



# Benchmarking Activity Report 2022

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Source of the data: Central Bank of Sudan

Benchmarking		Situation		Management		
Compare results to peer for same month in previous year		Compare results to peer in the previous month		Compare results to the 2020 of the same month in the previous 3 years		
Date	CR	Total Infection	Equal to or above 10%	Build infection rate on week 10	Equal to or above 2%	Build annual average of week 10 and week 24
08/11/2022	47795	0	0.0%	Equal to or above 10%	1.9%	-0.18
21/10/2022	48552	0	0.0%	Equal to or above 10%	1.9%	-0.18
09/09/2022	48552	2	0.0%	Equal to or above 10%	2.7%	-0.18
21/08/2022	59125	2	0.0%	Equal to or above 10%	2.7%	-0.18
01/07/2022	57462	2	0.0%	Equal to or above 10%	2.7%	-0.18
09/06/2022	56588	4	0.0%	Equal to or above 10%	4.5%	-0.24
21/05/2022	50228	5	0.0%	Equal to or above 10%	4.5%	-0.24

Source of the data

Central Bank of Sudan

Tip: to download the (or any) table to Excel:

1. select your table
2. click on the "Excel" icon on the top right hand corner
3. choose and click on "Export" button
4. a window dialog will open on the "Export" button
5. your file will be saved by default in your downloaded folder

## The MSF Intersectional Benchmarking Unit (BMU)

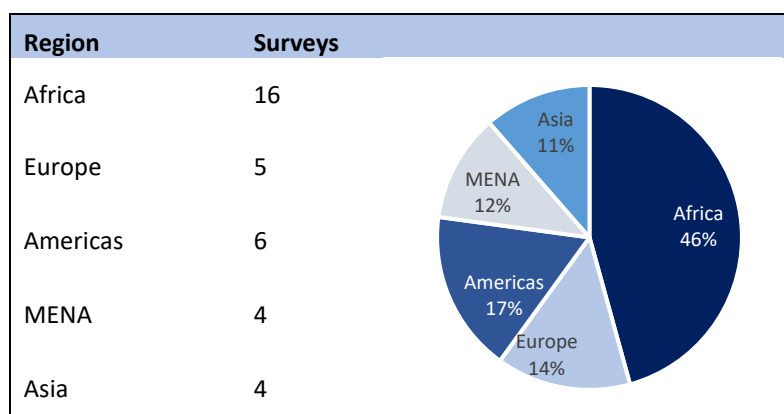
Following this executive summary is an in-depth discussion on MSF Benchmarking activities for 2022. It includes information about:

- Benchmarking history and development
- Benchmarking unit (BMU) vision and strategy
- Benchmark process overview
- MSF's philosophy, goals and objectives regarding compensation and benefits
- Benchmark methodology
- Benchmark operations and activities

### Key Operating Statistics

#### *Salary Studies completed in 2022*

MSF's Benchmarking Unit was engaged in 35 salary studies in 2022, representing an increase of 6% compared with the previous year. A further two studies were ongoing and two were delayed at the end of 2022.



#### *Remuneration Analyst Pool*

- In 2022, the analyst pool increased by 18.5% from 2021, to 64 Remuneration Analysts
- The number of nationalities represented in the pool increased by 13%
- The variety of countries of analyst residence increased by 17.6%
- In 2022, only 10 percent of the benchmarks completed were conducted by Norwegians, while 50 percent were done by nationals of other EU or EEA countries representing 60 percent of all analysts. The remaining 40 percent were completed by nationals from Armenia, Argentina, Ukraine, Kyrgyzstan and the US.

#### *Participant satisfaction surveys*

To facilitate continuous improvement of the benchmarking process, the MSF Benchmarking Unit completes a survey of participants regarding their overall satisfaction of the benchmarking process. The survey includes 9 questions with a satisfaction rating of 1 (dissatisfied) to 5 (very satisfied).

- Number of participants response for 2022 was 133 compared to 66 in the previous year\*
- Range of satisfaction was 4.14 – 4.6 in 2022 compared to 3.92 – 4.42 in 2021
- Satisfaction level was higher for all 9 questions compared to 2021 responses
- Average satisfaction level for all 9 questions increased 4% to 4.40 in 2022 compared to 4.25 in 2021

## Key developments

### *Change in BMU funding mechanisms*

In the first quarter of 2022, the benchmark funding mechanism was changed to transferred more financial, logistical, and administrative responsibilities to the entities requesting benchmarking services. While this was generally well accepted by the Operational Centres and successfully implemented, new administrative processes and necessary interactions with contracting sections were challenging.

### *Increased BMU involvement in the Rewards Review project*

The BMU's involvement in the Rewards Review project also increased throughout the year with more frequent working group meetings and greater demand for data.

### *Economic turmoil driving the demand for increased salary studies*

In 2022, the global economy declined significantly, with high inflation in most countries. This resulted in concern regarding the adequacy of MSF's salaries worldwide, and whether the organisation was able to identify and monitor crises on a timely basis. As a result, the number of benchmarks requested, often at short notice, increased. The way we survey labour markets and living wages was also challenged by MSF management and the Benchmarking Unit started a process to assess new ways of working and resource requirements to ensure the future sustainability of our approach, including the methodology for the Monthly Household Expenditure Surveys, which had evolved from being an add-on to the benchmarks to a main driver of our labour market intelligence gathering.

### *Significant changes in BMU Team personnel*

2022 proved to be a challenging year. Due to a planned, temporary absence, the Unit was headed by an interim coordinator. Two other coordination positions became vacant and were filled in January by two newly recruited candidates, one Project Manager and an HR/Pool Manager. This coincided with a busy period with many requests for surveys. The new team was also geographically dispersed with members residing in France, Brazil, Norway, and Germany, working largely on a remote basis.

### *Team coaching*

To ensure and enhance effective collaboration, a successful team coaching exercise was undertaken with the support of the MSF Mentoring and Coaching Hub. The process consisted of multiple Teams based coaching sessions, culminating with an extended in-person workshop at MSFs Paris location focused on developing an overall Vision and Strategy to steer the BMU operations going forward.

## The Role of Benchmarking in the MSF Movement

MSF aims to be a socially responsible employer for our nearly 63 000 employees worldwide, recruiting the best, most committed people to fulfil our social mission. To do so, MSF needs in-depth knowledge of the markets in the countries that we operate in.

The Intersectional Benchmarking Unit (BMU), hosted by MSF Norway, collects and analyses data about local labour markets in all locations where MSF employs people. We provide both regular and special-focus market intelligence. Our analysis contributes to informed decision-making in various technical platforms and departments. The surveys cover:

- prevalent local wages and social benefits
- socio-economic context and labour market practice
- household expenditure and living wage assessment
- market response to economic turmoil
- analysis of regulatory compliance

## Why are we Benchmarking?

In many countries where MSF and other NGOs work, reliable information on the labour market and cost of living is not available. This makes it difficult to know which salary levels and benefits are appropriate for locally recruited staff. Through its Benchmarking Unit, MSF collects labour market and cost of living / workers' expenditure information in the countries where the organisation operates. There are numerous economic, social, and legal reasons why we consider benchmarking essential; that all our employees can provide for their families, and that the organisation can retain experienced staff, and reward the intrinsic motivation that we expect from our employees. As an employer in humanitarian contexts, we must ensure that we are not disruptive to the local labour market and comply with national and international labour regulations and norms.

MSF employs people for a broad range of jobs and skill levels who all contribute to ensure that MSF can deliver quality health care to those in need. Our workers are our greatest asset as an organisation. We want to recruit the best, most committed professionals. We often work in locations that lack publicly accessible information on common market practice, cost of living and decent living wage. MSF wants to ensure that our mandate can be carried out under the highest quality standards while at the same time ensure that our employees are treated fairly, money and funds are used in a sustainable way and local norms are respected.

A salary benchmark is a management tool and process used to evaluate MSF's salary practice and additional benefits in a defined reference market, at a given point in time. The survey is a thorough analysis of market trends and practices on all elements concerning the employer employee contractual relationship. Undertaking such an analysis requires understanding of the local labour law and/or practices considered to be common law, and of political and cultural characteristics that affect the labour market.

The benchmarking methodology is a disciplined approach for determining the relative importance and value of different jobs, and the critical relationships between them. It ensures that jobs are compared based on requirements and accountabilities, and not by a title, status, or other bias. To ensure that jobs of similar requirements and accountabilities are compared, emphasis is put on the core content of each function, reflecting the level of responsibility (knowledge, skills and supervision

level) and complexity of tasks. The methodology provides consistent guidelines for every step of the process, from identification and selection of appropriate organisations, training, and tools for the execution of interviews, ensuring that accurate and most needed information is provided, to the final analysis process.

MSF benchmarks are done as a combination of field and desk research to collect and analyse both primary and secondary data. To put this data into context and ensure correct interpretation we also talk to local populations, visit markets, and observe household spending practices. This gives us a thorough understanding of the labour market and socioeconomic context of our studies.

Our analysis includes the competitiveness of salaries and benefits, as well as an estimate of the minimum household expenditure to assess the minimum income threshold that we, as a socially responsible employer, commit to meet. The studies also serve to confirm compliance in all missions with internal and external minimum standards and policies.

## Vision and Strategy

MSF BMU represents a global, diverse, and inclusive community of remuneration specialists. Our vision is to support and contribute to MSF's mission of humanitarian aid and medical assistance to people based on need and irrespective of race, religion, gender, or political affiliation, guided by medical ethics and the principles of neutrality and impartiality. Our goal is to be the primary source for labour market intelligence for the purpose of ongoing remuneration management and rewards-based initiatives for the global MSF movement acting in an independent, impartial, transparent, and cost-effective manner. We also aim to maintain and enhance MSF's reputation in the broader INGO community by acting in an ethical, professional manner and respecting the confidentiality of information shared with us by participating organisations. See Appendix for more details on our BMU strategy.

