A DISAPPOINTMENT

The ILO Administrative Tribunal has dismissed the appeal of three former staff who had challenged WHO’s decision to raise health insurance premiums by basing them on 30 years’ of "notional" service irrespective of the actual time of employment.

The crux of the decision is in paragraphs 20 to 22 of Judgement 1241 handed down 20 January 1993. The Tribunal’s arguments are summarized here, along with criticisms of them.

• Fair Shares. The Tribunal held that contributions assessed on actual service offended against "the fair sharing of costs", since pensioners with short service enjoy all benefits even though paying less premiums than others with long service.

This flies in the face of the principle of solidarity applicable to serving colleagues. Serving staff — whether a D-1, a P-1 or a G-1 — pay vastly different contributions in return for the same benefits. Why should a rule that holds good for them not also be applied to pensioners?

• Ability to Pay. The Tribunal based pensioners’ ability to pay not only on their U.N. pension but also on presumed earnings from earlier employment.

Both the Tribunal and WHO base themselves on suppositions; WHO admits that it had no data on the matter. The appellants presented details from representative cases, showing that many former staff with short service (including those from industrialised countries) do not have other pensions. Even more stri-

"That's the law for you; you never know what the outcome of a trial is going to be. In this case, it's tails, and you're guilty."

A DISAPPOINTMENT

The negative judgment by the ILO Administrative Tribunal is a disappointment which, frankly, we do not understand. It is obvious to anyone who knows WHO that a career of thirty years is the exception rather than the rule.

We do, however, want to take this opportunity to record our thanks to Mr Klaus Samson, our legal adviser, for his efforts which absorbed a great deal of time over three years - all given voluntarily.

S. Flache, General Secretary

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NO SINGLE AGE FOR "RETIREMENT"

Aging is not a disease. Thus the physiologic changes that occur with time do not constitute an illness for which there is a vaccine under development or a pill to provide an immediate cure. When musing about oneself and the alterations in one's body over the passage of years some of the changes noted are associated with aging while others are a result of one or more chronic diseases acquired along the way. This is true notwithstanding the fact that in some circumstances this distinction may be difficult to make and in other as unimportant. Yet there are clearly ways to make the passage of time more "successful". Some will apply to virtually all persons regardless of what chronic diseases they have acquired while others are directed more to the specific needs of, perhaps more appropriately phrased, opportunities of an individual.

The idea that there is an age for retirement is incorrect, on two accounts. First, there is no specific age knowable in advance when a person should "retire" from most jobs because of medical or age-related reasons. In part, this reflects the striking differences in the peak capabilities of each of us and the tremendous variability in the changes that occur because of aging.

And second, there is a marked variation in the kinds and severity of the diseases each of us experiences, as well as in our personal desires and social circumstances. Because there is no biological basis for most of us to "retire", or leave an active life on a day established by tradition or proscription, the very concept of retirement may be questioned. It should not be presumed that at a certain time one should stop. Indeed, quite the reverse is usually the case.

To maximize success throughout life and during "retirement", it is necessary to maintain one's physiologic reserve as long as possible. This effort is best lifelong, although it can begin at any age. Hence, for example, the increasing interest in cardiovascular fitness (by exercise and diet) and, more recently, gastrointestinal fitness (by a high fiber diet). It is also desirable to prevent, whenever possible any condition which is likely to deplete further the physiologic reserve. Hence the advisability of avoiding large amounts of sunlight throughout one's life and of giving up cigarettes at any age even well into old age.

Geriatrics is interested in the whole range of changes that diminish functional capacity as a result of either age or disease or both. WHO's Health of the Elderly Programme is studying some of these in a series of cross-national investigations. At many research centres, a host of interventions are being carried out to improve ways of successful aging in contradistinction to curing specific disease.

For example, modulating the changes that take place over years in bones that make them more likely to fracture, protecting against the loss of muscle mass, which is seen virtually universally in older persons. Few fields in science have grown so rapidly in the past decade as geriatrics.

