Decentralization and Outreach</p> <p>Access to Medical and Psychosocial Services</p> | <ul style="list-style-type: none"> • Prevention (e.g. Field vaccine campaigns,) • Promotion (e.g. Health and Fitness campaigns) • Protection (e.g. medevacs, emergencies) • Wellness network (Regional Medical Officers) | <ul style="list-style-type: none"> • Prevention (e.g. Psychol. Preparation to hardship duty station) • Promotion (e.g. Standards for Psychosocial Wellness,) • Protection (e.g. Psychol. First Aid to critical incidents) • Regional Wellness Network (e.g. Regional Staff Counsellors, PSV's) | <ul style="list-style-type: none"> ☐ Prevention (e.g.: appropriate water and sanitation) ☐ Promotion: (e.g. Accommodation standards in the field) ☐ Protection: (e.g. Timely and up to standards accommodation in emergency) ☐ Regional Wellness Network | <ul style="list-style-type: none"> ☐ Prevention: (SOPs for incidents prevention) ☐ Promotion: (Safety standards) ☐ Protection: (Safety Management System) ☐ Regional Wellness Network | <ul style="list-style-type: none"> • Prevention: (e.g. preparedness, wellness aware management) • Promotion: (e.g. work/life balance) • Protection: (staff admin support in emergencies and critical incident) |

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| GOAL 2: <i>Promoting a corporate culture of health</i> | Risk stratification Self-assessment Customer directed care | Know your health Improve your health Measure Wellness | Know your health Improve your health Measure Wellness | Be aware, improve and measure health of your work and living conditions | Safety monitoring and reporting risk stratification | Ensure an enabling, supportive and respectful workplace | |
| GOAL 3: <i>Creating an enabling and supportive workplace</i> | OSH policy implementation Internal partnership External partnership | Implementation of OSH Standards to mitigate work related stress, injuries, illnesses, ACOSH HQ and Regional Bureaux (RMMI – RMMA – RMQ—RMMH—RMB—RMT—HR—Rosters—OSE—COMMS) | | | | | UNMDWG, UNSSCG, WHO, FAO, UNHCR, WB, Outsourced Care Providers |

Dimensions:

Prevention: The action of stopping something negative from happening or arising by screening apparently normal conditions or situations;

Promotion: Supporting healthy or correct behaviours or practices, without screening purposes;

Protection: Correcting dangerous situations or pathologies, once they are already established, to avoid further damage.