## History of the Intersectional Benchmarking Unit

The Benchmarking Unit was founded upon the request of the MSF International Office in 2012 to increase the alignment of remuneration policies and HR management among the sections and to participate in and support other activities including the introduction of a common remuneration policy and the roll out of an International Field Function Grid (IRFFG, <https://irffg.msf.org/function-grid>).



MSF Norway stepped forward to take on the coordination and development of a specialised pool of professionals to conduct labour market and salary surveys and gain a deeper understanding and overview of gaps and differences in salary and benefits between sections and the external labour markets in which they operated. This was a time when internal competition through different rewards systems created potential problems for MSF in many countries where more than one section was present. At the time, no one anticipated the potential growth in acceptance and the scope of

activities of the newly created Benchmarking Unit. MSF Norway has fully funded all the Benchmarking activities from 2012 until 2021. Since January 2022 the costs for the analyst and travels are shared by the participating sections, while MSF Norway continues to fund the cost of the coordination team and for remotely conducted surveys (e.g., updates).

Since 2017 the Benchmarking Unit has been actively involved in the introduction of the Living Wage concept in MSF's Compensation & Benefits strategy and the development of the underlying Monthly Household Expenditure Survey methodology. This regular surveying and innovative methodology make MSF a pioneer in this area within the NGO sector and beyond. MSF continues to improve this process through identifying best practices from leading global experts in this area.

## The “Common Frame” as a Main Guideline

During 2008-2010 MSF developed a common policy for all its approximately 25 000 locally hired staff at the time. Though some level of consistency in locally hired staff policies existed in the five Operational Centres and between sections in various mission countries it was clear that there were large inter-sectional differences. Both from an operational and HR perspective it was felt that a common policy would, in many respects, be preferable to five different ones.

The Intersectional HR Policy Framework was intended to ensure a common interpretation of being a “Responsible Employer”, improve coherence towards external parties, and facilitate the process towards joint missions. Additionally, it was also expected to reduce or eliminate security incidents related to locally hired staff administration issues as well as legal risk and its economic consequences. A core principle underlying MSF's remuneration and benefits policy is to act as a Socially Responsible Employer including providing:

- Decent and adequate living standards
- Remuneration commensurate with responsibilities
- Promotion of internal mobility
- Fair treatment and transparent HR policies
- Promotion of commitment to the organisation

## The Basics of Remuneration

Employee Remuneration refers to the reward or compensation given to the employees for their work input/ performance. Effective management of remuneration is believed to support organizations in their effort to attract, retain and motivate employees to perform their job efficiently and effectively. Management of remuneration is dependent on what, how much, and how – what is rewarded and what is the compensation, how large is the compensation, and how it is distributed.

MSF locally hired staff remuneration policy supports its organisational ambition to provide medical care by attracting qualified staff and to achieve fairness and equity in remuneration and reward. The remuneration policy allows MSF to compete effectively in different labour markets, recruit and retain high calibre staff, especially for management and specialist positions. The policy framework also enables MSF to secure its fiduciary duty towards donors by providing mechanisms for cost control and sets boundaries for pay and benefits at certain levels.

Competitiveness in this sense can be defined as how well a company manages their remuneration practice compared to other organizations within the same labour market or industry and its ability to





## Benchmarking Unit Team

### Unit Coordination, Project Management and Supervision

Benchmarking activities in 2022 were coordinated and supervised by a geographically spread team of five experienced benchmarking specialists, located in four countries and representing six nationalities. Since 2023, two new project managers help ensuring that the increasing number of requests can be handled timely without compromising on the quality of analysis and presentation.



*Figure 1 Benchmarking Unit Coordination Team (April 2023)*

(Standing, left to right)

**Frederic Penhard** (Head of the MSF Intersectional Benchmarking Unit, in charge of overall quality of service, infrastructure and methodology)

Frederic joined MSF as Remuneration Analyst in 2013. His background is in finance and his passion lies in utilizing data to support the humanitarian community. As an analyst, he conducted surveys in Iraq, Palestine, and DRC before taking on the role as Coordinator of the Benchmarking Unit in 2014. Frederic is a French national and lives in Norway. In addition to French, Frederic speaks English and Norwegian.

**Mark Doroski** (Volunteer, in charge of customer satisfaction surveys, Annual Report and proof reading)

Mark joined the MSF Benchmarking unit on a voluntary basis about two years ago. His focus is on work process improvement as well as supporting coordination team activities. Mark has also participated in one complete benchmark and one special study as a Remuneration Analyst. Mark has a background in finance and accounting as well as financial communications. He is a naturalised Norwegian, currently residing in Oslo, Norway. Mark speaks English, Norwegian and some Italian.

**Rutur Finnbogason** (Project Manager and Analyst Support, since January 2023)

Rutur joined MSF Norway December 2018. His first mission was in Greece as an HR Finance Manager and worked in a couple of field missions before joining the BMU team as a Remuneration Analyst and then project manager. Before that, Rutur was with the UNODA, the UN Disarmament Agency, in Geneva and New York on behalf of the Icelandic Ministry of Foreign Affairs. He has lived for a long time in the Middle East most notably in Damascus, Beirut and Amman and worked there both as a correspondent and later as a Consulting Analyst writing reports on ISIS and the wars in Syria and Iraq as well as politics and militias in the Lebanon area. He studied Arabic and Middle Eastern History in Damascus and later took a BA in Philosophy and BS in Political Science in Paris 1 Sorbonne Pantheon, as well as a Masters in International Relations focusing on Hezbollah during the Syrian Civil War. Rutur is an Icelandic national currently residing in Rome and speaks Icelandic, English and French fluently and some Arabic, Farsi, Danish and Italian.

**Mikkel Carlsen** (Manager: HR Processes, Analyst Pool, and Field Support)

Mikkel started with MSF in 2016 as a HR/Finance Manager in Papua New Guinea. Since then, he has been involved in different HR/Finance roles in headquarters and in the field, coordinating the implementation of HR policies and protocols in both regular and emergency mission contexts. He has a keen interest in working with Compensation & Benefits strategies as they are key to reaching operational objectives as well as ensuring MSF's role as a socially responsible employer. Mikkel did his first mission as a Remuneration Analyst for the Benchmarking Unit in the Middle East in 2019. In the beginning of 2022, he rejoined the unit as Manager of HR Processes, the Analyst Pool, and Field Support. Mikkel has a background in international relations and development studies. He is a Danish national, currently based in Lyon, France. In addition to Danish, Mikkel speaks English, French and Spanish.

(Front row left to right)

**Anja Drame** (Deputy Head of the Benchmarking Unit, in charge of internal and external liaising and business development, operations)

Anja is the Deputy Coordinator of the Benchmarking Unit, in charge of our growing network of internal and external liaisons and cooperation partners. In 2022 she was acting Head of the BMU. She has been with MSF since 2011, starting as Logistics and Administration Manager in the field before joining the newly established Benchmarking Unit as a Remuneration Analyst in 2012. Her background is in African Area Studies. She is a member of the Steering Committee of the University of Edinburgh Business School's *Project Fair: Fairness in INGO Reward* (<https://www.project-fair.business-school.ed.ac.uk/>). She is interested in research methods, geoeconomics and living wage. Anja is a German national, currently residing in Frankfurt. In addition to German, Anja speaks English, intermediate French as well as rudimentary Kiswahili.

**Alyona Polovchenko Smith** (Project Manager and Analyst Support, since May 2023)

Alyona joined MSF in 2011 as a locally recruited staff in Ukraine. After leading the HR/Finance team in the project for five years, Alyona relocated to South Africa and started a private HR consultancy practice. In 2018 she re-joined MSF and completed her first mission as a Remuneration Analyst for the Benchmarking Unit in Belarus. In 2022 she conducted full benchmarking studies in South Africa and Mozambique, and a special focus study in Zimbabwe. In May 2023 Alyona joined the Benchmark Coordination Unit as a Project Manager. She has a keen interest in training and capacity building, social and economic research, compensation and benefits strategies. Alyona is a Ukrainian national, currently residing in Cape Town, South Africa. She speaks Ukrainian, Russian and English.

**Yasmine Dakitse** (Project Manager and Analyst Support, January 2022 – May 2023)

Yasmine worked for various INGOs as an HR, admin, and Finance Manager before joining MSF in 2018. Since then, she has participated in several field missions including the DRC, Haiti and Brazil as a project admin and finance manager or HR Coordinator where she was frequently questioned about compensation and benefits issues. To get a better understanding of MSF compensation policies, she applied for a position as Remuneration Analyst and participated in the Angola and Kenya Benchmarks. In January 2022, she joined the Benchmark Coordination Unit as a Project Manager supporting Remuneration Analysts working in the field. She is generally interested in coaching, Diversity, Equity and Inclusion (DEI) and enjoys executing training activities. Yasmine has accepted a new position in MSF and will leave the coordination team in June 2023. Yasmine is a French national currently residing in Rio de Janeiro, Brazil. She speaks French, English and Portuguese.

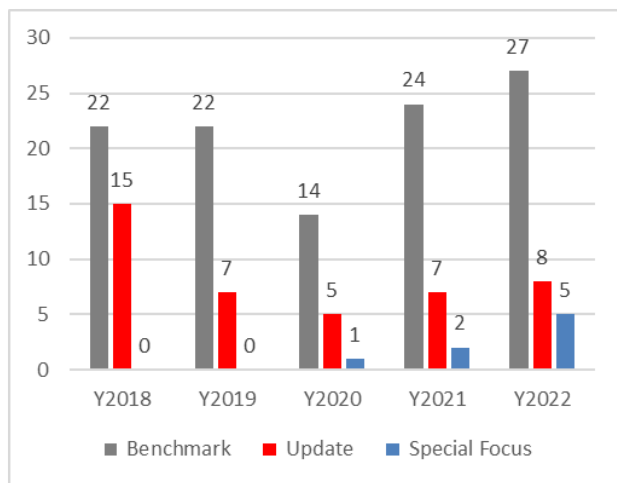
## Remuneration Analysts

Following is a table of MSF's pool of Remuneration Analysts that have completed benchmarks and/or update studies, including nationality, place of residence, languages spoken, and studies completed. In 2022, the pool represented 26 nationalities, mainly Europe (87 percent), compared to 23 nationalities, (83 percent in Europe) in 2021. The largest group of analysts have been Norwegian, 41 and 44 percent in 2022 and 2021 respectively. In 2022 the Benchmarking Unit recruited 10 new Remuneration Analysts including 3 Norwegian residents and 7 individuals residing in other countries. The corresponding figures for 2021 were 5 and 13 respectively.

