

## **Annex 6**

### **The Impact of COVID-19 on the Mental Health and Well-being of UN Personnel: Recommendations, implementable actions and good practices**

#### **Background**

1. The UN System Workplace Mental Health and Well-being Strategy Implementation Board in partnership with the UN Medical Directors, UN Staff and Stress Counsellors Group and the OHS forum submitted a report for the HLCM 43rd session in April 2022. This was submitted as part of the Progress Report by the OHS Forum, CEB/2022/HLCM/4, annex 5, title: *Analysis and Recommendations around the Impact of COVID-19 on the Mental Health and Well-being of UN Personnel*. The report was developed based on analysis of survey data collected from a number of UN surveys and consisted of preliminary recommendations based on the data and indicating that further details of the recommendations would be presented at the HLCM 44<sup>th</sup> session.
2. The ensuing report focuses on implementable actions in UN organizations, adaptable to local needs and good practice examples from both UN and external organizations. Additionally, system-wide activities are also recommended to minimise the duplication of effort and resources.

#### **Recommendations**

3. The analysis and recommendations (see Annex I and Annex II) are structured around the following key areas:
  - a) Workplace factors;
  - b) Role of Managers and Leaders;
  - c) Psycho-social support; and
  - d) Groups of personnel who experienced an increased impact (for example, gender, age, employment status).
4. These recommendations are in-line with key pillars of the current 2018-2023 UN System Workplace Mental Health and Well-being Strategy.<sup>1</sup> The findings provide an opportunity to expand on priority actions from the strategy based on current data and needs. If approved, these recommendations could be added to the Implementation Guide for the mentioned Mental Health and Well-being Strategy. This links to a separate paper being presented to HLCM (CEB/2022/HLCM/14/Annex 7) regarding the current UN System Workplace Mental Health and Well-being Strategy plus 2024 and beyond.

---

<sup>1</sup> <https://www.un.org/en/healthy-workforce/files/Strategy%20-%20full.pdf>

### Proposed actions for the HLCM

5. The HLCM is invited to:
  - a) Endorse the recommendations submitted by the working group of the UN Mental Health Strategy Implementation Board (MHSIB) containing recommendations, implementable actions and good practices;
  - b) Agree to take action to implement where appropriate;
  - c) Lead by example and take the UN online “Workplace Mental Health and Well-being: Lead and Learn Programme;”<sup>2</sup>
  - d) Consider contributing to the costs of the activities of the remaining 15-months of the Strategy, as outlined in Annex II to document CEB/2022/HLCM/14/Annex 7:
    - Request a the MHSIB to present a progress report at the HLCM 45<sup>th</sup> and 46<sup>th</sup> sessions;
    - Support the upcoming activities of World Mental Health Day;
    - Commit to use the Implementation Guide and Scorecard.

---

<sup>2</sup> <https://www.unssc.org/courses/workplace-mental-health-and-well-being-lead-and-learn>

**Annex I**  
**Summary of Recommendations**

Area	Recommendation
<b>1 Workplace factors</b>	<p><b>Short-term recommendations</b></p> <p>UN Organizations are encouraged to develop frameworks, policies, and practices to enable healthy working practices. This could include:</p> <ul style="list-style-type: none"> <li>▪ Encourage disconnecting time and ensure that harmonious work/life balance is maintained</li> <li>▪ Explore remote work modalities</li> <li>▪ Encourage flexibility on how personnel undertake their role and working hours within policy limits</li> <li>▪ Allow job control and autonomy where possible.</li> </ul> <p>These arrangements are best agreed at a team or duty station level to allow for local circumstances.</p>
	<p><b>Medium - Long-term recommendations</b></p> <p>It is recommended that psycho-social risk assessments are undertaken, in partnership with UN counsellors, to develop an understanding of contextualized risks and the development of a mitigation plan.</p>
<b>2 Role of managers and leaders</b>	<p><b>Short-term recommendations</b></p> <ol style="list-style-type: none"> <li>1. Senior leaders to communicate the importance of workplace culture on mental health and well-being and provide simple, implementable ideas.</li> <li>2. All managers and leaders are encouraged to undertake the UN online “Workplace Mental Health and Well-being: Lead and Learn Programme.”</li> </ol>
	<p><b>Medium - Long-term recommendations</b></p> <ol style="list-style-type: none"> <li>1. Roll out resources that have been developed in all UN organizations. This includes the UN online “Workplace Mental Health and Well-being: Lead and Learn Programme,” podcasts and the “mental health and well-being dialogue;”</li> <li>2. Develop additional tools and (training) resources: for leaders and managers as well as human resources professionals; on workplace culture and creating a positive working environment; on prevention; and on stigma reduction; and</li> <li>3. Incorporate mental health and well-being into leadership frameworks, performance requirements, strategic plans, recruitment and induction plans.</li> </ol>
<b>3 Psycho-social support</b>	<p><b>Short-term recommendations</b></p> <p>UN organizations are encouraged to:</p>

