LSE International Organisations Day, 11 Nov, 2017: The World Health Organisation – Hans Willmann

Hans Willmann’s story: started as an unpaid volunteer in UNHCR refugee camp working with Vietnamese boat people. Then studied. Then applied for short term assignments with the UNHCR but got no response. Drove to Geneva (is from Germany) to the UNHCR building (don’t try this now) and was informed the programme he had applied for was no longer running as there was no funding. He got an internship working at a refugee camp in Singapore and is now in charge of ‘position management’.

Seeing work with the WHO

In the UN everything starts with the post rather than looking at what you as a person might offer. What that means: a need is identified and a job description written to meet that need. Then the search is to find the person who is the best fit – it is all about filling positions of need.

However, “never take no for an answer” – be keen, interested, honest and persistent. It can take a couple of months or a couple of years to get in and you always need at least two years’ experience before that. Be aware that an internship is not counted as part of the two years’ experience requirement (if possible therefore, avoid any position you take being labelled as an internship, try to get it called something else). The two years’ experience needs to be “relevant work experience in a paid context” but all sorts of things can be relevant, for example investment banking.

People are often hired for a position which doesn’t relate directly to their previous background. For example, medics will not work in applied/clinical medicine in the WHO but that applied/clinical background will inform the work they do, such as writing guidelines for others to apply. A job in the WHO is also not a route to academic specialism. It forms a bridge between research, ministries of health and those delivering, for example producing guidelines such as on antibiotic resistance (something the UK asked the WHO to work on).

The WHO is interested in people from many disciplines – for example anthropology has increasingly been seen as important. You would not be hired as an ‘anthropologist’ but there is recognition that your insight would be valuable. The Ebola crisis highlighted the part played by cultural factors (burial rites in this case) in spreading disease. “We can only address health challenges of the future interdisciplinarily”.

“No one will ever look at your grades” – what you need are social, soft skills – you “have to work under conditions of mission impossible” and get things accomplished “in spite of” those conditions. Your excellence will be “global health diplomacy” as you write up guidelines to assist countries to tackle problems (using the particular expertise that you bring).

The WHO is interested in a CV with breadth of experience – variety. More than 50% of people come from non-health related backgrounds. A second UN language is important (the first being English) – French, Spanish, Russian, Chinese or Arabic. Minority languages are also useful. Other key skills/qualities:

* Teamwork
* Respecting and promoting individual and cultural differences
* Communication
* Knowing and managing yourself
* Producing results
* Moving forward in a changing environment.

Interviews are competency based, with the philosophy that “past behaviour is the most likely predictor of future behaviour”. Creativity is key.

Experience needed:

For technical positions: several years of experience in that specialised area. International experience and developing country experience are often required.

For management support positions: several years of work experience in the same area (international experience an advantage).

The average age for someone joining the WHO is 42.

The JPO (Junior Professional Officer) route is good (80% retention from that) but unfortunately not currently available to British nationals (the UK government withdrew funding for it).

Apply persistently and repeatedly to the WHO. Write a one page letter (or shorter) highlighting just three points: your experience (any other UN assignment counts for a lot), your area of expertise (in one sentence), why you would be an asset to the WHO.

They use electronic pre-screening of applications so make sure important things are there, including clarity in how you meet the language requirements. Use the term ‘working knowledge of’ for a language if you cannot say something more proficient. For America you will need Spanish, for Africa you will need French (you always need English).

Hans Willmann seemed to indicate WHO competency based interview questions are expressed as a theoretical situation, so rather than “tell me about a time…” they are worded more like “You had to communicate…how did you do it?” (but that may have been just a quirk of his delivery style).

Qualifications needed

Without a master’s degree there is a definite ‘glass ceiling’. A PhD helps you to get a Head of Country position so is an advantage if you reach that level (but not particularly below that level). It opens up top jobs with a ‘high visibility level’. Being a medical doctor does not equate to having a PhD. The PhD is valued because it is perceived as giving the ability to get new perspectives. It is also a door-opener for specific research-related roles. Fieldwork as part of PhD studies would be very highly valued, as would experience working for a health charity.

The WHO structure

The WHO provides leadership on global health matters and shapes research on the health agenda. It is an agglomeration of 6 health organisations with regional officers who are legally independent of HQ – they hire and fire independently of HQ. There are 151 country offices, and a high turnover of opportunities there. Because of the regional office structure it is possible to approach the regional offices directly, and you will have a higher chance of success if you are a national from that region.

Some information about what it is like to work for the WHO

There are many layers of reporting to different stakeholders, which can be frustrating but also interesting (to leverage so many different interests to reach a solution). The WHO facilitates the discussion (and it is important to understand the background to the discussion).

There are lots of short-term contracts (because of the way the funding is received). If you are working on a large programme it will probably continue but you cannot be sure. It can take five years to get to the position of getting a longer-term assignment and the days of permanent contracts have long gone. You are likely to start on 6-12 month contracts. If you are on a fixed-term contract it is very advisable to complete the contract (even if something else comes up) unless there is a really good reason to move on (or the WHO asks you to).