Primary Pool	Nationality	en	fr	es	pt	ru	ar	other	Surveys completed
Field	Danish	x	x					x	3
BM	Belgian	x	x					x	1
BM	French	x	x	x			x		3
Field	Colombian	x		x					1
BM	Czech	x						x	2
Field	Danish	x						x	1
BM	Finnish	x						x	1
Field	French	x	x		x				5
Field	Danish	x	x	x				x	3
Field	Malaysian	x	x					x	1
BM	French	x	x					x	6
BM	German	x						x	14
Field	German	x						x	1
Field	Italian	x	x	x				x	2

Primary Pool	Nationality	en	fr	es	pt	ru	ar	other	Surveys completed
Field	Icelandic	x	x	x				x	2
Field	Icelandic	x	x	x				x	1
Field	Icelandic	x	x					x	12
Field	Italian	x						x	3
BM	Kyrgyz	x				x			2
BM	Dutch	x						x	2
BM	Norwegian	x						x	2
BM	Norwegian	x						x	1
BM	Norwegian	x	x					x	2
BM	Norwegian	x						x	3
BM	Norwegian	x		x				x	1
BM	Norwegian	x						x	2
BM	Belgian	x	x						2
BM	Norwegian	x						x	2
BM	Dominican Republic	x		x					1
Field	Norwegian	x	x				x		1
Field	Norwegian	x	x					x	4
BM	Norwegian	x						x	2
BM	Scottish	x						x	2
BM	Canadian	x	x					x	6
BM	Norwegian	x						x	1
BM	Norwegian	x		x				x	4
BM	Norwegian	x						x	1
BM	Norwegian	x						x	3
BM	French	x	x						7
BM	Norwegian	x						x	2
Field	German	x		x	x				1
BM	Norwegian	x						x	3
Field	Norwegian	x						x	2
BM	Norwegian	x						x	2
Field	Swedish	x	x					x	1
BM	Norwegian	x						x	1
BM	Norwegian	x						x	3
BM	Norwegian	x						x	5
BM	Norwegian	x	x					x	1
BM	Norwegian	x		x				x	1
BM	Norwegian	x						x	1
Field	Norwegian	x						x	1
BM	Norwegian	x						x	1
Field	Russian	x				x			1
Field	Ukrainian	x				x		x	4
BM	Argentinian	x		x					1
Field	Portuguese	x	x		x				2
Field	Spanish	x		x					1
Field	Venezuelan	x	x	x				x	1
Field	Tunisian	x	x				x		1
Field	Ukrainian	x				x		x	1
Field	USA	x							1
Field	USA / Togo	x	x						3
Field	USA	x							1

## Conducted surveys 2018 - 2022



Since 2018 the Benchmarking Unit has completed 104 benchmarks, 42 updates and 8 special studies. In addition, there were 2 planned benchmarks ongoing at the end of 2022. 58 studies are planned for in 2023, of which 41 are comprehensive benchmarks and 17 are updates.

MSFs Benchmarking Unit was engaged in 35 salary studies in 2022 with two ongoing as of 31 December 2022, with a total of 711 external participants. This included 22 comprehensive salary surveys (or benchmarks), 8 updates and 5 special studies.

Year	Comprehensive Benchmark	Market Evolution Update	Special Focus Study	Total
2018	22	15	0	37
2019	22	7	0	29
2020	14	5	1	20
2021	24	7	2	33
2022	22	8	5	35

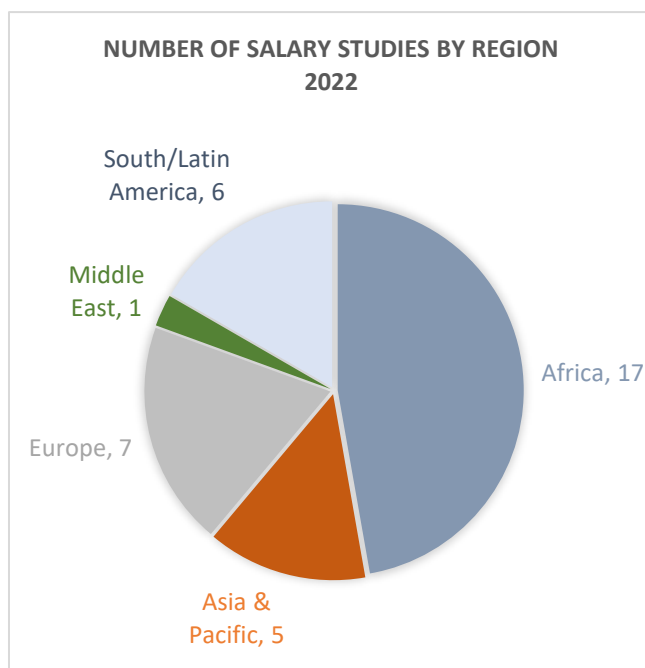
Typically, at least 60% of the organisations that have participated in a previous benchmark also participate in the follow-up studies (“updates”).

**Table of countries, region, type of study, and number of participants:**

Region	Country	Type	OCA	OCB	OCBA	OCG	OCP	WACA	Other	Host Section	Number of participating organisations
Africa	Sudan	BM	x	x	x	x	x			OCBA	15
Asia	Uzbekistan	BM	x							OCA	23
Asia	Myanmar	BM	x			x				OCG	45
Asia	Kyrgyzstan	BM				x				OCG	20
Europe	Portugal	BM							MSF-PT	MSF-PT	17
Europe	Armenia	BM				x				OCG	21
Americas	Argentina	BM							MSF-LAT	MSF-LAT	14
Africa	Mali	BM		x			x			OCB	25
Americas	Brazil	BM		x			x			OCB	28
Africa	Sierra Leone	SF	x	x						OCA	16
Africa	Ethiopia	SF	x		x					OCA	19
MENA	Türkiye	UP			x					OCBA	10
Africa	Mozambique	BM		x		x				OCB	40
Africa	Côte d'Ivoire	UP						x		WACA	9
Asia	Pakistan	UP	x	x			x			OCP	20
Africa	Central African Republic	BM	x	x	x		x			OCA	31
MENA	Syria	BM	x	x	x					OCBA	31
Africa	South Africa	BM		x					MSF-ZA	OCB	26
Africa	Djibouti	BM					x			OCP	16
Africa	Chad	UP	x			x	x			OCA	17
Africa	Malawi	BM					x			OCP	28
Africa	Benin	BM		x						OCB	17
Africa	Uganda	UP				x	x		Epicentre	OCP	16
Europe	Partner Section Benefits	SF								MSF-G	15
Europe	Czech Republic	BM							MSF-CZ	MSF-CZ	9
Europe	Germany	BM							MSF-G	MSF-G	28
Africa	Kenya	SF							MSF-EA	MSF-EA	11
Americas	Guatemala	BM				x				OCG	22
Americas	Honduras	BM				x				OCG	19
Americas	Haiti	UP	x	x			x				15
Americas	Colombia	BM			x				MSF-LAT	OCBA	22
MENA	Iran	UP				x	x			OCP	7
Africa	Burkina Faso	UP			x	x	x			OCBA	20
MENA	Tunisia	BM	x				x			OCA	21
Africa	Zimbabwe	SF		x						OCB	18
Americas	Mexico (delayed to January 2023)	BM			x	x			MSF-MX	OCG	
Europe	Ukraine (started, main survey in 2023)	BM	x	x	x	x	x			OCG	
Africa	Tanzania (delayed to January 2023)	BM				x				OCG	
Africa	Ethiopia (started, main survey in 2023)	BM									

\* Ongoing as of 31 December 2022

## About our Work 2022



MSF benchmarking activities in 2022 included six Operational Centres (OCs and WaCA) and five Partner Sections. 19 studies were multi-sectional including two or more OCs or Partner Sections. Twenty different Remuneration Analysts of various nationalities carried out the studies including the four coordination team members.

### **Operational Centres:**

OCA – Amsterdam  
 OCB – Brussels  
 OCBA – Barcelona-Athens  
 OCG – Geneva  
 OCP – Paris  
 WaCA -West and Central Africa

## AFRICA

### Benin

#### **Key facts and additional information**

No. of locally hired staff covered by the survey: 37

No. staff in 2021: N/A

Expenditure in 2021: N/A

MSF first worked in the country: 1985

Additional information: [msf.org/Benin](https://www.msf.org/Benin)

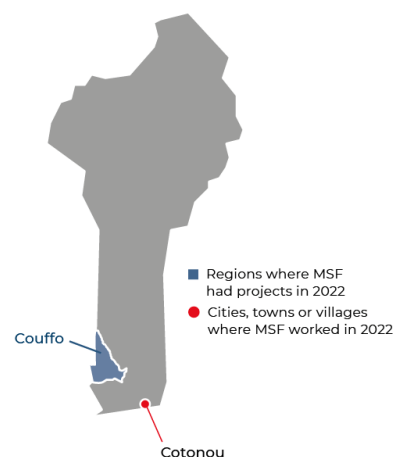
Sections present: OCB

#### **Needs**

The 2022 Benin benchmark marked the full opening of the OCB mission in the country. The main objectives were to gather market salaries to build an official salary scale, compile cost of living information to estimate the Minimum Household Expenditure in the country, identify market practices for additional benefits that could be applied to MSF to include them in the Internal Regulations for the mission.