Area	Recommendation
	<ol style="list-style-type: none"> <li>1. undertake a robust communications effort to ensure staff are aware of existing internal and external mental health support services;</li> <li>2. undertake an audit of psychosocial services available through internal counsellors, insurance providers and other services. A template can be provided to assist with this process; and</li> <li>3. use mechanisms that closely track usage and impact of their internal psycho-social support systems.</li> </ol> <p><b>Medium - Long-term recommendations</b> UN organizations are encouraged to utilize the minimum requirements and quality standards of professional support mechanisms outlined in the United Nations Staff/Stress Counsellors Group’s (UNSSCG) paper on “Guidance on Professional Standards for UN Counsellors” to track compliance of staff counsellors. A template can be provided to assist with this process.</p>
<b>4 Groups of personnel who experienced an increased impact</b>	<p>UN organizations are encouraged to:</p> <ol style="list-style-type: none"> <li>1. focus on having an inclusive workplace environment and enhancing autonomy to ensure all personnel are not discriminated against and can balance competing needs; and</li> <li>2. in partnership with UN counsellors, identify and implement innovative ways to provide informational and emotional support to the families of staff members, which then decreases the likelihood of mental health issues in the staff member. Psychosocial wellbeing of staff is directly related to the wellbeing of dependents, which has been identified in several of the studies mentioned in this report.</li> </ol>

## Annex II Recommendations in Detail

### 1 Workplace Factors: Short-term recommendations

Key Area	Job control, autonomy, flexibility
<b>Recommendations</b>	<p>UN Organizations are encouraged to develop frameworks, policies and practices to enable healthy working practices. This could include:</p> <ul style="list-style-type: none"> <li>▪ disconnecting time and ensure that harmonious work/life balance is maintained</li> <li>▪ explore remote work modalities</li> <li>▪ encouraging flexibility on how personnel undertake their role and working hours within policy limits</li> <li>▪ allowing job control and autonomy where possible.</li> </ul> <p>These arrangements are best agreed at a team or duty station level and allow for local circumstances.</p>
<b>Who benefits</b>	All personnel
<b>Responsible functional groups</b>	IT, HR, Managers
<b>Action</b>	<p>As much as is practical, personnel should be given autonomy about how they do their work and how they organize their working day. An organization, duty station, team, and job role specific approach to the enhancement of job control and autonomy is encouraged to ensure an appropriate contextual approach. Autonomy is related to when, how and where work is undertaken. Flexible working arrangements should be encouraged, supported by policy and high-level management. This was noted as a key issue from survey results and is supported by the evidence. Examples of how this could be done is allowing team level decisions in work schedules, encouraging managers to have conversations with their teams and direct reports about how they work best as a means to signify care, enhance autonomy, and strengthen trust. By involving employees in deciding which type of flexibility they need, UN Organizations may be able to identify alternative work designs to further develop the workforce.</p> <p>Evidence-based educational material can be developed at a system-wide level to support this action.</p>
<b>Timeline</b>	Recommend action is taken by UN organizations by the end of 2023. System-wide resources could be developed to assist the implementation of this action at minimal cost.
<b>Cost</b>	None anticipated at an organizational level with possible cost savings due to productivity benefits.
<b>Implementation</b>	<p>Appropriate policies and educational materials would support the implementation of this recommendation.</p> <p>Policies should clearly outline the responsibilities of organizations, managers and personnel and focus on allowing maximal flexibility within the confines of organizations requirements. Flexible work arrangements will depend on the work function and there is a need for a measured approach. The risk of isolation and other psycho-social factors should also be considered.</p>

	<p>Managers should be provided with information about how to encourage autonomy and flexibility while focusing on deliverables. Managers should be aware of how to set clear expectations, such as:</p> <ul style="list-style-type: none"> <li>▪ The quantity of work that should be done</li> <li>▪ The channels employees should be available</li> <li>▪ When attendance is mandatory for meetings, whether virtually or in-person</li> <li>▪ Providing clearer objectives and goals (decreasing ambiguity)</li> <li>▪ Focusing on results and deliverables rather than where, when or how it is achieved.</li> </ul>
Good practice	<p>External:</p> <ul style="list-style-type: none"> <li>▪ For more than a decade Unilever has been offering employees the opportunity to work anytime, anywhere, as long as they meet business needs.</li> <li>▪ Google is planning a hybrid work week where employees will work from the office about three days a week, and two days "wherever they work best," according to a company memo.</li> <li>▪ Microsoft is empowering their employees to make decisions regarding where they work and during what hours. The remote work policy is no longer defining those things for the employees, rather, it serves as guidance to help employees make the best decisions they can regarding their own work schedules.</li> </ul> <p>Internal:</p> <p>Many UN Organizations have implemented flexible working arrangements. Further analysis is required to determine what good practice looks like within UN Organizations.</p>

