HARD HIT CASES

More and more pensioners are reporting financial difficulties following the decision of the WHO Administration to base contributions to the staff health insurance plan on a “notional” 30 years of service, irrespective of the actual length of employment. (See also “Anything but Retired,” p. 6 and “Anger at 85”, p. 7)

Colleagues hard hit are asked to provide to the Association a clear statement of pension and premium formerly and presently paid. These facts will be consolidated for presentation to the Administration.

The intent is to show that the increase represents a high proportion of pension, which, in some cases have forced colleagues to withdraw, despite risks, from the insurance scheme.

The statements are requested by September 15, 1994, by letter or by FAX.

PLACE OF TREATMENT

Although the circular entitled “Place of Treatment” (IC/93/95, 10 December 1993) caused anxiety among some colleagues, representatives of former staff on the Surveillance Committee approved the new provisions following consultation with regions.

The circular announced certain limitations on reimbursement in Canada and the United States because prices are much higher there than in Europe for similar procedures producing comparable results. Thus, while colleagues are free to choose the place of treatment, reimbursement will be made on the basis of European rates. The restrictions do not apply to those who are resident of, or whose duty station is in, the two countries, or to those permanently resident. Neither do they apply in emergencies to visitors. Moreover, exceptions are possible, when justified.

PRE VS. POST INCOME

The Association has advised the Chairman, Health Surveillance Committee, that the “question of premiums of former staff cannot be considered closed” — thus giving a different interpretation to ILO Tribunal Judgement 1241 than the Administration has done.

That judgement, the Association says in a letter of 17 January 1994, does not prevent it from questioning the basis of calculation of premiums. (“Le jugement du Tribunal Administratif n'empêche rien que plusieurs aspects soient à nouveau pris en consideration.”) The judgement simply found premiums based on an imaginary 30 years of all service for all retirees legal, irrespective of actual length of service.

Premiums, however, are worked out on a pre-tax income for pensioners, and on after-tax salary for serving staff. Representatives of former staff are expected to pursue the issue of this inequality at the next meeting of the surveillance committee.

AUTOMATIC DEDUCTIONS

Colleagues who receive pensions in local currencies, and who opted for automatic deductions of their health insurance contributions from pensions, pay different premiums monthly, depending on the exchange rate of the U.S. dollar. Now, thanks to the initiative of the Staff Health Insurance, the U.N. Pension Fund will determine the monthly amount at the beginning of the year and keep it unchanged, thus making automatic deduction more attractive.
My imminent retirement has started bothering my better half more than me. She is having spells of gloomy forebodings, wondering how I was going to handle the void that the end of my professional career will cause.

"Of course, it will kind of take the fun out of weekends, sweetheart. But please don't worry," I try to reassure her. "I am certainly not going to sit back in our terrace garden, waving years of memory about, and preparing myself for a happy, peaceful death. I will give you many surprises, believe me, many." But she seemed unimpressed, and her look still revealed deep concern.

That was almost three years ago. I did retire, but quickly unveiled my plans and began pursuing them systematically: writing, composing music, travelling, giving more time to the family. I am now as busy as before but in a much pleasanter and relaxed way. My sweetheart now agrees that retirement has been "bliss."

Let me share with you a few thoughts of eminent people on "retirement" that I have found not only illuminating but of much practical value:

Retirement must not mean just vegetating. Harry Emerson Fosdick, minister and author advises: "Don't simply retire from something, have something to retire to." And Margaret Mead the anthropologist says bravely: "Sooner or later I'm going to die, but I'm not going to retire." Harold R. Medina, judge, asserts: "I felt, after reaching ninety-two, it was time to sleep in the morning if I chose to do so, and I have a lot of projects of my own to work on." Contrary to a common belief, a retired husband need not necessarily become "a wife's full-time job." Retirement can, and must be, the time to reveal our other personality — the loving, romantic person within us which lacked opportunities for expression during our busy professional life.

Not long ago, at an international film festival in Calcutta, a charming film entitled "Madadayo" produced by the Japanese great, Akimo Kurosawa, was shown. Its theme is that life goes on just as before with the only dramatic event the disappearance of the cat that the professor and his wife dote on.

"Madadayo," which means "not yet," begins with a professor retiring after 30 years, with no particular plans. Life goes on just as before with the only dramatic event the disappearance of the cat that the professor and his wife dote on.