#### **Background**

After MSF left Benin in 2007, there was no further MSF presence in the country. In 2021, OCB launched a preliminary exploration in the north of Benin and validated the opening of a new mission. The ongoing spill-over of the Sahel conflict impacting the north of the country triggered OCB's intentions to start working in Benin. However, due to the conflict, OCB was encouraged by the



government instead to support the MoH in another region, Couffo, regarding maternal health and neo-natal care. OCB obtained its official registration in January 2022 and opened the coordination office in the economic capital, Cotonou, shortly after. In July of the same year, the Couffo project got the greenlight from the government and is now in the expansion phase of its activities.

## Central African Republic

### Key facts and additional information

No. of locally hired staff covered by the survey:  
2,514

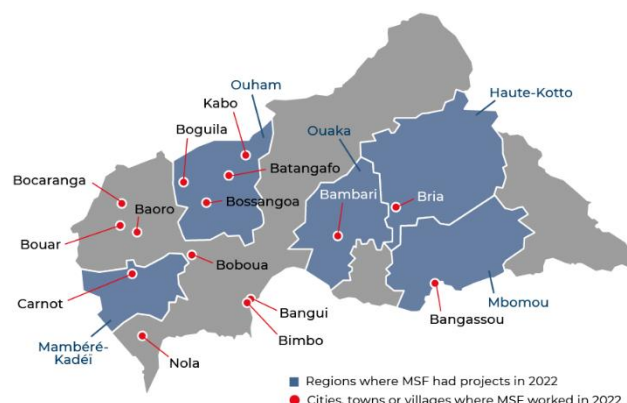
No. staff in 2021: 3,049 (FTE)

Expenditure in 2021: Euro 70 million

MSF first worked in the country: 1997

Additional information: [msf.org/central-african-republic](https://www.msf.org/central-african-republic)

Sections present: OCA, OCB, OCBA, OCP



### Needs

Updated information on salaries in the CAR labour market was needed due to an overall increase in cost of living. Other challenges assessed included: Difficulties recruiting qualified medical and paramedical profiles, relocation policies; and lack of motivation among employees. Inflation was causing fuel and food prices to increase having a significant impact on MSF staff in CAR, adding to the need for a comprehensive Monthly Household Expenditure Survey, as well as the salary study.

### Background

MSF's principal activities are primary health care (PHC), nutrition, surgical activities, neonatal and maternity care, HIV, paediatrics and treatment of chronic illnesses and diseases. The Central African Republic (CAR) is one of the world's poorest and most fragile countries. CAR has one of the highest proportions of critically food-insecure people in the world with 2.4 million people in the country who do not have enough to eat, representing almost half of the population. Access to drinking water is a daily struggle and 3.1 million need humanitarian assistance.

## Djibouti

### Key facts and additional information

No. of locally hired staff covered by the survey: 33

No. staff in 2021: N/A

Expenditure in 2021: N/A

MSF first worked in the country: 1978

Additional information: [msf.org/djibouti](https://www.msf.org/djibouti)

Sections present: OCP

### Needs

The benchmark was requested by OCP to understand MSF's position in the reference market and gain an understanding of local market practices as it was the first benchmark conducted in the country. An evaluation of the macro-economic context and cost of living in Djibouti was also included in the survey.

### Background



Starting from the middle of 2015, due to outbreak of war in Yemen and the cessation of direct air traffic, OCP is present in Djibouti city, where it maintains an operational support base for the Yemen projects of five OCs: OCA, OCBA, OCB, OCG and OCP. MSF has no medical activity in the country.

## Malawi

### Key facts and additional information

No. of locally hired staff covered by the survey: 446

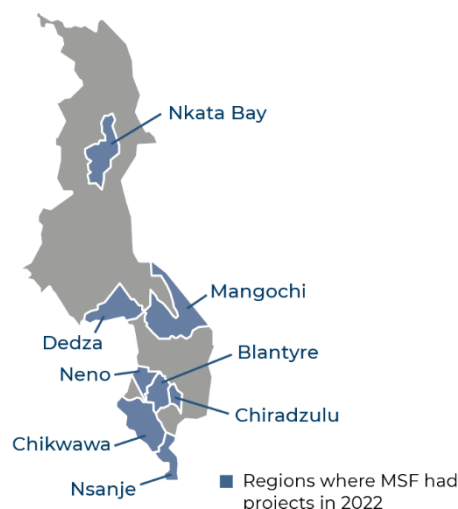
No. staff in 2021: 445 (FTE)

Expenditure in 2021: Euro 8.1 million

MSF first worked in the country: 1986

Additional information: [msf.org/malawi](https://www.msf.org/malawi)

Sections present: OCP



### Needs

In 2022 the mission harmonised the function grid to IRFFG, which had an impact on several staff levels. It took place in connection with a salary revision in March 2022. The mission aimed at revising our new position against the labour market after these changes and in the light of the devaluation of the Malawian kwacha by 25% in May 2022. Other areas to assess were rewards packages for specialised staff and educational requirements, and market practice regarding working hours.

### Background

MSF has been working in Malawi for more than 34 years. Until March 2021, both OCP and OCB were present in Malawi. OCB left the country in April due to a change in operational priorities. Focus areas include a HIV/TBC project in Chiradzulu and cervical cancer treatment in Blantyre. MSF is working through district hospitals and health centres to cover all twelve districts in the country.

## Mali

### Key facts and additional information

No. of locally hired staff covered by the survey:

1,278

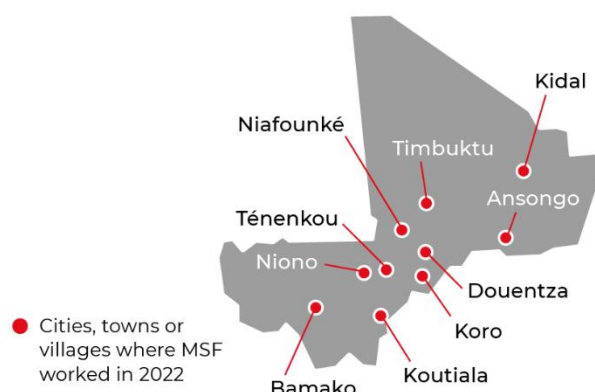
No. staff in 2021: 1,321 (FTE)

Expenditure in 2021: Euro 29.7 million

MSF first worked in the country: 1992

Additional information: [msf.org/mali](https://www.msf.org/mali)

Sections present: OCB, OCBA, OCP



### Needs

A combination of rising cost of living, inflation and labour market competitiveness caused the present sections to raise concerns whether MSF is still competitive compared to other employers in Mali and whether our lowest salaries still meet our living wage aspirations.

Other needs identified included: to gain an understanding of current salary levels in the reference market, share HR practices across OCs for possible future harmonisation, evaluate practices for specified benefits and allowances, such as mobility, housing and transport, evaluate certain staff retention and recruitment issues.

## Background

OCB opened the first project in Koutiala in 2009, followed by OCBA with a project in Ansongo in 2012. In 2019, OCB opened a project in Niono. Access to medical care remains very limited in the north and centre of Mali due to a lack of medical staff and supplies and spiralling violence between armed groups. MSF works across Mali to assist the most vulnerable people.

## Mozambique

### Key facts and additional information

No. of locally hired staff covered by the survey: 598

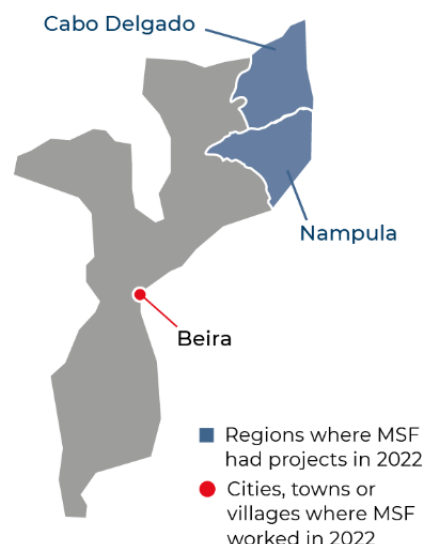
No. staff in 2021: 655 (FTE)

Expenditure in 2021: Euro 18.5 million

MSF first worked in the country: 1984

Additional information: [msf.org/Mozambique](https://www.msf.org/Mozambique)

Sections present: OCB, OCG, OCBA



### Needs

The benchmark was initiated by OCB and the other sections working in the country. Needs identified included: MSF's competitiveness as an employer, how MSF compares to the public sector following the implementation of a new salary grid for public employees, recruitment and retention challenges, attraction of high-skilled staff to remote areas, market practice relating to other specific benefits and allowances. Since the previous benchmark in 2019, OCB and OCG have completed the harmonisation of HR policies and practices, apply the IRFFG and use the same salary scale.

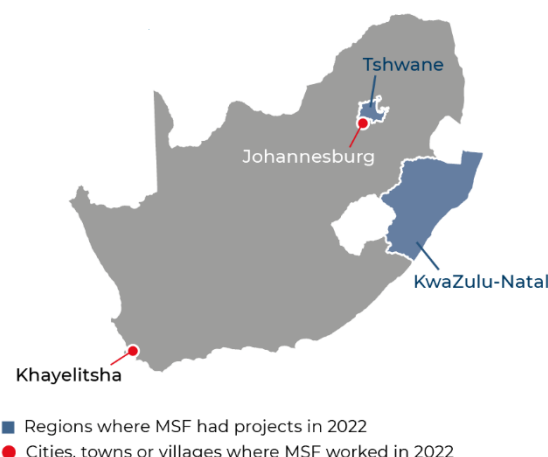
## Background

OCB and OCG have been present in Mozambique since 1984 at a time of civil war that lasted until 1992 and MSF continued providing health support in the country after the war ended. MSF operated during the cholera epidemic and floods that occurred in 2000, 2001 and 2013. Since 2001, MSF has focused in providing advanced HIV treatment. MSF supported the Ministry of Health following two cyclones in Spring 2019, by providing materials such as tents, water, and sanitation equipment for cholera treatment centres. MSF also undertook direct medical activities, including treating cases of cholera and acute watery diarrhoea. MSF also supported the national response to COVID-19. MSF currently has a combined intersectional coordination and supply unit in the Maputo office as well as numerous and varied operations in the Nampula, Cabo Delgado and Sofala provinces.