### 1 Workplace Factors: Medium – long term recommendations

Key Area	Psycho-social risk assessments
<b>Recommendation</b>	It is recommended that psycho-social risk assessments are undertaken in partnership with UN Counsellors to develop an understanding of contextualized risks and the development of a mitigation plan. This is aligned with other recommendations from the OHS forum.
<b>Who benefits</b>	All personnel
<b>Responsible functional groups</b>	HR, Counselling, IT
<b>Action</b>	Piloting psycho-social risk assessments in one duty station using internal resources to reduce costs and build internal competencies is recommended. These risk assessments would highlight workplace risk factors at a local level and allow for tailored actions to be put in place to minimize these risks. Well established methodologies exist within organizations to conduct workplace risk assessments that result in actionable

	<p>outcomes including workflow, delegation of tasks, utilization of staff skills, areas for improvement of skills, workplace culture etc. that can be implemented using internal resources which would reduce costs and build internal competencies. A group of facilitators – staff members from various departments with relevant expertise – will conduct these assessments in collaboration with the relevant office.</p> <p>Psycho-social risk assessments conducted from a country perspective may provide interventions that are too vague, therefore, an agency specific approach is recommended. By offering a systemic and holistic intervention programme customised to each office, colleagues can be supported within their context, not as isolated cases. Through an agency specific approach, the agency can capitalize on its internal expertise for facilitation.</p> <p>As an instrument, the Copenhagen Psychosocial Questionnaire (COPSOQ) is recommended due to its psychometric properties. The COPSOQ can provide a detailed picture of where the gaps are, thus allowing for a context specific suite of interventions that support the team with what they identified as needs.</p>
<b>Timeline</b>	<p>12-month pilot, potential timeline:</p> <ul style="list-style-type: none"> <li>▪ 1<sup>st</sup> month: interviews and first assessment, review results and develop plan</li> <li>▪ 4<sup>th</sup> month: workshops as required by interventions</li> <li>▪ 6<sup>th</sup> month: mid-assessment to measure impact of intervention; review and adjust plan</li> <li>▪ 8<sup>th</sup> month: workshops as required by interventions</li> <li>▪ 12<sup>th</sup> month: final post-intervention assessment, plan for continued improvement, final report</li> </ul>
<b>Cost</b>	<p>COPSOQ access is free.</p> <p>Time will be required by internal resources to undertake the assessment, collect the data and make recommendations. The use of internal resources to pilot will lead to reduced costs and benefits through strengthening internal competencies. It is expected that a one-year time commitment will be required by the facilitators of the assessment and intervention.</p> <p>Resources may be required to enact any recommendations.</p>
<b>Implementation</b>	<ol style="list-style-type: none"> <li>1. The Country Office will determine upfront ‘what success looks like’. A pre-assessment phase will inform the facilitators which assessment instrument is best suited to the problems faced by the office</li> <li>2. The assessment phase will provide a baseline, as well as provide direction for the interventions required. Results of the initial assessment should be presented to the team, and they should be included in the interpretation of the results and help to define interventions.</li> <li>3. An intervention plan will be developed and implemented by the Country Office and facilitators based on initial assessment.</li> <li>4. Improvement can be assessed by using the same measures used during the initial assessment at a defined point in time to gauge the degree of change. A mid-assessment can be conducted to measure impact of the interventions so far, which can guide the team and facilitators to review and adjust the intervention plan.</li> <li>5. A final post-intervention assessment can take place, resulting in a final report and the drafting of a plan for continued improvement.</li> </ol>

<b>Good practice</b>	<p>UNDP has been undertaking psycho-social risk assessments at team or country office level and making recommendations based on the assessments.</p> <p>Since 2021 the WHO EURO workforce has participated in a survey covering all the areas of the WHO healthy workplace framework, including a psycho-social risk assessment. The questionnaire is based on internationally validated instruments (e.g. COPSOQ), and the results are available at the Unit level. The intention is to support managers to discuss with their team what they can do themselves, as a team, to address the risk factors identified in their Unit. These discussions can also identify the actions the Organization can take to support the team. Additionally, the results of this survey are guiding the recommendations of the Committee for Health, Safety and Wellbeing to the Regional Director regarding staff health and wellbeing. With this initiative, EURO is now addressing mental health in the workplace at the individual, team, and organizational level with primary, secondary, and tertiary interventions.</p> <p>The UN Department for Safety and Security (DSS) Critical incident Stress management Section (CISMS) has developed an Information and Data Management (IDM) Platform that has a battery of validated instruments in English, French and Spanish, and have the expertise to analyse these. The use of the IDM Platform and the expertise for data analysis can be utilised by UN system organizations.</p>
----------------------	--