Thus within the next five to ten years many novel and even dramatic approaches are likely to improve the chances of achieving successful aging by many, and perhaps even all, individuals.

Knight Steel,  
Chief, Health of the Elderly

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CHANGES, CHANGES (MORE)

The following are recent staff appointments:

**Food and Nutrition**
- Dr Graeme A. Clugston, formerly Medical Officer in the Nutrition unit (NUT), has been appointed Chief.

**Office of Information**
- Mr Michel Barton, formerly in charge of information at the Inter/Parliamentary Union, Geneva, has been appointed Programme Manager, Office of Information (INF) and the Director-General's spokes-

**Technical Cooperation among Developing Countries**
- Dr H.M. Kahsay, Scientist, Division of Strengthening of Health Services, has been appointed Focal Point for Technical Cooperation among Developing Countries (TCDC). (He succeeds Dr C. Vuk-
The UN Pension Fund, with assets totalling more than $10 billion did well in 1991, according to the UN Staff Report (January '93) a monthly independent publication put out in New York.

Investments in bonds, stock, real estate and related securities, produced an overall income of $757.1 million or 4.3 percent in real terms. In temporary investments in other currencies however, the fund suffered a loss of $22.3 million.

The companies handling investments are the Fiduciary Trust Company International (FTCI) and International Management Service (IMS), both based in New York.

An analysis of administrative costs, which totalled $6.9 million, shows expenditures for "office furnishings" of more than $1 million (compared to $30 000 in 1990), and data processing costs of $1.7 million (up from $183 000). But hospitality expenses were under $5 000.

Cost of investments services escalated largely due to increased expenses for "custodial services and investment counsel" from $7.7 million in 1990 to $10 million and data processing costs, from $20 900 to $590 500. The Investment Committee, however, spent only $121 200 (about $26 000 less than in 1990).

The Fund continued to invest in countries where tax exemption status is not granted. But even in tax exempt countries, refunds amounting to $8 378 000 have remained outstanding, a fact criticized by auditors in their report to the General Assembly last year.

In a nutshell:

—Total benefits paid out in 1991: $500.8 million
—Total contributions received: $641 million
—Administrative expenses: $6.9 million (an increase of $4 million over 1990)
—Investment costs: $12 million (an increase of almost $3 million)
—Total participants: 60 181

With investments in 52 countries and 41 currencies, the fund is unique. There is no other with such diversity. As of 31 March 1991, investments in developing countries amounted to about 13 percent of assets at book value, or 15 percent at market value, according to AAFI/AFICS.

Of this total, 32 percent is in international development institutions (World Bank), about 44 percent in regional development banks (African Development Bank, Asian Development Bank, Inter-American Development Bank). Most are in highly rated bonds, all issued in convertible currencies.

The rest of the investment in the developing world, about 24 percent is in stock markets which have performed well, for example, in Argentina, Mexico, Chile and in South East Asia. While these investments have done well, they are not large enough to affect the total return of the fund.

About a half of all investments are in non-US dollar assets — not, however, in developing countries, but rather, in Japanese yen, German marks, British sterling, French and Swiss francs, Dutch guilders.

The Regions

- Mr G. Koulisher, formerly Chief, Administration and Management, Onchocerciasis Control Programme in West Africa (OCP), has been appointed Director, Support Programme, SEARO.

- Mr J.-M. Trudel, formerly a senior management consultant in the private sector, has been appointed as his successor.

- Dr Bernard Kean, formerly WHO Representative, China, has been appointed Director, Drug Policy, Environmental Health and Health Technology, WPRO.

- Dr Francois Canonne, formerly Regional Adviser, Development of Human Resources for Health, WPRO, has been appointed WHO Representative, Lao.