His students arrange a party every year on his birthday. During observance of his 77th birthday the man falls sick. His ex-students are in shock and prepare for the worst but he turns over in his bed saying "madadayo," suggesting that we must endure our going hence, even as our coming hither. Ripeness is all.

It is important, above all, not to surrender enthusiasm. Author and poet Samuel Ullman wrote, "Years wrinkle the skin, but to give up enthusiasm wrinkles the soul." The magic of enthusiastic love of life is that it puts a sparkle in our eyes, a lilt in our steps and smooths the wrinkles from our souls.

— Sunil Guha
(formerly ILO)

### Linking Health and Human Rights

The major aim of the recently reconstituted WHO Working Group on Human Rights is to sensitize staff to the relevance of their technical programmes to human rights, in the light of experience indicating that that linkage is not always made.

The Director-General has named Dr Stanislas Flache, formerly an Assistant Director-General and now Chairman of your Association, Chairman of the 16-member Group that reports to the Director-General's Special Adviser on Health and Development Policies, Dr Aleya El Bindari Hammad.

It had become evident over the years that many programme staff had difficulties in relating the "right to health," a fundamental human right, to their specific spheres of expertise. It was ascertained that many, if not the majority, are not familiar with basic treaties, including the seminal International Bill of Human Rights and even the health provisions of the Universal Declaration of Human Rights, which was adopted by the U.N. General Assembly in December 1948.

Nor it appears, are many staff members acquainted with the provisions of more recent conventions, for example the 1979 Convention on the Elimination of All Forms of Discrimination against Women and the 1989 Convention on the Rights of the Child. There is even less awareness of the 1982 Principles of Medical Ethics Relevant to the Role of Health Personnel, particularly Physicians, in the Protection of Prisoners and Detainees against Torture and Other Cruel, Inhuman and Degrading Treatment or Punishment, developed jointly by WHO and CIOMS.
I lost sight of George in 1944, when “our hair was raven,” being both 22 years old. I met him again half a century later, in 1994. Having emigrated from Central Europe in 1948, after that terrible war, to the farthest of all continents, he succeeded in acquiring financial independence (but no special wealth). Then, together with wife Agnes, they decided to start a second (or third) life. He is sculpting for his own pleasure, she makes pretty ceramics; they are both youngish at 72.

High age is no bar to creativity. Verdi composed “Falstaff” when he was 80. Picasso painted up to 92. Bertrand Russell wrote the “Art of Philosophizing” at 96, and the Tizian is said to have painted a “pietà” at age 98.

Using psychometric tests, gerontologists have demonstrated a direct positive relationship between intellectual capacities and age expectancy; cognitive functions show only a slight impairment (or none at all) until late in life. Diseases diminish the cognitive functions of elderly individuals, but in the healthy ones intellectual activity and life expectancy are inter-related positively.

Thus, the somewhat worn-out slogan “Adding Life to Years” may be rephrased: “By keeping intellectually active, live a pleasant long life.”

— Tom Strasser, MD
(formerly CVD)

And yet human rights have properly been a concern of WHO since its very creation in 1948. The preamble to its Constitution affirms that “The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition.” Reaffirming that belief in 1978, the International Conference on Primary Health Care, held in Alma-Ata in what is now Kazakhstan, laid the groundwork for “Health for All,” a concept that still informs many of WHO’s policies and programmes.

What, in practical terms, does the “right to health” imply? The short reply is this: Every human being is entitled to live in an environment with minimal health risks, to have access to health services that can prevent or alleviate suffering, treat disease, and promote and maintain good health throughout life. Even in our day there are countless people throughout the world, and not only in developing countries, who are denied such basic human rights because of their status or their vulnerability.

Another of the Working Group’s objectives is to ensure that a coordinated and harmonized WHO approach is taken in addressing human rights issues at external meetings, particularly in presentations to the U.N. Commission on Human Rights and its Sub-Commission on Prevention of Discrimination and Protection of Minorities.

WHO played a substantive role at the World Conference on Human Rights, held in Vienna in June 1993, and also participated actively in the general discussion on “The Right to Health,” held in December 1993 at the Palais des Nations under the auspices of the U.N. Committee on Economic, Social and Cultural Rights.

At the Vienna Conference, WHO presented a report entitled “Human Rights in Relation to Women’s Health: The Promotion and Protection of Women’s Health Through International Human Rights Law,” thereby underscoring the linkage between health and human rights. That report, authored by Rebecca Cook, has now been issued as a publication entitled Women’s Health and Human Rights.