## 2 Role of Managers and Leaders: Short-term recommendation

Key Area	Communication and training
<b>Recommendations</b>	<ol style="list-style-type: none"> <li>1. Senior leaders to communicate the importance of workplace culture on mental health and well-being and provide simple, implementable ideas.</li> <li>2. All managers and leaders encouraged to undertake the UN online “Workplace Mental Health and Well-being: Lead and Learn Programme.”</li> </ol>
<b>Population</b>	All UN Leaders and Managers
<b>Functional groups</b>	Heads of Entities, other senior leaders, human resources
<b>Action</b>	<ol style="list-style-type: none"> <li>1. Senior leaders to communicate their commitment to mental health and well-being, the importance of workplace culture on mental health and well-being and provide simple, implementable ideas to support this. Template communications can be provided that can be adapted for this purpose.</li> <li>2. Managers and leaders are encouraged to undertake the UN online “Workplace Mental Health and Well-being: Lead and Learn Programme” and communicate that they have done this. This programme could be incorporated into performance plans.</li> </ol> <p>This online learning programme is a tool to develop UN leaders and managers’ knowledge, skills, and accountability, to support the mental health and well-being of personnel. The four modules of the programme are:</p> <ol style="list-style-type: none"> <li>a) Mental health and well-being in the workplace</li> <li>b) Personal well-being and thriving as a manager</li> </ol>



<b>Key Area</b>	<b>Communication and training</b>
	<ul style="list-style-type: none"> <li>c) Supporting a colleague experiencing poor mental health</li> <li>d) Addressing stigma related to mental health problems</li> </ul>
<b>Timeline</b>	By end of 2023
<b>Cost</b>	None anticipated. The development of the UN online “Workplace Mental Health and Well-being: Lead and Learn Programme” is being offered free to all UN personnel. Managers and leaders would need to spend approximately eight non-concurrent hours by the end of 2023 to complete the Programme.
<b>Implementation</b>	<ol style="list-style-type: none"> <li>1. Senior leaders could share messages through broadcasts, events emphasizing the importance of mental health and well-being and communicating what action they are taking to support personnel. Messages could focus on stigma reduction, personal experience and actions being undertaken to create a healthy workplace. The <a href="#">Healthy Workforce   United Nations</a> website link could be shared and the resources on the site used to assist with messaging.</li> <li>2. UN Organizations are encouraged to develop a roll-out plan for the UN online “Workplace Mental Health and Well-being: Lead and Learn Programme.” This could be undertaken in a number of ways: <ul style="list-style-type: none"> <li>▪ Designate a focal point for the roll-out of the programme and working group with key stakeholders (for example, human resources, learning managers, counsellors), and provide term of reference to support the designated focal points, as well as training;</li> <li>▪ Adopt a cascading approach, with senior leaders undertaking the programme and communicating with direct reports what they learned; and/or</li> <li>▪ Ensure performance plans and reviews include learning and capacity building about mental health and wellbeing in the workplace.</li> </ul> </li> <li>3. To monitor progress, the following can be tracked: <ul style="list-style-type: none"> <li>▪ Senior leaders have communicated messages;</li> <li>▪ Collect percentages of senior staff completing the Lead and Learn programme; and</li> <li>▪ Performance review (system) includes objectives for managers on mental health and wellbeing and creating a healthy workplace</li> </ul> </li> </ol>
<b>Good practice</b>	Good practice in this area requires a proactive approach from UN Organizations and the development of a roll out plan. Early examples of this can be found at UNDP, IAEA and DSS within the UN Secretariat who have sent regular communication encouraging participation on the programme.

## 2 Role of Managers and Leaders: Medium – Long-term recommendation

<b>Key area</b>	<b>Training and implementation</b>
<b>Recommendation</b>	<ol style="list-style-type: none"> <li>1. Roll out the UN online “Workplace Mental Health and Well-being: Lead and Learn Programme” and the “mental health and well-being dialogue” in UN organizations;</li> </ol>