Secretariat Water Council

- Mr Ranjith Wirasingha, on secondment from the Asian Development Bank, and Mr Bryan Locke, from UNDP, have been appointed, respectively, Executive Secretary and Deputy Executive Secretary, Water Supply and Sanitation Collaborative Council which operates autonomously within the framework of the Division of Environmental Health (EHE).
Health Insurance

**CUTTING COSTS, NOT BENEFITS**

- Don’t accumulate medicines; buy just what’s needed. “The insurance should not be asked to finance ‘stocks,’” the Surveillance Committee says.

- Do consider alternatives to hospitalization: home care through SITEX (*Soins Intraveineux et Therapies Extrahospitalieres*) when intravenous treatment’s all that’s needed; opt for a convalescent home rather than an extended stay in hospital, where often "the accommodation rate is higher than that of a room in a luxury hotel"

Such examples of thrift are urged in a circular to participants dated 11 January 1993. There’s a need to keep claims as low as possible to counter the "rising costs of medical care — which is higher than general inflation — and an increasing aging population, it says.

The bottom line: rather than cut benefits, it’s preferable to reduce them (for instance, effective 23 December ’92, three thermal cures only every five years at $500 each cure), and to cut costs. *(See also, In the Press)*.

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Dr. Thomas Strasser’s Corner

**SEXUALITY OF OLDER WOMEN**

The belief that older women are asexual is a myth. While male sexuality is at its maximum at 18 to 20 years, female sexual activity peaks in the 30’s and 40’s, and is maintained at that level into the 70’s and beyond, depending upon opportunity and social support.

"Unlike the prevailing stereotype, menopausal and post-menopausal women report heightened libido and interest" says Pathy’s classical textbook of geriatric medicine. Physiological and affective changes do occur with years, of course; but emphasis is, like in men, on the word "change", having a different connotation than "decline".

Is loneliness, both social and sexual, the price to be paid for longer life? Perhaps, if enjoying good physical and mental health, the older single woman’s problem is partnership.

On the average, women live longer than men; therefore, there are more widows than widowers. Elderly women have fewer chances to have or to find a sexual partner than men of similar age. Social misconcepts about the unattractiveness of elderly women also play a role. Widowers tend to marry younger women also for social reasons.

However, from the physiological point of view, the age-related changes in female sexuality tally with the corresponding changes in males: slower and less intensive response to erotic stimuli, and less frequent arousal are the characteristics of age-related changes in both genders. Therefore, sexual relations between elderly, healthy partners may be more harmonious than if one of the partners is young. The need for affection and tenderness coming from the other sex, a premise for healthy eros, persists into old age.

*(Barriers caused by disease will be dealt with next.)*

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**APPEAL (cont.):**

King, where pensioners did have other pensions, they were always far below the level of a U.N. pension.

- Discrimination. The Tribunal felt that appellants could claim discrimination only if premiums had been assessed on a notional pension that went beyond the span of a "normal" career.

The evidence that appellants provided of their

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**APPEAL (cont.):**

own lengths of service, as well as of twenty others, were ignored.

In their pleadings, appellants accepted the idea of a minimum contribution based on a general standard. Under proportionality, a general principle of law recognised by the Tribunal, such a standard must bear a reasonable relationship to total pension from UN and non-UN sources.

The "notional" 30-year service as the basis for contributions is badly out of line with pensioners’ income. Also the normal, average length of U.N. service is roughly 17 years for professionals. In WHO, for special reasons, many are recruited only in later years. Contrary to all evidence, the Tribunal accepted 30 years as "the span of a normal career" in WHO.

There are thus doubts as to the wisdom and justice of the Tribunal’s decision that pensioners must now live with.

Although the avenues of legal challenge have been exhausted, the issue, particularly where there is hardship, is not dead.

And there are other points for examination as well. The excessive reserve requirements of the health scheme (projected $600 million by 2014), with their negative effects on the fund’s finances and contribution levels. The unequal treatment of pensioners whose premiums are based on pre-tax pension compared with serving staff who are assessed on after-tax remuneration, that is on net pay.