Also, in the area of mental health, WHO was instrumental in the adoption by the U.N. General Assembly in December 1991 of Principles for the Protection of Human Rights of Persons with Mental Illness and for Improvement of Mental Health Care.

Among WHO programmes, it is the Global Programme on AIDS that has been keenly sensitive to the need to safeguard human rights. Insofar as important ethical issues have been raised by the pandemic, the need to combat the discrimination and stigmatization that are so often associated with HIV/AIDS has become abundantly clear.

Other programme managers could well learn from GPA’s experience for, as we approach the 21st century, the need is stronger than ever to establish a human rights framework for the health sector.

— Sev S. Fluss
(The author of this “informal, unofficial article” is Chief, Health Legislation (HLE) and Secretary of the Working Group)
France Voisine

TAXING SERVING STAFF: A RESPITE

Serving staff living in France have won a breather in the tussle to remain exempt from income tax — which was unquestioned until 1992.

At that time, and to their surprise, ILO staff in Paris were asked to pay taxes on salaries, and retroactively for three years to boot. By mid-1993, others in the Geneva area were also requested to fill out tax declaration forms.

However, France’s Minister of Foreign Affairs, Alain Juppé, agreed to “suspend, for a six-month period, the action taken by the tax authorities,” following the intercession of executive heads of the U.N. family in Geneva, and the Secretary-General himself. According to a WHO information circular (94/20): “The period would be used to reach a permanent solution to the matter.”

Although France has not ratified the international convention on immunities and privileges, ILO staff say, it has accepted the tax-exempt status of U.N. staff residing in the country.

“How can anyone think of rescinding a situation that has been valid over 40 years,” Pascal Meylan, Mayor of Ferney-Voltaire, recently declared in a statement reacting to developments.

Informed sources point out that international civil servants do pay a tax on their salaries which is called “staff assessment,” so the French plan amounts essentially to double taxation.

TAXING FORMER STAFF: A REMISSION

URSSAF (Union de recouvrement des cotisations de Sécurité Sociale et d’Allocations Familiales), the agency responsible for collecting a tax adopted by France in 1990, sent the following letter to a colleague:

“The settlement of your contributions in respect of the period indicated above reached URSSAF after the stipulated deadline. Consequently, penalties or overdue surcharges ought to be levied.

“We hope that you will appreciate the significance of this kindly remission.”

This gesture is indeed much appreciated, says the colleague concerned, who pays FF 1,621 every quarter to URSSAF, though he doesn’t know why.

IN THE HOUSE

Some 1,400 delegates from 178 countries attended the 47th World Health Assembly last May, which a round-up press release describes as “likely to be remembered as of historic importance.” In a 10-day session delegates:

• Admitted two Pacific island states, Niue and Nauru as full WHO members, bringing the total to 189.


• Adopted by consensus — for the first time ever and not by vote — a resolution on the health conditions of Arabs in the occupied territories. This procedure was made possible by the agreement signed in September between the Palestine Liberation Organization and Israel.

• Applauded the announcement by Queen Silvia of Sweden of the establishment of the Mentor Foundation for the prevention of drug abuse among children and adolescents, in partnership with WHO’s Programme on Substance Abuse.

• Called for the elimination of female genital mutilation in the societies that practice it.

• Endorsed a report showing over 30 million people in West Africa protected against onchocerciasis, or river blindness, since the programme began 20 years ago.

• Established an Administration, Budget and Finance Committee to assist the Executive Board and the World Health Assembly.

• Restored South Africa to full membership by rescinding the resolution adopted in 1964 that took away the country’s voting rights. Population: approx. 42 million.

• Stated that efforts need to be “redoubled” if the goal of eradication of dracunculiasis, or guinea worm disease, is to be met by the end of 1995.

• Warned that the reduction of measles cases by 90 per cent by 1995 will not be achieved without stepped-up campaigns of vaccination.
Ist Person Story

"I WENT TO DISNEYLAND"

‘Wheeeeee!’ we shout as we slide down a dark tunnel where Alph, the sacred river, gurgles under the floor of the float in which we’re riding. Cannons roar, smoke billows from the gunports of a galleon, as we go whirling past flaming ruins, while pirates carouse merrily.

A corsair leers at us, roaring drunk with his mongrel dog barking fiercely yet wagging tail. Deep in the caverns of the earth we see, by lurid light, a grinning Death, shrouded in rags and cobwebs, while sitting astride fabulous jewels and pieces of eight.