<b>Key area</b>	<b>Training and implementation</b>
	<ol style="list-style-type: none"> <li>2. Develop and roll-out additional tools and (training) resources for leaders and managers as well as human resources professionals and on workplace culture and creating a positive working environment, stigma and prevention; and</li> <li>3. Incorporate mental health and well-being into leadership frameworks, performance requirements, strategic plans, recruitment and induction plans.</li> </ol>
<b>Population</b>	Leaders and managers
<b>Functional groups</b>	HR, Counselling, Learning, Communications
<b>Action</b>	<ol style="list-style-type: none"> <li>1. The “mental health and well-being dialogue” is rolled out in UN Organizations. The main objective of this dialogue is to start and normalize the conversation about mental health and well-being in the workplace. The dialogue is envisaged to enable participants to: <ol style="list-style-type: none"> <li>a) describe some factors at work that can impact mental health and well-being;</li> <li>b) note some simple actions they can take to support each other as a team; and</li> <li>c) find support resources.</li> </ol> <p>At a UN organization level, each organization to develop an implementation plan to roll-out the “mental health and well-being dialogue,” supported by system-wide resources. Materials include a facilitator’ guide and powerpoint slides which will be provided free of charge to all UN Organizations. These have been piloted across a range of settings and amendments made in response to this.</p> <p>At a system-wide level a support mechanism needs to be developed for the roll-out of the mental health and well-being dialogue. This would ensure that support and resources are in place for managers delivering the dialogues. This would include:</p> <ul style="list-style-type: none"> <li>• Project lead to provide support and advice roll out approaches and plans</li> <li>• Well-structured and designed training sessions for counsellors</li> <li>• A platform and a community of practice to exchange expertise and good practices.</li> </ul> </li> <li>2. Develop additional tools and (training) resources: for leaders and managers as well as human resources professionals; on workplace culture and creating a positive working environment; on prevention; and on stigma reduction; and</li> <li>3. Incorporate mental health and well-being into leadership frameworks, performance requirements, strategic plans, recruitment and induction plans: leadership frameworks, performance processes, induction programmes, recruitment processes, to be reviewed with a view to promoting mental health and well-being and ensuring people with a mental health condition are not discriminated against.</li> </ol>
<b>Timeline</b>	By end 2023
<b>Cost</b>	Roll-out of the “mental health and well-being dialogue:” while an individual UN organization approach could be taken for this, there are benefits for a UN system-wide support structure which would include development of a learning module how to deliver the ‘mental health and well-being dialogue’ and the development of a community of practice. Cost for this would be approximately US\$60,000.

Key area	Training and implementation
	Development and rolling-out of additional tools and (training) resources: for leaders and managers as well as human resources professionals; on workplace culture and creating a positive working environment; on prevention; and on stigma reduction. Including project management costs and translation into the six UN official languages approximate cost is US\$100,000.
<b>Implementation</b>	<ol style="list-style-type: none"> <li>1. UN Organizations to communicate about available resources on mental health and well-being and provide links to the <a href="#">Healthy Workforce   United Nations</a> website or include on internal intranet sites.</li> <li>2. UN Organizations to develop an implementation plan to roll-out the mental health and well-being dialogue, supported by system-wide resources. This could be undertaken in a number of ways: <ul style="list-style-type: none"> <li>▪ Develop internal, tailored roll-out plan considering context and resources.</li> <li>▪ Ensure support mechanisms are in place including counsellors attending train-the-trainer sessions held at a system-wide level</li> <li>▪ Link with community of practice</li> <li>▪ Roll out from senior levels and cascading throughout the organization</li> <li>▪ Provide managers with the tools and ask them to complete the dialogue within a given timeframe.</li> <li>▪ Roll out at different duty stations at different times.</li> </ul> </li> <li>3. Mental health and well-being are incorporated in human resources policies, practices and procedures. <ul style="list-style-type: none"> <li>▪ Review leadership frameworks, performance review practices and induction programme and consider mental health and well-being could be incorporated.</li> <li>▪ Review recruitment practices to ensure those with mental health conditions have equal access</li> </ul> </li> <li>4. To track completion: <ul style="list-style-type: none"> <li>▪ Additional resources for leaders and managers are developed and made available to all UN personnel</li> <li>▪ A support system for the mental health and well-being dialogue roll-out and implementation is developed at a system-wide level</li> <li>▪ Number of mental health and well-being dialogues conducted.</li> <li>▪ Mental health and well-being incorporated into leadership frameworks, performance reviews and induction programmes.</li> </ul> </li> </ol>
<b>Good practice</b>	This recommendation focusses of the development of new resources and as such good practice will be established and conveyed in future HLCM reports.