*These will be pursued.*
**LIFESTYLES**

**Grandparenting**

Last Christmas was an occasion not quite like any other for Helene Jaquemet, formerly of the telephone exchange. Thanks to daughter Christine Drezen and husband Michel, but particularly to grandson, Mael (weight 4 200gms), she became grandmother for the eighth time then — must be close to a record for former staff. The Christmas gift was delivered at 18.00 hours on 25 December 1992, she reports precisely.

**Anything but "Retired"**

— Gunter Bachmann, formerly of Environmental Health, joined forces with serving colleague Ivanildo Hespanhol, of like discipline, to lecture at a seminar for engineers from the Third World held in Fulda, Germany last January. That's another joint venture, pooling talent of the present and the past.

— Jean-Louis Michon, formerly of Translation, who holds a doctorate in Islamic studies from the Sorbonne, gave a course in Geneva on the region's art and civilization.

**A Tip of the Hat**

— to the Headquarters Surveillance Committee for following up a proposal made by the Association, by providing identification cards made out separately to former staff and spouses, thus showing positive proof that holders are covered under the WHO health plan. Much needed and much welcome.

— to Thalanayar Sundaresan, former staff member, for labouring mightily and patiently over months and producing the first directory of Association members — 32 pages all told from Abbott in Scotland to Zivojinovic, Margaret, in England with persons and places in between. Already an updating has begun for the second version to include first names, a listing by regions and other suggestions offered.

**Another Beigbeder Book**

— Yves Beigbeder, formerly personnel, has just published "Le rôle international des organisations non-gouvernementales" (Bruylant, Brussels, Publ.) The short book in French reviews the legal status and other characteristics of NGO activities concerned with humanitarian action, human rights and development.

**IN THE HOUSE**

**Newest Members**

Admittance of the Czech Republic on 22 January and the Slovak Republic, on 4 February, brings WHO membership now to 183.

**SBS Changes**

On 8 February the Swiss Bank Corporation closed its 6th floor offices in the main building.

There are now two SBS places of business at headquarters:

- Main building for withdrawals, deposits in any currency; purchase and sale of precious metals and coins; transfer orders; collection of bank cards, travellers cheques (24 hour advance notice).

  Two money machines, one on a 24-hour basis 365 days a year.

- L-Building for services as in the main building. Plus opening of accounts; investments and investment advice; card code numbers (PIN); mail retained; accounting questions; attestations; client cards; credit cards (VISA) and EC-cards; stop-cheques; loss of bank cards; numbered accounts; bank draft orders; loans.

**UN Stamps on Aging**

The United Nations has issued a set of six stamps (denominations US$ 0.29, 0.52; SF 0.50, 1.60; AS 5.50 and 7.00) entitled "Aging: Dignity and Participation".

These commemorate the World Assembly on Aging in 1982. Among aims set then: the abolition of stereotypes that perpetuate the notion of the elderly as a burden to society and a drain on national income, and of outdated methods, such as institutionalization, that have proven to be largely ineffective.
AT THAT AGM LAST OCTOBER

For myself and several members of the Association who attended the AGM of the Staff Association last October, the principal interest was adoption of a resolution that the term "Member of the Association of former WHO staff members" shall apply, mutatis mutandis, to a surviving spouse. It was passed unanimously and thus fills one little gap in our constitution.

Another resolution, however, gave rise to a prolonged and lively debate. Its aim was to limit the employment of former staff at a time of high unemployment and of financial crisis.

The debate revealed that there was great bitterness amongst some staff at what they saw as abusive appointments and it was clear that they had very definite individual appointments in mind. Several allusions were made to cases where relatively senior staff had apparently prepared their return to their original, or similar positions, before leaving.

The element that gave rise to most heat was the fact that the duration of contracts for certain former staff was deliberately fixed to absolve them from contributing to the pension fund.