Now, we’re in another darkness, the Haunted House. Our float carries us past faces that fade into mirrors, past a piano that plays by itself. And here comes a ballroom crowded with dancers, ladies in crinolines, their beaux in evening dress, but only for a moment; then the scene evaporates and the ballroom is empty! Four heads appear, decapitated and deathly, singing a curious dirge; facial movements all perfect. It’s menacing but fun.

Into Fantasyland now, and shades of Charles Dodgson, (or Lewis Carroll, if you prefer). ‘We plunge into Alice’s Curious Labyrinth as water jumps in funny little spurts over our heads like transparent worms. The Queen of Hearts is, of course, shouting “off with their heads.” We wind past the languid Caterpillar on his mushroom in this maze of box hedges... And here he is, the dear old Chesire Cat with his ten-yard grin. We look above the hedges and see playing-card characters popping up and down with red lances. At last we find our way out of the labyrinth and go for a cup of tea at the March Hare’s teashop. Here, a huge teapot belches steam, and raising its lid, reveals the Dormouse who has been dunked in it.

For a quieter moment, we take a ride in an old-fashioned puffer which carries us round the spacious park, rich in coniferous and deciduous trees and well-tended lawns of thick grass. Then, a flight with Peter Pan across the roofs of London Town under a starry sky of velvet blackness, a journey through a valley of dolls, the world of Pinocchio. What was that terrible roar? The great scaly dragon in his watery cave, with glaring red eyes and nostrils, breathing fire and smoke.

There are many more attractions, such as a ride on a paddle-steamer past Thunder Mountain, where a maddened roller-coaster hurls round a crazy track. And if you’ve a mind to bang a spoon on a long desk and eat your chow from a tin bowl, get you to Buffalo Bill and his Wild West Show. Cowboys and Indians and all that. It’s rowdy, but great fun! And the price of admission covers all rides.

Such is this world of make-believe. They built Disneyland, Marne La Vallée, with great care and attention to fine details. The wrought-iron lamps are exquisitely fashioned, and the coloured tiles, little dormer-windows of the quaint dwellings of toyland are rendered with artistry; likewise the castles, galleons, gardens and all the rest.

Above all, the grounds and the restrooms are squeaky clean; and the Disneyland staff friendly. With Mickey Mouse goes a high technology — no one, and I repeat no one, can beat the Americans at this game. Go there, friend, you’ll love it — with or without the kids.

— Peter Davies
(formerly Art Editor, World Health)

HIGH-SPEED STATION

A station for France’s high-speed trains, established at Euro Disneyland at Marne-la-Vallée, 30 kilometers (20 miles) east of Paris, make the park more accessible for countries on the high-speed rail network, like Belgium and Switzerland.

Euro Disney put up 250 million francs ($44 million) of the cost of the station; the French government, which had promised the station to lure Disney to France, paid the remaining 580 million francs.

— Associated Press, 18 May 1994
**LIFESTYLES**

**ANYTHING BUT "RETIRED"**

— Jerry Kilker, formerly HQ and LUN, recruited by the U.N. for three months as election "observer" for South Africa's first non-racial vote last April. It's his second tour of duty in that capacity. He served as an IPSO (International Polling Station Officer) in Kandal Province, during Cambodia's equally historic election in May 1993, following a four-month assignment in Phnom Penh as head of the information centre UNTAC (U.N. Transitional Authority in Cambodia).

Wife Inge, a U.N. staffer in New York, joined him in May to observe their 30th wedding anniversary in Geneva, a "homecoming," he says.

— Mahmood (“Mark" to his colleague chums) Suleiman, formerly EHE, last March reported two job offers: one for salary, the other for satisfaction. For salary: six weeks, with an option for four months, in Sana’a, Yemen; It's his fifth assignment to be financed by the World Bank. For satisfaction: a month in June in Budapest as a “voluntary expert” in sanitary engineering. Through arrangements made by the International Executive Services Corp., a company in Stamford, Conn., experts render public service without pay. Airfare and living expenses are covered.

Stopping over in Geneva to renew friendships, he observed that his yearly bill for health insurance premium is now $1 800, a quantum jump from the $720 paid when he left WHO in the mid-1980's. A rise in premiums, affecting all parties, accounts for some of the increase, but the lion's share comes from a new method of calculations. Beginning in 1989, all pensioners pay on an imaginary 30-years irrespective of actual length of service.