## South Africa

### Key facts and additional information

No. of locally hired staff covered by the survey: 126 in OCB, 88 in MSF-SnA  
 No. staff in 2021: 170 (FTE)  
 Expenditure in 2021: Euro 9.9 million  
 MSF first worked in the country: 1986  
 Additional information: [msf.org/south-africa](https://www.msf.org/south-africa)  
 Sections present: OCB, MSF Southern Africa  
 relocated section



### Needs

This benchmark was requested to assess the market situation following the pandemic and further investigate the following: MSF's competitiveness in the market, compare the remuneration practices between OCB and MSF Southern Africa, evaluate remuneration for certain specified medical and non- medical positions and for the public sector in general, investigate the prevalence of specific benefits and allowances including travel allowance, allowances for regional roles and scarce skills, relocation per diem for domestic travel.

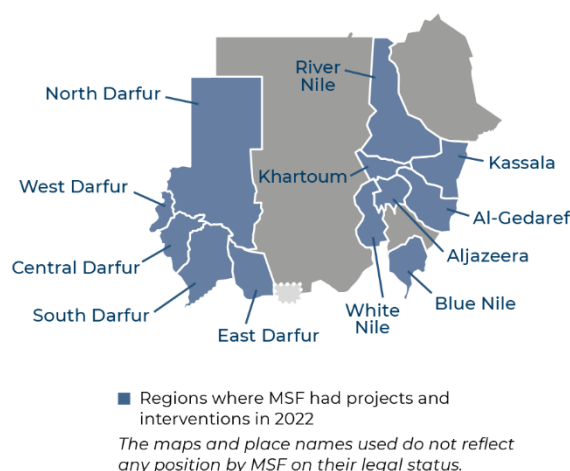
### Background

OCB started operations in South Africa in 1999 to respond to the HIV/TB epidemic. Currently, MSF has projects in three locations: Khayelitsha (Western Cape province), Eshowe (KwaZulu-Natal province) and Tshwane (Gauteng province). In 2019-2020 the mission went through a re-centralisation process with the projects gaining more autonomy and coordination transformed into a Country Support Team. An MSF Southern Africa Regional Support team was also created with a Regional Supply Unit based in Cape Town and the remainder of the regional team based in Johannesburg. MSF Southern Africa as an independent entity, has been present in Johannesburg since 2007. The core objectives of this partner section include recruiting field workers, fundraising and raising awareness. In addition, the Southern African Medical Unit (SAMU) based in Cape Town provides medical expertise to MSF's programmes in the region.

## Sudan

### Key facts and additional information

No. of locally hired staff covered by the survey: 829  
 No. staff in 2021: 1,251 (FTE)  
 Expenditure in 2021: Euro 39.6 million  
 MSF first worked in the country: 1978  
 Additional information: [msf.org/sudan](https://www.msf.org/sudan)  
 Sections present: OCA, OCB, OCBA, OCG, OCP



### Needs

Assessment of MSF's position in the labour market after a long period (2017) without market assessment, but with significant changes in the Sudanese labour market including a new government, an influx of new (INGO) employers, political turmoil, and an economic and currency crisis as well as full dollarization. Special focus was on the impact of the high inflation on the market salaries as well as an assessment of Minimum Household Expenditures. MSF pays incentives to a considerable number of workers in our projects. Therefore, another focus was on assessing common practice of this within the INGO sector.

## Background

MSF has been present in Sudan since 1979 - in Darfur since 2003. In 2009, OCA and OCP were expelled from Darfur by the Government of Sudan. In 2014, OCB decided to pull out of Sudan in response to massive access restrictions to their programmes in South Darfur.

After the 2019 revolution and ousting of the former President Omer al-Bashir, and in the wake of the war in Ethiopia and ongoing crises in South Sudan, as well as the Covid pandemic, OCA, OCB and OCP returned to join OCBA and OCG in Sudan with smaller sized projects and interventions mainly in Darfur and South-Eastern parts of the country.

## ASIA

### Kyrgyzstan

#### Key facts and additional information

No. of locally hired staff covered by the survey: 62

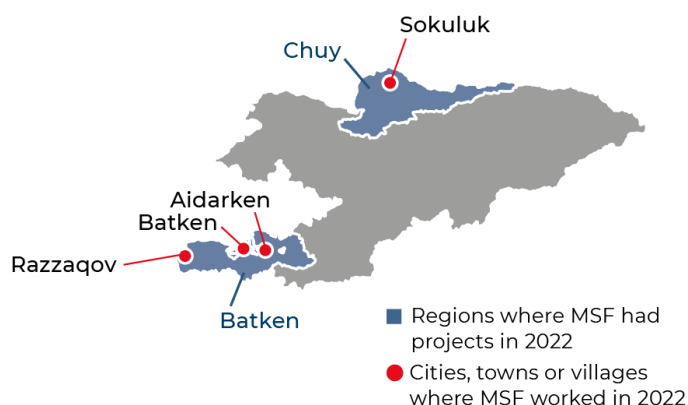
No. staff in 2021: 72 (FTE)

Expenditure in 2021: Euro 1.6 million

MSF first worked in the country: 1996

Additional information: [msf.org/kyrgyzstan](https://msf.org/kyrgyzstan)

Sections present: OCG



## Needs

Since the last salary adjustment in February 2021, the overall Kyrgyz economic situation deteriorated further, while the Covid-19 pandemic continued to have a negative impact. These developments had reportedly led to retention issues and increased salary sensitivity among staff across all salary levels. Kyrgyzstan is regularly monitored through comprehensive benchmarks and intermediate updates.

## Background

MSF is located in the capital Bishkek (coordination) and in Sokuluk (Chui region east of Bishkek) with a women's' health cancer screening project. A project in Kadamjay in the South-West (Aidarken hospital) focusses on the health effects of environmental pollution.

## Myanmar

### Key facts and additional information

No. of locally hired staff covered by the survey: 1,354

No. staff in 2021: 1,165 (FTE)

Expenditure in 2021: Euro 15.8 million

MSF first worked in the country: 1992

Additional information: [msf.org/myanmar](https://msf.org/myanmar)

Sections present: OCA, OCG



### Needs

In addition to evaluating MSF's competitiveness in the market, the following needs were identified: evaluate challenges with local banks, transfers, and liquidity; Identify currencies in use in Myanmar; evaluate allowances and benefits granted in the market and staff redundancies. The benchmark was being performed one (1) year after the military coup and a lot of changes and developments had taken place periodically that impacted MSF staff, such as currency devaluations, salaries in pegged currencies and new allowances.

### Background

In February 2021, a coup d'état took place in Myanmar where the democratically elected government was deposed by the military. The impact of the coup was felt throughout 2021 and was still a major factor in Myanmar in 2022. Medical staff walked out of their jobs in protest, spearheading a civil disobedience movement that saw government employees of all kinds go on strike. Thousands of doctors and nurses went into hiding, unable to practise for fear of attack or detention. Throughout 2021, amid a deepening political crisis in Myanmar, MSF stepped up activities to help fill gaps in public healthcare and continued to do so in 2022.

## Uzbekistan

### Key facts and additional information

No. of locally hired staff covered by the survey: 279

No. staff in 2021: 296 (FTE)

Expenditure in 2021: Euro 7 million

MSF first worked in the country: 1997

Additional information: [msf.org/uzbekistan](https://msf.org/uzbekistan)

Sections present: OCA, OCB, OCBA, OCP



### Needs

The objectives for this study included: to provide updated information about the cost of living as staff have expressed concerns about affordability of basic expenditures. Related to this, a main focus was to update the Monthly Household Expenditure Survey (MHES) to capture home ownership and the associated property/land taxes, as well as tracking number of pensioners in household. The mission wanted to understand the changes in the labour market that had negatively affected recruitment and retention. As a particularity of the Uzbek labour market we were tasked to investigate the

prevalence of unofficial cash and in-kind payments in addition to the official pay slip in some companies. There was a concern among local staff that this practice makes transparency of comparators very difficult and thus advantages are not fully covered through official cash salaries.

## Background

Uzbekistan is in the top 30 countries in the world with the highest estimated numbers of incident Multi-Drug Resistant-Tuberculosis (MDR-TB) cases. MSF is the only external actor permitted to treat patients directly (officially in the CT and informally in other activities), and the Ministry of Health (MOH) does not have the capacity to manage the situation independently. Currently, OCA operates two activities in Nukus, the capital of Karakalpakstan including comprehensive patient-centered TB-care and a TB Clinical Trial. In Tashkent, OCA works with the Ministry of Health (MoH) on integration of Human Immunodeficiency Virus (HIV), TB, Hepatitis C Virus (HCV) and other Sexually Transmitted Infection (STI) services and runs a project site for the Clinical Trial.

## MENA

### Syria

#### Key facts and additional information

No. of locally hired staff covered by the survey: 662

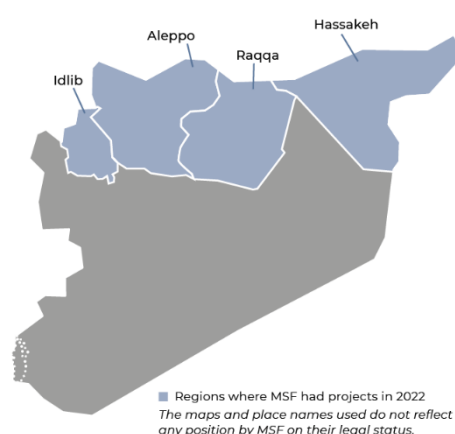
No. staff in 2021: 548 (FTE)

Expenditure in 2021: Euro 32.5 million

MSF first worked in the country: 2009

Additional information: [msf.org/syria](https://www.msf.org/syria)

Sections present: OCA, OCB, OCBA, OCP



#### Needs

This benchmark salary survey was requested by all the OCs operating in Syria to:

Understand MSF's position in the reference market, to gain insight to the macro-economic context and cost of living, to understand the market practice for tax administration among comparators in NES. MSF implements projects in NWS and NES via partnerships with other local NGOs or the Department of Health. Therefore, in addition to the standard survey, we were tasked to conduct a special assessment of MSF partner organisations' compensation and benefits practices in order to better assess if these organisations meet the labour and HR standards that MSF applies to our own staff.