### 3 Psycho-social Recommendations: Short-term recommendations

<b>Key Area</b>	<b>Psychosocial services</b>
<b>Recommendations</b>	<p>UN Organizations are encouraged to:</p> <ol style="list-style-type: none"> <li>1. undertake a robust communications effort to ensure staff are aware of existing internal and external mental health support services.</li> <li>2. undertake an audit of psychosocial services available through internal counsellors, insurance providers and other services. A template can be provided to assist with this process; and.</li> <li>3. use mechanisms that closely track usage and impact of their internal psycho-social support systems.</li> </ol>
<b>Who benefits</b>	All personnel
<b>Responsible functional groups</b>	HR, Counselling, Communications
<b>Action</b>	<p>An internal audit within each agency is recommended to inform the proposed robust communications drive which will enhance awareness of available support services. This audit is intended to count the number of counsellors in the agency, and to collect the terms of reference (TOR) for each counsellor. The TORs can then be used to keep track of specific services offered.</p> <p>It is important to recognize that the impact of internal psycho-social support systems is difficult to measure outside of a research facility. Thus, measuring impact is dependent on correlates and indicators including demand for the service, creation of positions, and cross-functional committee seats. Strategic plans could also be an indicator of impact through tracking the desired outcomes of the service. There is great utility in tracking the usage of internal support systems. To better track usage, it is recommended to distinguish between the types of consultations provided. It is suggested to discriminate between i) initial contact only, ii) clinical contact requiring individualized serviced support, iii) managerial contact requiring customized serviced support, and iv) seminars.</p>
<b>Timeline</b>	Monthly monitoring ongoing basis
<b>Cost</b>	Time taken to undertake required tasks, such as mapping psycho-social resources, developing communication messages and put in place structures to track service usage.
<b>Implementation</b>	<p><b>To track psychosocial services available to inform a communications drive:</b></p> <ol style="list-style-type: none"> <li>1. Count of number of counsellors in agency</li> <li>2. Collection of TORs for counsellors of each agency to track services offered</li> <li>3. Identification of physical locations of counsellors</li> <li>4. Count number of cost shared UN counsellors available for personnel.</li> </ol> <p><b>To measure the impact, the following could be tracked:</b></p> <ol style="list-style-type: none"> <li>5. Cross-functional committee seats mental health services participate in</li> </ol>

Key Area	Psychosocial services
	<p>6. Strategic plan desired outcomes</p> <p>7. Are services provided to family members? Which services?</p> <p><b>To measure the usage, the following should be tracked monthly:</b></p> <p>8. Number of consultations</p> <p>9. Who the consultations were with, divided into following groups:</p> <p style="padding-left: 20px;">i) initial contact, ii) clinical contact requiring serviced support, iii) managerial contact, iv) seminars.</p> <p>10. Reason for consultation (e.g., workshops, team support, advice, inter-collegial conflict, conflict related to supervisor, un-collegial work environment etc.).</p>
<b>Good practice</b>	<p>WFP measures the impact of their communication through monitoring:</p> <ul style="list-style-type: none"> <li>▪ Number of attendees of webinars</li> <li>▪ Number of downloads of Wellbeing app</li> </ul> <p>UNDP:</p> <ul style="list-style-type: none"> <li>▪ Internal all-staff communications email from Headquarters listing available resources of psychosocial support and upcoming events as well as sharing relevant resources individually as a follow up on incoming inquiries, and with HR focal points on upcoming events</li> <li>▪ Wellbeing site via SharePoint with available resources, contact information and upcoming events schedule</li> <li>▪ Yammer Wellbeing café page, with available resources, useful tips, and upcoming events</li> <li>▪ Interagency Wellbeing app</li> <li>▪ Feedback surveys post-event and post-individual counselling</li> </ul> <p>IAEA:</p> <ul style="list-style-type: none"> <li>▪ Creation and promotion of Staff Wellbeing Portal</li> <li>▪ Continuous campaigns and events announced through the intranet, accessible to all Vienna-based-organizations</li> <li>▪ Utilization of world mental health month and other UN days, e.g., autism awareness day etc. to create visibility and awareness</li> <li>▪ Regular cooperation with other departments</li> <li>▪ Comprehensive statistical records of usage and impact of internal psycho-social support systems being kept and reported annually</li> </ul>

<b>Key Area</b>	<b>Psychosocial services</b>
	<p>External example: RAND National Defence Research Institute tracking of:</p> <ul style="list-style-type: none"> <li>▪ Reasons for seeking counselling</li> <li>▪ Satisfaction with speed of being connected to counsellor</li> <li>▪ Satisfaction with confidentiality of personal and family information held by program</li> </ul>