(©nt mission to Yemen was aborted; the colleague repatriated soon after arrival. — Editor)

— Jack Woodall, formerly HST, General Secretary, FICSA, and editor-in-chief U.N. Special, now happily back in the laboratory as a staff member of the New York State Department of Health in Albany. “I'm busy cutting up bats and other wildlife," he writes in March, “to find out if they died of viruses which may be dangerous to man. When the mosquito season starts, I'll be checking mosquitoes to see what they are carrying...”

**DAUGHTER DIRECTS**

— Ines Boden of Derbyshire, England, advises the appointment of Marie Louise, her eldest daughter, as Director of Nursing, University College London Hospitals. The proud mother is widow of Cyril, formerly supplies officer in Alexandria, Brazzaville, and Geneva.

(Note to Readers: A success in your family? A blessed event? A wedding? An interesting project? Send us newsworthy items, like the examples reported, and we'll pass them along. Shared joys are doubled joys. — Editor)

**CHANGES, changes, changes, MORE...**

The following are recent staff appointments:

**Regional Directors:** • Dr Sang Tae Han has been appointed by the Executive Board to a second five-year term as Regional Director, WPRO, and Dr Uton Muchtar Rafei, (Indonesia) a staff member since 1981, to a first term as Regional Director, SEARO (following the retirement of Dr U Ko Ko).

International Agency for Research on Cancer: • Dr Paul Hermann Kleihues, formerly Director, Institute of Neuropathology in Zurich, has been appointed Director, International Agency for Research on Cancer.

Mental Health: • Dr Jorge A. Costa e Silva, formerly Professor of Psychiatry, State University of Rio de Janeiro, has been appointed Director, Division of Mental Health.

Health Promotion and Education: • Dr Ilona S. Kickbusch, formerly Director, Department of Lifestyles and Health, EURO, has been appointed Director of the newly-established Division of Health Promotion and Education.

Research Policy: • Dr B.G. Mansourian has been appointed Director of the newly-established Office of Research Policy and Strategy Coordination.

Information Systems Management: • Mr K. Saita has been appointed Director of the newly-established Division of Information Systems Management.

Vaccines: • Dr J.W. Lee, formerly Director, Disease Prevention and Control, WPRO, has been appointed Director of the newly-established Global Programme for Vaccines, and Dr Ciro de Quadros, Senior Adviser on Immunization, AMRO, has been appointed Special Adviser to the D-G.

Cooperation with Countries: • Dr M. Jancloes has been appointed Director of the newly-established Division of Intensified Cooperation with Countries.

Essential Drugs: • Mrs Margaretha Helling-Borda, formerly responsible for Country Liaison, Action Programme on Essential Drugs, has been appointed as its Director.
Noncommunicable Diseases: • Dr David E. Barmes, Programme Manager for oral health, has been appointed Associate Director, Division of Non-communicable Diseases.

Communicable Diseases: • Dr Lindsay Martinez, formerly Associate Director, Division of Communicable Diseases, has been appointed Programme Manager of the newly-established Programme on Bacterial, Viral Diseases and Immunology.

Personnel: • Mr Roger Théoret, formerly Head, Classification Administration, has been appointed Chief, Personnel Planning and Recruitment, Division of Personnel.

Strengthening of Health Services: • Dr I. Tabibzadeh has been appointed Chief of District Health Systems, and Mr A. Creese, Chief of National Health Systems and Policies, both in the Division of Strengthening of Health Services.

Internal Audit: • Mr Mehmet Salih has been designated Acting Chief, Office of Internal Audit.

Health of the Elderly: • Dr E. Pupulin, Chief, Rehabilitation, has also assumed responsibility for Health of the Elderly.

Regions: • Dr Muhammad Zakir Husain, formerly Director, Planning, Coordination and Information, SEARO, has been appointed Director, Programme Management.

• Dr Omar Sulieeman, formerly WHO Representative in Iran, has been appointed Representative for Syria and Jordan.

I am always in time for my appointments, but nobody turned up. I was then told by her assistant that she had gone on leave. Although disappointed I suggested then that we discuss the matter. She replied that she had not been told about my appointment, and besides she was extremely busy. However, after having explained that I do not live round the corner, but in Africa, and that I had made specific efforts to come to Geneva and in all probability I would never come back again, she gave in. Some 15 minutes later the meeting was over. We got nowhere, and therefore I asked her to please make certain that I heard from her supervisor, who should have informed me that our meeting could not take place.

Back in Durban by mid-August I did, of course, allow for a period before expecting news. Now that it is mid-April 1994, it seems obvious that nothing has been done and that is the reason why I am asking for help.