The speaker representing those who had drafted the resolution admitted that it had been worded deliberately in a provocative manner, an aim which was possibly a little too successfully achieved even if the debate probably served to clear the air.

A revised resolution was prepared in haste and it was left to the Staff Committee to finalize the final wording. The main thrust was to demand that all contribute to the pension fund and that extensions be discussed at staff-management meetings. (See also "The New ism?" U.N. Special page 8.)

It does seem reasonable that those who take on a paid position should again contribute to the pension fund. We all know its parlous financial situation!

Few would wish to be paid for doing a job that could adequately be performed by serving staff, especially to the detriment of someone's career.

Others who agree to take on short-term, possibly highly-specialized assignments - whether paid or unpaid - do not yet need to fear finding themselves barred at the door by phalanxes of angry former colleagues!

Rosemary Bell
Assistant General Secretary

In the Press

THE NORDICS DIFFER

Must the age of retirement be lowered because of unemployment and economic recession? The Nordic countries have different views.

- Finland has fixed the age at 65 years for both sexes, with an option of early retirement at 60.

- Sweden, on the other hand, is at present debating whether to raise the barrier from 65 to 67. The argument in favour of this is that the extra two years will add considerably to the national economy while cutting down on sickness payments.

According to some Swedish experts "Work is and will always be beneficial for people's moral and physical health". The other side of the coin is that retirement at a lower age will make more space for young job-seekers, now that the national unemployment rate stands at 6%.

- Denmark and Norway have set retirement at 67, and the Norwegians can even work on until 70. The Danes on the other hand can choose early retirement at 62, and many people do so since no less than 11.3% of the work-force cannot find jobs.

- Italy has just changed its retirement age, since 1 January. Hitherto men retired at 60 and women at 55. These levels are being progressively raised until by 2002 they will stand at 65 for men and 60 for women.

The number of years of work required to obtain the maximum pension will remain unchanged at 35 years; but the pension will now be calculated on the basis of 80% of the average salary earned over the last ten years, instead of over the last five years as at present.

Tribune de Geneve, 14 Dec 1992
GM'S GRIEF

"General Motors will report a loss of about $23.5 billion for 1992 — the largest in U.S. corporate history, almost all of it due to the costs of health care for the company's 594 000 retirees and their families...."

Two months ago, Ford took a $7.5 billion loss for the same reason. Those generous promises made to workers over the years have turned out to be far more expensive than anyone expected, since advances in medicine meant that people live longer retirement and require more care. Many U.S. firms are slashing or eliminating their retiree benefits...."

Time, 15 February 1993

Quotable

"...here is (one way) to ensure the solvency and generational fairness of the (U.S.) social security: "Raise the retirement age. If 65 was the proper retirement age in 1940, today, because of rising life expectancies, it should be at least 70."

Job Cowan, Rob Nelson
founders of "Lead...or Leave,"
a generational political movement.
Extracts from Int'l Herald Tribune, 16 Feb. '93.

Letters

(Unless stated to the contrary, letters are routinely considered for publication to encourage an exchange of views.—Editor)

'NO STONE UNTURNED'

Re: "Tax Reimbursed" News 11. Autumn. I would like to express my gratitude to the members of the Executive Committee who met many times with the responsible officers in the Administration in an effort to settle the question of my tax reimbursement.

In addition, after ascertaining himself of the soundness of the case, the Ombudsman, Mr Jean M. Leclercq, left no stone unturned in following up the matter at all levels of the Administration until action was taken. He even advised me personally of the successful conclusion.

Never despair, the Association and the Ombudsman are here to help!

Shawky Bishara
Segny, France

INCOME-TAX : SPAIN

I am a former WHO staff member and reside in Spain. I would be grateful if you could let me know if pensions are exempt from income tax in Spain and if so by what convention or article so that I could cite this in trying to claim from the Spanish government.

Dr Luigi de de Lucia
Playa San Juan de Alicante, Spain

(SOS readers —Editor).