## Background

OCA is operating in Northeast Syria (NES) while the other three (3) sections operate in Northwest Syria (NWS). OCB, OCBA and OCP are managing their missions from their coordination offices in Beirut (Lebanon), Amman (Jordan) and Gaziantep (Turkey). The OCA coordination office is located in the territory of NES in Derik. MSF is not allowed to access/operate by the Syrian government (GoS). MSF is working in Turkish controlled areas through partnerships with local NGOs.

## Tunisia

#### Key facts and additional information

No. of locally hired staff covered by the survey: 14

No. staff in 2021: N18

Expenditure in 2021: N/A

MSF first worked in the country: 2011  
Additional information: [msf.org/tunisia](https://www.msf.org/tunisia)  
Sections present: OCA, OCP

### Needs

The country had seen significant economic and political developments since the previous salary survey in 2019, including the Covid-19 pandemic. The purpose of the survey was to assess whether MSF salaries were still adequately positioned in the local labour market. Given the small number of locally hired staff in coordination offices in Tunis, positions benchmarked included several requested by the missions as well as typical MSF profiles covering all levels and representing all departments, for a better understanding of the market. A parallel cost of living study (Monthly Household Expenditure Survey) was conducted for better insight into the impact inflation had on principal cost groups for MSF staff.

### Background

MSF has been present in Tunisia since the Arab Spring in 2011 and later developed projects for basic health and mental care to refugees in 2015. In 2022 two sections, OCP and OCA, were present in Tunisia both with offices in the capital Tunis. Neither mission had operations in Tunisia, and both acted as coordination centres for activities in neighbouring Libya. Tunis acts as coordination hub for many organisations with principal activities in Libya. Few INGOs work primarily in Tunisia while private/local companies and international agencies listed in this report are solely Tunisian.

## EUROPE

### Armenia

#### Key facts

No. of locally hired staff covered by the survey: 12  
No. staff in 2021: 11 (FTE)  
Expenditure in 2021: Euro 0.6 million  
MSF first worked in the country: 1988  
Sections present: OCG

### Needs

OCG took over the mental health support project from OCP in 2021. This survey was the first conducted in the country. The main aim was to establish a basis to evaluate our position in the local labour market and common practices and norms. Furthermore, provide an overview of economic context, cost of living and monthly household expenditures. This included market practices in Nagorno Karabakh.

### Background

MSF first came to Armenia and Nagorno Karabakh following the Spitak earthquake in 1988. Activities in 2022 focussed on mental health. In collaboration with local psychologists and health professionals, MSF provides quality psychological assistance to people with psychological needs in Nagorno Karabakh.





## AMERICAS

### Brazil

#### Key facts and additional information

No. of locally hired staff covered by the survey: 47 in

OCB, 202 HQ staff MSF-Brazil

No. staff in 2021: 53 (FTE)

Expenditure in 2021: Euro 3.9 million

MSF first worked in the country: 1991

Additional information: [msf.org/brazil](https://msf.org/brazil)

Sections present: OCB, MSF-Brazil



#### Needs

The benchmark included both OCB and MSF Brazil. When the OCB project in Roraima opened in 2018, salaries were set at a range between MSF Brazil salaries and public sector salaries. High inflation, mass migration (which has caused a rise in prices on some items), and economic tension in Brazil have increased concern among staff regarding the adequacy of our salaries since then.

The mission thus reported a negative impact on recruitment of certain functions, retention, relocation and general staff morale.

MSF Brazil identified salary levels for senior profiles, retention, and currency devaluation as major concerns as well as competitiveness regarding general salary and benefits.

#### Background

MSF's first project in Brazil was initiated in the Amazon to respond to an outbreak of cholera.

Currently, OCB is the only section with operations in the country, with a project in the state of Roraima to support refugees/immigrants from Venezuela. The project started in November 2018, with the main operations in the capital Boa Vista, but also with activities in Pacaraima, a city near the border with Venezuela. In addition, there are a few one-off interventions in response to emergencies, particularly natural disasters, and the response to the COVID-19 pandemic in 2020 in several states (Amazonas, Goiás, Mato Grosso, Mato Grosso do Sul, Rio de Janeiro, Rondonia, Roraima and Sao Paulo).

In 2006, Brazil office was established in Rio de Janeiro initially focusing on international mobile staff recruitment and fundraising, later expanded to include F2F activities. MSF Brazil is also active in the field of advocacy.



## Colombia

### Key facts and additional information

No. of locally hired staff covered by the survey: 84

No. staff in 2021: 76 (FTE)

Expenditure in 2021: Euro 2 million

MSF first worked in the country: 1985

Additional information: [msf.org/colombia](https://msf.org/colombia)

Sections present: MSF-Lat, OCBA



### Needs

The benchmark was requested simultaneously by the mission, MSF-LAT and OCBA. The request from OCBA HQ was in view to establish a remuneration framework for a new office (Hub) that will host the desk functions for the region. Needs identified included: Evaluate MSF's position in the reference market, evaluate recruitment challenges per region, gain insight in the economic context and cost of living.

### Background

MSF has been present in Colombia since 1985. OCBA, with a coordination office based in the capital Bogotá, is currently the only section with operations in the country since OCG closed their projects in August 2020. The mission focus is primarily on assistance of victims of armed conflict. MSF-LAT an autonomous MSF entity is also present in the country since 2016 with a Representative Office (BOC) with a focus on fundraising and communications activities.

## Guatemala

### Key facts and additional information

No. of locally hired staff covered by the survey: 69

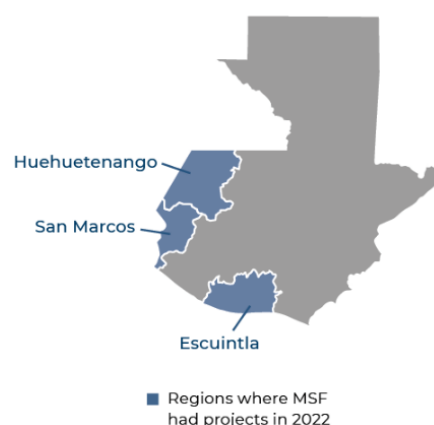
No. staff in 2021: 24 (FTE)

Expenditure in 2021: Euro 1.4 million

MSF first worked in the country: 1984

Additional information: [msf.org/guatemala](https://msf.org/guatemala)

Sections present: OCG, CAMINO



### Needs

OCG requested the benchmark in Guatemala together with Honduras and Mexico, (regional mission), to evaluate the possibility of aligning policies and adapting them to the local labour and market practices. Needs identified included: Evaluate MSF's position in the reference market, evaluate market practices relating to secondary benefits and allowances including remote work practices and other work/life balance issues, provide an overview of the current economic context and cost of living.

## Background

After closing the last MSF projects in 2012, OCG returned in late 2019 with the objective to open La Gomera, a project in the Escuintla region focusing on chronic kidney diseases. With the arrival of the Covid-19 pandemic in 2020 MSF put the La Gomera project on standby and supported in the response to Covid-19 in the country. In the beginning of 2021, OCG re-opened La Gomera. Later in the same year, another project opened that was coordinated from the city of Quetzaltenango, with health care activities for migrant populations close to the Mexican border in the regions San Marcos and Huehuetenango. Today, operations in Guatemala are organised on a regional basis, managed by the same Coordination unit that also provides support to the OCG missions in Mexico and Honduras. The coordination unit is part of the Central America Integrated Office (CAMINO) located in Mexico City.

## Honduras

### Key facts and additional information

No. of locally hired staff covered by the survey: 89

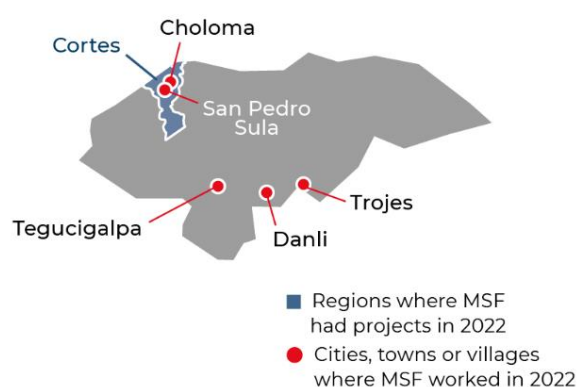
No. staff in 2021: 188 (FTE)

Expenditure in 2021: Euro 4.7 million

MSF first worked in the country: 1974

Additional information: [msf.org/Honduras](https://www.msf.org/Honduras)

Sections present: OCG, CAMINO



### Needs

MSF in Mexico and Central America (CAMINO) are working to improve and harmonise the Compensation and Benefits package for all staff across the region. The aim of the salary survey was to provide up-to-date information to support CAMINO in achieving its goals.

The impact of increased inflation in the past 5 years was another concern to be addressed by the survey as well as challenges in attracting specific medical staff as the public sector had recently increased salaries. Finally. We were tasked to conduct some research on additional allowances such as vacation bonus and travel expenses.

## Background

Honduras had continuously experienced high levels of political, economic, and social instability and has one of the highest rates of violence in the world. In 2022, the main projects were in Tegucigalpa - focused on multidisciplinary interventions of healing, prophylactic and follow-up treatments for the consequences of sexual violence as well as providing humanitarian aid to migrants arriving from Nicaragua, Venezuela and Cuba, San Pedro Sula - where MSF has a clinic that provides full care (mental health, social work and general medical services) to sex workers and the LGBTIQ+ community, and Choloma - mainly focused on sexual and reproductive health to reduce maternal mortality.