I am determined to be given the information because it is my right to know what I am paying for.

— Tove Engman
(formerly Personnel, Brazzaville)
Durban, South Africa

NAME CHANGE

Re: U Thant Village (News, 16, Winter)

I received a call in December from the U.N. Information Centre in Paris about the Association méditerranéenne du personnel des Nations Unies. They informed me there were complaints from some quarters about the use of the words des Nations Unies.

Later the Office of Legal Affairs in New York informed me that the group had agreed to change their name to Association méditerranéenne du personnel
des organisations internationales (or something to that effect).

I have no further information about the group at this time.

Steven Roswick
(It would seem that the project is not off the ground. — Editor)

LIKES “NEWS”

During my recent visit to Geneva, I was given a copy of the quarterly News, and noted that it is a publication of the Association of Former WHO Staff. I retired in February 1993, with over 23 years service in AFRO.

I would like to be put on your mailing list, and to pay life membership.

J.W. Kwamina Duncan (Prof)
Lagos, Nigeria

This is to advise that I have moved, and that I particularly enjoy the quarterly News and would find it a real loss if I did not receive it.

Elizabeth Leedam
Dorset, England

IN MEMORIAM

I heard two years ago from the son of a former colleague that his father had passed away; the same person told me a year later that he had heard of the death of another colleague. Last week, a former colleague told me of the decease of still another colleague. I had not received notices of any of these deaths from the WHO Staff Association.

I should like to suggest that our Association publish occasionally — perhaps once every five years — the names of all who have passed away.

Prescott Stevens
La Rippe, Switzerland

(A list was published in the Winter of 1991-92, another in the Summer, 1992, still another in the Autumn, 1992. The latest is in this issue.—Editor)

“SHALL BE PAYABLE”


Sven Grabe, former chairman AFFI/AFICS, says: “In all pension systems (the U.S. and U.N. excepted), the pension is an inalienable right, which falls due at a particular age. The individual has the right to it irrespective of any employment he may have after that age.”

No doubt he is right about the United States, but is the U.N. really an exception?

Admittedly, under Article 21 of the Pension Fund Regulations a pensioner who is re-employed for more than six months again becomes a participant in the Fund and accordingly, under Article 40, temporarily loses the right to a pension.

On the other hand, Article 27(f), which I believe (subject to correction) is a much older provision, and should therefore have precedence, simply states:

“Retirement, early retirement and deferred retirement benefits shall be payable at periodic intervals for life.”

That is all — nothing about “subject to the provisions of Article 40” or any other limitation. This is, of course, by no means the only contradiction or anomaly in a set of Regulations marked by half a century of tinkering to cope with situations that were totally unforeseeable when it was drafted.

What I should really like to know, however, is whether all this is just notional or whether anyone has ever had to choose between a pension and re-employment with a U.N. agency. Can anyone enlighten me?

— John Fraser
(formerly, PUB)

The gist of the Grabe article appears to be that all former staff who are rehired should contribute to the fund, even if the contract is for a month. But that the rehired person should receive the pension earned, which is the individual’s “unalienable right”—which seems to be in agreement with the writer. What may solve the question is an appeal to administrative tribunals. — UNS
(Excerpted from U.N. Special, March ’94)

THOUGHT FOR TODAY

Stay young as you grow older — grow older without aging.

Roger da Silva
Asnières, France

THE D’SOUZA FAMILY

We wish to thank everyone at WHO for their kind thoughts and assistance in coming to terms with the loss of our mother, Julia (an UNHCR staff member, who was killed in a car accident in France on 4 April 1994). We know she will be fondly remembered.

We also appreciate that your thoughts are with our father, Joseph (FIN/CLX, who is now convalescing at home, after four weeks in hospital.)

— Jennifer & Jeffrey D’Souza
Geneva
IN TRIBUTE

Dr W. Charles Cockburn, formerly Director, Division of Communicable Diseases, passed away on 24 November 1993 in Scotland, at age 79.

Before joining WHO in 1961, he was Administrative Director, Central Public Health Laboratory, London, and Director, Epidemiological Research Laboratory, British Medical Research Council. As WHO's Chief Medical Officer, Virus Diseases, he ran important programmes, among them the influenza, the virus and the poliomyelitis programmes. Dr Cockburn was instrumental in persuading Prof. Albert Sabin to donate to WHO his virus seed strains for the production of oral polio vaccine; he was also a moving force in setting up the Expanded Programme on Immunization.