### 3 Psycho-social Recommendations: Medium – long-term recommendations:

<b>Domain</b>	<b>Psycho-social support</b>
<b>Key Area</b>	Psychosocial services
<b>Recommendation</b>	UN Organizations are encouraged to adopt the minimum requirements and quality standards of professional support mechanisms outlined in the United Nations Staff/Stress Counsellors Group’s (UNSSCG) paper on “Guidance on Professional Standards for UN Counsellors” to track compliance of staff counsellors. A template can be provided to assist with this process.
<b>Who benefits</b>	All personnel
<b>Responsible functional groups</b>	HR, Wellness, Counselling
<b>Action</b>	<p>UN Organizations to ensure agreed UNSSG standards are implemented.</p> <p>Minimum requirements and quality standards of professional support mechanisms have been outlined in the United Nations Staff/Stress Counsellors Group’s (UNSSCG) paper on Guidance on Professional Standards for UN Counsellors. This paper outlines guidance for professional standards to ensure the protection of staff, and that counsellors are competent to practice and work to the highest ethical standards. Within this paper, UN agencies are held accountable for their own adoption and implementation of the guidance, with support offered by UNSSCG. Thus, agencies are requested to utilize the guidance to track compliance of staff counsellors.</p> <p>Additional guidance can be found in the UN System Workplace Mental Health and Well-being Implementation Guide (see Annex II in CEB/2022/HLCM/14/Annex 7).</p>
<b>Timeline</b>	To be included in annual reviews.
<b>Cost</b>	Time would be required to ensure compliance measures are met and structures put in place to review this.
<b>Implementation</b>	<p><b>Track the compliance of the staff counsellors with professional standards as set out by UNSSCG:</b></p> <ol style="list-style-type: none"> <li>1. System level and experience: <ul style="list-style-type: none"> <li>▪ The counsellor must have a minimum of five years of experience</li> </ul> </li> <li>2. Malpractice and/or Violations of Professional Standards as stated in the license: <ul style="list-style-type: none"> <li>▪ The counsellor must have no currently pending allegations of violation of ethical standards or malpractice suits</li> <li>▪ The counsellor must have no history of licensure, registration, or certification suspensions or revocations</li> </ul> </li> </ol>

Domain	Psycho-social support
	<p>3. Educational qualifications:</p> <ul style="list-style-type: none"> <li>▪ The counsellor must have an Advanced/Postgraduate University Degree or equivalent in psychology, counselling, psychology, clinical psychology, psychiatry (medical or nursing), marriage and family therapy, or social work with evidence of training in mental health counselling</li> <li>▪ The counsellor who does not possess a license, certification, or professional membership must provide an official transcript documenting extensive course work including courses on theory, skills, and ethics plus face-to-face client work, with evidence of supervised client hours while in a student status</li> </ul> <p>4. Licensure, Certification and Registered Membership:</p> <ul style="list-style-type: none"> <li>▪ The counsellor possesses an active license or certification or demonstrates registered membership in a legitimate professional organization in the field most relevant to their degree, including psychiatry (medicine or nursing), psychology, counselling, marriage and family therapy, and social work.</li> <li>▪ The counsellor already working in the UN system who does not possess licensure or certification, or registration with a professional organization for reasons related to residency is working to obtain licensure, certification, or membership in a professional organization no later than April 1, 2023.</li> </ul> <p>5. Continuing Professional Development:</p> <ul style="list-style-type: none"> <li>▪ The counsellor demonstrates that they are continually updating their professional expertise as part of the licensure and licensure renewal procedure.</li> <li>▪ Human Resources of the counsellors' respective agencies assume responsibility for ensuring that staff maintain and update their licenses.</li> </ul>
<b>Good practice</b>	<p>WFP:</p> <ul style="list-style-type: none"> <li>• Embedded UNSSCG guidelines into Terms of Reference and staff counsellor profiles</li> </ul> <p>IAEA:</p> <ul style="list-style-type: none"> <li>• Auditing available psychosocial services: Annual report in progress</li> </ul> <p>CISMU:</p> <ul style="list-style-type: none"> <li>• Provides technical guidance and ensures professional standards of practice for staff/stress counsellor recruited in DPO/DPPA mission, and UN country offices.</li> <li>• Conducts a standard certification training for UN counsellors and External Mental Health Professionals.</li> <li>• Conducts regular regional training sessions for the counsellors in each region.</li> </ul>