Figure 2 Presenting the benchmark study to locally hired staff and addressing their questions and expectations (Sudan)

## PARTNER SECTIONS & REGIONAL ENTITIES

### MSF-Lat (Argentina)

#### Key facts and additional information

No. of locally hired staff covered by the survey: 100

Additional information: <https://msflat.org/>

Sections: MSF-Lat

#### Needs

MSF-Lat requested this first benchmark to evaluate the Argentinian labour market including: Identifying the most required profiles and functions, trends relating to benefits and skill requirements and special leaves granted by different organisations; Understanding how other organisations handle inflation including the number of salary increases granted per year. The study took place in an economically turmoil context that saw spiralling cost of living and rapid loss of purchasing power which led some major employers to adopt special measures to protect real pay.

#### Background

MSF Argentina is part of MSF-Lat that was approved as a section for Spanish speaking countries in Latin America in 2020. Before that it was part of OCBA as a Branch Office. The focus of the section is on fundraising activities, communications and recruiting interlocally hired staff. The majority of the locally hired staff is dedicated to face-to-face fundraising.

### MSF-Czech Republic

**Key facts and additional information**

No. of locally hired staff covered by the survey: 30  
No. staff in 2021: 32 (FTE)  
Foundation year of the Partner Section: 2006/2008

**Needs**

This was the second time, after 2019, that a benchmark took place in the Czech Republic. The Czech market had been significantly impacted by the COVID-19 pandemic and the energy crisis resulting from the war in Ukraine. In addition, more than 400,000 Ukrainian refugees entered the country during the first six months of the conflict. Inflation increased significantly since January 2022, leading to a high level of uncertainty in the market. The aim of the study was to evaluate how MSF-CZ compares to other non-profit organisations and the private sector regarding remuneration, and how these organisations are responding to the current market situation.

**Background**

MSF-CZ office was established in 2006 as a Branch Office of MSF Austria. In 2008 the Czech office became independent, and in 2010 started to do fundraising activities. Since the beginning, the office engaged in the recruitment of international employees from the Czech Republic and Slovakia as well as communication (bearing witness) activities.

## MSF-Eastern Africa

**Key facts and additional information**

No. of locally hired staff covered by the survey: 94 (was 58 in 2021)  
Foundation year of the Partner Section: 2021  
Sections: MSF Eastern Africa Partner Section only

**Needs**

The special focus survey was requested by MSF-Eastern Africa Partner Section to complement the benchmark conducted in 2021 which covered both the MSF missions and MSF-EA locally hired staff, including regional positions. An area that was not covered in 2021 but is of special interest given the set-up of the rewards package in MSF-EA was information on how interlocally hired staff are attracted to work in Kenya by competitor INGOs in particular. This was a complex inquiry within a market that often is very differently structured to MSF in Kenya, but also highlighted how pioneering the Partner Section's approach to rewards is.

The concept of Global Position as it is applied in MSF-EA is quite unique. It applies to nationals and non-nationals alike who, because of content of their work, need international NGO experience. In other words, highly skilled and experienced people who at the time of considering a job offer from MSF-EA will not only look at the salaries paid in the local market, but a wider, more international market.

**Background**

MSF-EA As an entity in a highly operational environment, MSF-EA aims to provide support to MSF's programmes, taking an innovative approach as we forge partnerships across the MSF movement.

MSF-EA has a regional scope that covers 11 countries, with operations in Kenya, Burundi, Tanzania, Uganda, Sudan and South Sudan and Somalia, and the transit base in Djibouti. Expansion into

Rwanda and others are in consideration. The section strives to become operational in 2024 with regional and global scope, driven by the acute humanitarian needs.

MSF-Germany / Ärzte ohne Grenzen e.V.

#### **Key facts and additional information**

No. of locally hired staff covered by the survey: 340 (incl. hosted positions, trainees, fundraisers)

MSF Germany had at the time of the survey 23 hosted contracts.

Expenditure in 2021: Euro 235 million

MSF first worked in the country: 1993

#### **Needs**

This was the second time after 2018 that a benchmark was conducted upon request by the German MSF Partner Section. Growth, recruitment problems - even for positions that were previously easy to fill and post-Covid workplace recovery were among the main drivers for this study. Germany has a highly developed labour market and a large charity segment. The reference market was on purpose-driven organisations of comparable size and complexity to MSF.

#### **Background**

The Partner Section and association was founded in Germany in 1993. It is one of 23 sections of the international network of Médecins Sans Frontières. Main areas of activities are fundraising, recruitment/HR, advocacy and communications.

MSF-Portugal

#### **Key facts and additional information**

No. of locally hired staff covered by the survey: 8

MSF first worked in the country: 2019

Additional information: <https://msf.org.pt/>

#### **Needs**

MSF Portugal was established using the salary grid from MSF Spain, as well as the Spanish benefits and compensation policies. 2022 was the first benchmark done in this country. It was requested by MSF Portugal, agreed with MSF Brazil and MSF Spain, to get a better understanding of the adequacy of this practice in the Portuguese labour market and to understand HR practices and common benefits applied by other employers (local NGOs, INGOs, private companies).

#### **Background**

MSF opened its office in Portugal in January 2019 with the aim of providing sustainable funding for operations. The Portugal office focuses on fundraising, but activities also include communication (to increase the awareness and reputation of MSF) and supporting recruitment of field workers.

## Other Benchmarking Unit Activities

### Participation in HR Technical Platform



*Figure 3 First in-person meeting post-COVID of two platforms: HR Technical Platform and Compensation & Benefits Platform, September 2022, Barcelona*

The Benchmarking Unit has long been a member of the HR Technical Platform, whose objective is to provide on-going technical support for the development of intersectional policies for the responsible employment of field staff. The platform also aims to promote cross learning between MSF sections through sharing and comparing their plans, experiences, and ways of working.

Among the major fields of cooperation in 2022 were the revision of MSF's Economic Turmoil Policy and to address concerns raised by the IDHR concerning MSF's responsiveness to a worsening global economic outlook.

## Team Coaching

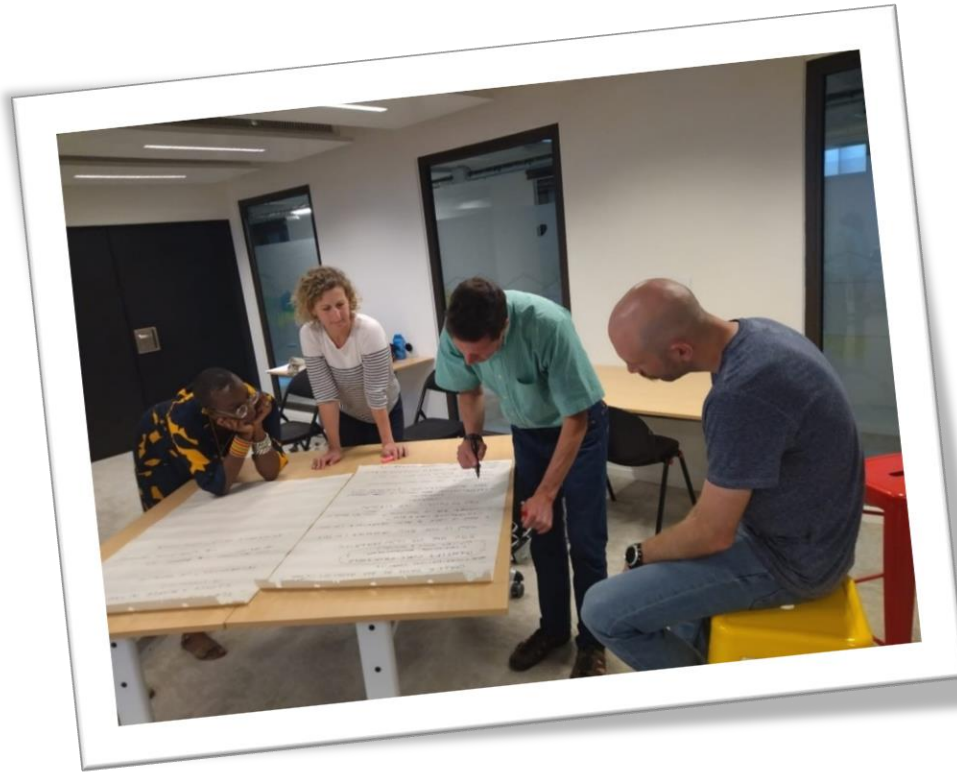


Figure 4 The coordination team brainstorming on the BMU's vision, June 2022 in Paris

In 2022, the BMU team completed a Team Coaching exercise over a several month period, culminating with a 3-day, intensive in-person session at the MSF office in Paris, France together with two experienced, internal MSF coaches. The main objective of the exercise was to facilitate team interaction following the complete restructuring of the team in 2022. An integral part of the exercise was the development of a new mission statement and strategy for the further development of benchmarking activities in MSF. The results of this process are reflected in the vision presented above and detailed strategy included in Appendix below.

## Rewards Review

The MSF Rewards Review initiative was started in 2018 with the objective to transform MSF's contracting and rewards policies and practices to ensure that they are adapted to a global workforce that is diverse at all levels and able to meet evolving operational and organisational needs. After a period of analysis of the underlying principles and foundations, Operational Centres refocused and clarified their objectives in 2020. This led to a revised overarching observation:

*"Our tangible reward policies and processes do not match our ambition for a diverse global workforce, do not fully support our evolving operational and organizational needs, lead to inconsistencies, hamper mobility and are perceived as inequitable by many staff."*

The Benchmarking Unit has played an active role in this project since 2018, first as leader of the "Data Team", providing relevant market and compensation and benefits insight to aid in the analysis work.