After his retirement in 1977, Dr Cockburn continued his association with WHO through the biologicals programme. He published a review of WHO's work since 1948 on quality and standardization of products, such as insulin, blood coagulation factors, vaccines and antibiotics.

Dr Cockburn was a highly respected epidemiologist whose advice on both a professional and personal level will be sorely missed.

Susan Block Tyrrell
TDR (Tropical Diseases Research)

I was saddened to learn about the death of Jimmy W. Wright, one of the mousquetaires of the first Division of Environmental Sanitation (along with Dr H.G. Bairy, Mr R.N. Clark and myself). I worked very closely with Jimmy from 1953 until 1966 when VBC became an independent unit. I was also a moving force in setting up the Expanded Programme on Immunization.

At the end of his autobiography To Cure and to Care (1989) he recounted his reflections on his life:

"I was happy in my old-fashioned faith and belief in God.... How fortunate I had been in being able to do all the things I had wanted to do.... How blessed I was with the wonderful life I had had...what wonderful friends I met and what fun my life had been."

I last visited him just three months before his death. He was still his optimistic, inspiring self, and his faith was firm. May he rest in peace.

— Seamus Gallagher
Petit-Saconnex, Geneva

We learned with deep sadness of the death of our former colleague and friend, Charles Lederrey on 9 May 1994. Old-timers will certainly remember the great dedication and skill with which Charles discharged his responsibilities within the WHO Staff Committee and other bodies, such as the Health Insurance Surveillance Committee, the Staff Pension Committee, the Board of Inquiry and Appeal. We shall remember him as a dear friend and we all share in the sorrow of his family.

— Gérard Dazin
Ferney-Voltaire, France

James Deeny died peacefully at his home in Ireland, his family by his side, on Easter Sunday, 3 April, in his 87th year. His wife, Gemma, had predeceased him by five months. He had lived in active retirement on his farm for most of the 20 years since his last work for WHO.

Deeny demonstrated from the outset of his professional career, as a general practitioner in Northern Ireland during the depressed 1930's, an originality and creativity, particularly in the investigation of malnutrition and infant and maternal mortality, which led to his appointment in 1944 as Chief Medical Adviser to the Ministry of Health, Ireland. Then, in 1958, having played the leading medical role in establishing Ireland's modern health service and after a few WHO consultant assignments, he left for two years to be WHO Representative and Public Health Adviser in Indonesia. In 1962 he resigned his Irish post and became for five years WHO's first Chief of Senior Staff Training in Geneva, doubling for two years as chairman of the Staff Association. Various consultancies followed, and his final assignment, on the invitation of the Director-General, was that of WHO's first ombudsman.

When Deeny began his international work it was still "glad confident morning" for WHO, and he epitomized that spirit. Organized medicine and public health would eliminate or control the mass diseases of humanity. "Great things were happening in the world and I wanted to have a share of the action," he later wrote. He brought into play his natural optimism and enthusiasm, his sense of adventure, his versatility and energy, and his compassion for the poor and deprived, particularly for mothers and children.

In retirement he continued to exercise his versatility and social conscience, his belief in the potential of small communities to develop themselves, and at the age of 82 years was awarded the honour of National Pensioner of the Year for his community development work.

Let me congratulate and thank you and your colleagues for the work which you are doing on behalf of us.

— Joseph Lanoix
Sarasota, Florida

Before joining WHO in 1961, he was Administrative Director, Central Public Health Laboratory, London, and Director, Epidemiological Research Laboratory, British Medical Research Council. As WHO's Chief Medical Officer, Virus Diseases, he ran important programmes, among them the influenza, the virus and the poliomyelitis programmes. Dr Cockburn was instrumental in persuading Prof. Albert Sabin to donate to WHO his virus seed strains for the production of oral polio vaccine; he was also a moving force in setting up the Expanded Programme on Immunization.

After his retirement in 1977, Dr Cockburn continued his association with WHO through the biologicals programme. He published a review of WHO's work since 1948 on quality and standardization of products, such as insulin, blood coagulation factors, vaccines and antibiotics.

Dr Cockburn was a highly respected epidemiologist whose advice on both a professional and personal level will be sorely missed.

Susan Block Tyrrell
TDR (Tropical Diseases Research)

I was saddened to learn about the death of Jimmy W. Wright, one of the mousquetaires of the first Division of Environmental Sanitation (along with Dr H.G. Bairy, Mr R.N. Clark and myself). I worked very closely with Jimmy from 1953 until 1966 when VBC became an independent unit. I was also a moving force in setting up the Expanded Programme on Immunization.