INDIA, PHILIPPINES

It is well known that India and the Philippines exempt UN Pensions from income tax for their nationals.

Michel Fevre
Conferenc and General Services, CGS-WHO

PARAGUAY

On the subject of exemption of U.N. pensions from income tax (News, 11 autumn), in addition to Austria and Spain, please be informed that in Paraguay no income tax has to be paid.

Inquiries with the U.N. representatives concerning tax conditions in neighbouring countries like Brasil, Argentine or Uruguay, up till now, have been in vain.

Joachim Walter
Asuncion, Paraguay

Acknowledgements: The Executive Group thanks those who have made possible this Autumn issue, especially Peter Oszorio (Editor) and Rajindar Pal.

The New "Ism"?

More in sorrow than in anger this must be said:
Former staff have felt a little less welcome at WHO since last October when their serving colleagues held their annual general meeting.

A resolution was adopted then, by a vote of 89-5-13, to "limit the recruitment of retired staff for work of a continuous nature."
• The ten-or-more sponsors described the resolution's intention as "non-discriminatory," and anti-nobody. However, the original language in the draft introduced suggests otherwise. It read:
"The staff demand that recruitment be banned for retired staff members who receive a full pension based on 25 years of more of service."

Thus, not only were former staff singled out, but even worse, a minority of them were pointed up for different treatment. At last count by WHO's Administration, 19 former staff worked as consultants. In addition, a means -how much a pension-was made a condition of employment. Presumably, 24 years of service would have been acceptable to the resolution's sponsors because the pension would be less.
• The sponsors also justified the resolution on grounds it was "pro-staff" and intended to create, or at least not block, jobs for staff. However, the "ban" proposed was not aimed at consultants per se, which would have, logically, led to more openings, but at only those who happened to be former staff. It made no distinction between former staff who are paid, or those who serve voluntarily. So a reasonable presumption is that it was against all who reach the age of mandatory separation from service.

Furthermore, the resolution was titled "Appointment of Retired Staff." If it were non-discriminatory, as claimed, then it would have been better titled "Appointment of Consultants"—all of them, and not just those who happened to be former staff.

The resolution, in all of its myopia, was adopted at a session described as the liveliest of annual general meetings for years. That it was characterized by much emotion was evidenced by such sentiment:
• That the recruitment of former staff would lend to the "general aggravation of unemployment prevailing locally," that is on the Swiss market; that it stood, somehow, in the way of "giving youth a chance;" and that some former staff considered retirement as "punishment."

In the end though, a modicum of good sense prevailed. The paragraph containing the word "ban" was rejected, a new text proposed (as summarized in paragraph 2, above) and adopted. Unfortunately, however, the change in language did not signify a change in the resolution's intent.

As adopted, it is still ageism.
One group of people has been treated unequally, not even-handedly. Moreover, the resolution makes no difference between types or lengths of contracts, nor does it address the interests of WHO.

Worst of all, coming from international civil servants, the resolution ignores basic rights, among which is personal choice—whether to work or not to work. Nothing less than the U.N.'s proudest proclamation, the Universal Declaration of Human Rights, affirms the right to work.

Surely it cannot be disputed that all individuals are possessed of that right—if they wish to exercise it, if an organization needs their services, provided, of course, that no rules are bent or broken, particularly those governing pensions.

Such is the position of WHO's Association of Former Staff. "We make clear to our serving colleagues," it said recently in its quarterly newsletter, "that we have no designs on their jobs... Our contribution is limited to the project, the study, the assignment, that our serving colleagues just cannot themselves carry out because of pressure of other work, and which outsiders carry out, experience has shown, inadequately."

In lamenting ageism, "the new discrimination," a journalist writing in the European observed: "The only consolation is that contrary to other 'isms,' such as anti-Semitism, or racism, or sexism, 'ageism' is not restricted to a minority... Everybody will sooner or later be old."

(The author is UNS columnist)