Since 2020, the Benchmarking Unit has been a member in one of the three working groups covering different aspects of the Rewards Review. *Minimum Standards for Pay & Benefits* aims to develop new rewards solutions for the entire MSF global workforce that will enable the organisation to better meet its operational demands and contribute to MSF becoming a more equitable, just, and global organisation. This includes our benchmarking and pay strategy, living wage policy. The working group is focusing on developing minimum standards for benefits, including health coverage, retirement, provisions in case of death or disability, and paid leave. The group is also focusing on developing a common frame for minimum lower-level salaries, building on MSFs existing Living Wage methodology (household expenditure surveys) and other indicators included in benchmark studies conducted by the Benchmarking Unit. The main objective is to establish a remuneration policy that supports and empowers local level decisions by providing standards and tools for local adaptation, supported by the benchmarking process.

## Training

Market information obtained from a salary study has the potential to have a significant financial and operational impact on MSF operational units' budget as well as on the numerous organisations participating in the surveys, including their employees. Through regular training sessions we ensure proficiency of our Remuneration Analysts in executing established processes and methodologies to complete a high-quality study, to ensure consistency of approach and thus a clear and solid basis of data for decision-makers about compensation & benefits in MSF.

Training encompasses the core principles, guidelines, and methodologies that are the foundation for an effective benchmark, as well as important templates and tools. A typical training seminar is carried out over a three-day consecutive period for four hours each day. The training includes substantial time dedicated to work sessions individually or in small groups covering each phase of the benchmark process.

Two group training sessions were completed in 2022, in addition to three individual online training sessions, together encompassing more than 15 first-time analysts comprised of different nationalities and located in various countries. In addition to preparing these individuals for executing benchmarking studies, the training provides additional skills and expertise that can be applied in other HR roles within MSF.

In 2022, all members of the BMU Coordination were active in facilitating the training sessions and contributed to the revision of the exercise material to improve quality and to deliver a more concise online version of the training.

The Benchmarking Unit also started engagement with MSF Tembo (<https://tembo.msf.org/>) to develop an integrated, multimedia learning and development programme for new and seasoned analysts as well as special interest groups. This will be developed jointly in 2023.



## Client Satisfaction Surveys

To facilitate continuous improvement of the benchmarking process, the MSF Benchmarking Unit completes a survey of participants regarding their overall satisfaction of the benchmarking process. In 2022, MSF surveyed the participants of 19 benchmarks (8 benchmarks were surveyed in 2021) including International NGOs, local NGOs and businesses, international agencies, and public institutions. We asked participants to rate each main process activity on a scale of 1-5 from being dissatisfied (1) to being very satisfied (5) with how each activity was carried out. All the responses were 4 on this scale and showing an increase of satisfaction compared with the previous year.

**Table summarising score for participants in the Client Satisfaction Surveys:**

Average score is cumulative. Number of responses for 2021 and 2022 was 66 and 133 respectively			
	Survey Item	Average Score 2021	Average Score 2022
1	Communications regarding the benchmark process and your participation in it were clear and understandable.	4.41	4.56
2	The Data Collection Sheet (DCS) was a useful tool to collect information about your organization.	3.98	4.18
3	The DCS was reasonably easy to use independently or with support from the Analyst.	3.92	4.14
4	The Benchmarking Report was delivered to you in accordance with the commitments made by MSF and timely in terms of your needs and expectations.	4.33	4.48
5	The Benchmarking Report included no information that would enable anyone outside your organisation to identify any information pertaining to you.	4.42	4.51
6	The Benchmarking Report layout, structure and content was clear, easy to understand and provided you with useful information regarding your position in the market.	4.14	4.27
7	The overall benchmarking study was an efficient and well managed process for your organisation.	4.27	4.33
8	You would like to participate in further benchmarking studies with MSF.	4.36	4.51
9	You would recommend to other organisations to participate in benchmarking studies with MSF.	4.38	4.6

## Challenges in 2022

The year 2022 started with challenging circumstances. Due to a planned temporary absence, the Unit was headed by an interim coordinator. Two other coordination positions became vacant and were filled in January by two newly recruited candidates, one Project Manager and an HR/Pool Manager. This significant turnover coincided with a busy period with many requests for surveys, which were delayed until the new team was functional. By mid-year the bottleneck was cleared, and surveys were running again according to schedule. Despite the delays, all planned benchmarks were concluded within agreed timeframes during the year.

The new team was geographically dispersed with members residing in France, Brazil, Norway, and Germany, working largely on a remote basis. To ensure and enhance effective collaboration, a successful team coaching exercise was undertaken with the support of the MSF Mentoring and Coaching Hub.

Another major change occurring in the first quarter of 2022 was a change in the benchmark funding mechanism that transferred more financial, logistical, and administrative responsibilities to the requesting entities. While this was generally well accepted by the Operational Centres, new administrative processes and necessary interactions with contracting sections and OC pool managers, and especially for Analysts from Non-Residency Countries, were challenging. Similarly, the globally dispersed coordination team faced some difficulties regarding hosting arrangements with MSF.

The BMU's involvement in the Rewards Review project also increased throughout the year with more frequent working group meetings and greater demand for data.

Despite the challenges and new ways of working introduced in 2022, the number of survey requests steadily increased as MSF Operations were under pressure to respond to the worsening global economic outlook.

## Outlook

In 2022, the global economy declined significantly, with high inflation in most countries, both in the Global South and North. An Economic Turmoil Situation, that warranted temporary relief measures to protect our local staff, was triggered in several countries. This resulted in concern regarding the adequacy of MSF's salaries worldwide, and whether the organisation was currently able to identify and monitor crises on a timely basis. As a result, the number of benchmarks requested – often at short notice – increased.

The frequency we use to survey labour markets and living wages was challenged by both the IDRH and the Full ExCom. As a result, the Benchmarking Unit was requested to assess new ways of working and required resources to ensure the future sustainability of our approach. This included our current methodology for the Monthly Household Expenditure Surveys, which had evolved from being an add-on to the benchmarks to a main driver of our labour market intelligence.

At the same time, we received the highest number of requests from Partner Sections and Regional Entities, both as standalone HQ survey (e.g. Argentina, Germany, Portugal) and as part of combined surveys together with MSF missions in the same country (e.g. Brazil, South Africa). Anticipating future requests for HQ benchmarks, together with the implementation of the Rewards Review initiative, has driven further evaluation and revision of our methodology and processes. The development and

improvement of our data infrastructure will therefore be a key factor in the coming years. This will improve the efficiency of our processes, usability of our data, and quality of our services to our diverse stakeholders and users.

For the future we will focus strongly on regionalising and diversifying capacity, expertise, and processes, while at the same time ensuring consistency and accountability through a centralised coordination. Pioneering cooperations were launched in 2022 with our regional entities, CAMINO, MSF-Lat and MSF-Eastern Africa. Further regions will be approached on an ongoing basis and are encouraged to get in touch with the [BMU](#).

We also aim at intensifying internal collaboration, for example with other research, evaluation and analytical entities within the MSF movement, to better utilize potential synergies and resources.

The coming years will be a time of re-orientation, potential growth, new alignments and stronger integration with the goal of efficiently serving and supporting MSF in fulfilling our mission to provide medical assistance to people affected by conflict, epidemics, disasters, or exclusion from healthcare.

## Appendix

Focus Area	Strategy	Key Initiatives/Activity
<i>Purpose/ Identity</i>	Ensure that the BMU is the primary source and reference for labour market intelligence for internal and external users for remuneration management and all rewards-based evaluations/initiatives	Share market intelligence throughout the MSF Movement
		Promote transparency
		Support compliance and consistency with Common Frame
		Support and advise on new compensation and benefits issues and developments (Rewards Review)
		Maintain independence
<i>Communication/ Relationships</i>	Enhance BMU “brand” recognition in terms of labour market knowledge and expertise within MSF and the external INGO sector	Profile BMU targeting OCs, Sections, the INGO sector, and other key stakeholders
		Develop BMU value proposition: quantitative/qualitative, equity (responsible employer), donors (fiduciary duty), compliance (Common Frame), Centre of Expertise/Excellence
		Build on/enhance strong relationships with network of collaborators and other key stakeholders
<i>Capitalize on core strengths and resources</i>	Enhance and expand the BMU community of specialists in labour market intelligence, remuneration management and reward-based initiatives. Maintain and develop core BMU tools and work processes to provide MSF with high quality information, tools, case studies, examples to enable fair decisions in the area of comp and ben.	Optimise and develop talent and capacity for market research on global level
		Create a community of learning that fully integrates Remuneration Analysts
		Maintain and reinforce capabilities by evaluating and challenging core BM processes
<i>Process and sustainability</i>	BMU Ensure timely, high quality labour market information/intelligence through quality, cost effective processes. Secure transferability of core process execution to ensure independence from individual employees.	Develop adequate coordination, supervision and analytic capacity through recruitment, training (including on the job training) and career opportunities for small group of Remuneration Analysts (MIOs) performing benchmarks and coordination activities on an ongoing basis
		Develop and maintain robust core process documentation

External profile	Develop BMU profile and collaboration with the INGO sector	Enhance and expand network of contacts within the INGO sector to maintain interest and increase scope of participants in individual projects
		Focus on CRM (Customer Relationship Management)
		Develop/evolve “partnership” concept with key participants through increased focus on addressing unique needs, debriefing and project follow up
		Evaluate cost sharing with key participants
		Maintain/enhance MSF’s presence/image in external market
Operations	Ensure effective project planning, supervision and follow up and delivery of high-quality market intelligence in accordance with agreed deadlines	Clarify and communicate process methodology within the MSF movement
		Systematically follow up Remuneration Analysts throughout BM project period
		Deliver high quality reports according to agreed deadlines while maintaining a high level of confidentiality
		Ensure high quality narrative reporting in English language HQ reports and facilitate production of other language reporting to enhance the quality of reporting for non-native English-speaking analysts and the utility of our product to all participating organisations by offering local language participant reports
Other operational/development	Maintain an emphasis on continuous process improvement focused on providing new and/or improved market intelligence to key internal and external stakeholders in an efficient and cost-effective manner	Process evaluation and improvement
Team Building	Facilitate relationship building and sharing with coordination team members and other key stakeholders	F2F meetings with coordination team and key stakeholders
		Integration of new coordination team members