At the end of his autobiography To Cure and to Care (1989) he recounted his reflections on his life:

"I was happy in my old-fashioned faith and belief in God.... How fortunate I had been in being able to do all the things I had wanted to do.... How blessed I was with the wonderful life I had had...what wonderful friends I met and what fun my life had been."

I last visited him just three months before his death. He was still his optimistic, inspiring self, and his faith was firm. May he rest in peace.

— Seamus Gallagher
Petit-Saconnex, Geneva

We learned with deep sadness of the death of our former colleague and friend, Charles Lederrey on 9 May 1994. Old-timers will certainly remember the great dedication and skill with which Charles discharged his responsibilities within the WHO Staff Committee and other bodies, such as the Health Insurance Surveillance Committee, the Staff Pension Committee, the Board of Inquiry and Appeal. We shall remember him as a dear friend and we all share in the sorrow of his family.

— Gérard Dazin
Ferney-Voltaire, France
IN THE PRESS

ESTROGEN MAY PROTECT AGAINST ALZHEIMER

Estrogen replacement therapy may offer protection against Alzheimer's disease, scientists reported at a meeting in Washington of the Society for Neuroscience.

"Your grandma and I have decided to live together."

"We found that women who had used estrogen replacement therapy were 40 per cent less likely to have Alzheimer's disease and related dementias compared to women who had not used estrogen," said Dr Victor Henderson of the University of Southern California.

Dr Henderson and colleagues studied medical records from 8,879 women living in retirement communities. Of these, 2,478 died between 1981 and 1992. The researchers found that 127 women had a diagnosis of Alzheimer's disease or related dementia on their death certificates. When they were compared with a control group, the risk of developing Alzheimer's was reduced in those who used estrogen and was reduced still further by increasing doses and longer duration of estrogen use.

Of those who had not received estrogen therapy, 18 per cent developed Alzheimer's, compared to 7 per cent of those who were given the hormone.

Women with a history of estrogen therapy who developed Alzheimer's also performed better on cognitive tests than women who developed the disease and did not take the hormone. Dr Henderson warned that it is too early to recommend estrogen replacement therapy for the purpose of preventing dementia.

— Roger Johnson

(Excerpted from Medical Tribune, Dec 9 '93)

NEW OUTFIT AT WHO

Participants from 100 countries meeting in Stockholm have decided to create an inter-governmental forum on chemical safety, with offices in Geneva at WHO headquarters. The secretariat of the Forum will comprise 15 posts with a working budget of about CHF 1.15 million yearly. — ATS

(Excerpted from the Tribune de Genève, 30 April-1 May '94)

REMEMBERING JAMES DEENY

James Andrew Donnelly Deeny was educated by the Jesuits at Congowes and qualified as a doctor at Queen's University, Belfast, at the very early age of 21. He rapidly took a BSc, a Diploma in Public Health, an MD, his membership of the Royal College of Physicians in Ireland, and an MSc.

He became a general practitioner, joining his father in the family practice in Lurgan. It was the largest practice in the county, but despite the demands involved he engaged in extensive research, showing the enormous energy which always distinguished him.

He discovered a cure for the rare disease of congenital ideopathic methaemoglobinaemia. Its victims were colloquially known as the "blue men."

He took formal retirement from WHO in 1967 but age did not diminish his drive and enthusiasm, and his retirement would have exhausted many a younger man.

In 1968 he wrote the fourth report on the World Health Situation. He later became the first ombudsman for WHO, serving until 1975. In 1973 he published The Irish Worker, which was the first democratic study of the Irish labour force. In 1972 he became scientific adviser to Pope Paul VI.

He lived in his later years in a Georgian house by the sea at Tagot in Rosslare where he farmed 160 acres in his usual vigorous fashion. He created the Tagot Community Council. This developed an integrated care programme for the old people of the area. At the age of 82, he was selected as the Irish Life National Pensioner of the Year. He had already received the honorary degree of Doctor of Science from Queen's University, Belfast, in 1983.

He was a member of the Royal Irish Academy, collected oriental ivories and kept a yacht on the Irish Sea. He loved people and the elderly inhabitants of Lurgan, who had been his patients, still tell anecdotes of his energy and wit. He is survived by two sons and two daughters.

(Excerpted from The Times, London 22 April '94)

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