#### 4 Groups of personnel who experience an increased impact

<b>Recommendation</b>	<p>UN organizations are encouraged to:</p> <ol style="list-style-type: none"> <li>1. focus on having an inclusive workplace environment and enhancing autonomy to ensure all personnel are not discriminated against and can balance competing needs.</li> <li>2. in partnership with UN counsellors, could identify and implement innovative ways to provide informational and emotional support to the families of staff members, which then decreases the likelihood of mental health issues in the staff member. Psychosocial wellbeing of staff is directly related to the well-being of dependents which has been identified in several of the studies mentioned in this report.</li> </ol>
<b>Who benefits</b>	All personnel
<b>Responsible functional groups</b>	HR, Well-being, Counselling, Diversity and Inclusion teams
<b>Action</b>	<p>In the report presented at the April 2022 HLCM meeting it was noted that some groups experienced a greater impact on their mental health and well-being. The data identified a number of groups of personnel as being at greater risk of poor mental health. This was related to gender, age, employment status, family situation, pre-existing mental health condition, or being a personnel victim of domestic abuse. Whilst there may be opportunities to consider targeted interventions for these groups, generally the principles laid out in the earlier recommendations would be beneficial for all and reduce the impact of challenges faced. We thus recommend that UN Organizations acknowledge that personnel exist within complex systems with unique circumstances exacerbated by the pandemic. If we focus on having an inclusive workplace and increasing autonomy personnel, we can reduce discrimination and increase the level of autonomy personnel will be more likely to be able to manage competing demands.</p>
<b>Timeline</b>	NA
<b>Cost</b>	Resources would be required to provide to support family members. Costs would vary dependent on the type of support made available.
<b>Implementation</b>	<p><b>Workplace factors:</b> increasing autonomy allows personnel to better manage the challenges of balancing workload and care giving responsibilities as they are more able to consider best how to undertake their competing priorities. This could reduce some of the extra challenge that personnel face with care giving duties. <u>If we focus on having an inclusive environment and reduce discrimination, this will have a positive impact for those who are more likely to experience circumstances leading to poorer health outcomes.</u></p> <p>Leaders should consider how additional circumstances and burdens can be considered when introducing policies related to flexibility and work-life harmony.</p> <p><b>Leaders and managers:</b> Training leaders and managers to create a workplace environment that promotes good mental health and well-being ensures that irrelevant of the issues that are being faced they are more likely to be supportive, allow increased autonomy, and refer someone to help where needed. Personnel experiencing long-covid will be able to have accommodations made where needed. For example, the Lead and Learn programme gives managers increased skills to notice if a staff member is experiencing challenges and how to support them through</p>



	<p>this. Managers will be more likely to create an environment personnel feel able to disclose if they are not ok. Personnel experiencing long-covid will be able to have accommodations made where needed.</p> <p>The following should be considered:</p> <ul style="list-style-type: none"> <li>▪ Do managers require additional training on how to identify personnel circumstances that require support?</li> <li>▪ Do managers require additional training on how to support personnel based on their circumstances?</li> <li>▪ Do managers require additional support programmes?</li> <li>▪ Do managers regularly communicate with staff about programs, policies and accommodations available?</li> </ul> <p><b>Psycho-social support:</b> Through ensuring effective psycho-social support mechanisms, all personnel will be able to access quality support for their circumstances.</p> <p>The following should be considered:</p> <ul style="list-style-type: none"> <li>▪ Are our current support services sensitive to individual circumstances?</li> <li>▪ What training do our psycho-social service providers need to ensure they can meet the need?</li> <li>▪ Programmes to support counsellors</li> <li>▪ Programmes to provide familial support</li> </ul> <p>In implementing recommendations related to workplace factors, the role of leaders and managers and psycho-social support these issues should be considered.</p>
<b>Good practice</b>	<p>WHO:</p> <ul style="list-style-type: none"> <li>▪ Online support <u>groups for personnel who experienced an increased impact</u>: offered online support groups with limited places in order to increase interaction and provide a safe place for people to share concerns, challenges, and best practices (i.e., How to support aging parents from distance, parenting best practices during COVID-19, Long covid-19 support groups)</li> <li>▪ Individual online counselling, and monthly online all-staff Seminars on various psychosocial topics</li> </ul> <p>IAEA:</p> <ul style="list-style-type: none"> <li>▪ Creating an inclusive environment: Dignity and Inclusion Campaign, all VBOs together: Ongoing webinar series on inclusion-related monthly subjects to raise awareness and create a VIC-wide culture of inclusivity, respect, and dignity.</li> <li>▪ Providing support to family members/dependants: family members and dependants are eligible to approach the staff counsellor just like staff members; provided with assessment and tailored external referral</li> <li>▪ Website with comprehensive information on what constitutes abuse and where to get help</li> <li>▪ Close cooperating with internship programme, gender focal point, and other relevant partners.</li> <li>▪ In development: information material targeted at risk groups.</li> </ul>

**Annex III**  
**Compliance tracking template**

<b>Agency / Fund / Program</b>	
--------------------------------	--

Service Line	Professional Speciality Group	Licensure Status	Certification Status	Professional Organizational Membership	Actively seeking licensure or certification	Supervision Plan required?
<b>Staff Counsellors</b>						
<b>Stress Counsellors</b>						
<b>Staff Welfare Officers</b>						
<b>Other (please identify)</b>						