This issue is largely devoted to the report of the General Assembly of 20 October.

A view of the AFSM Fourth General Assembly

All the Photos of the GA are from Jean-Paul Menu

The QNT team and the Executive Committee wish you a very happy year 2006

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</table>
OPENING OF THE MEETING

At 13h30, Roger Fontana, President of AFSM, declared the meeting (85 participants) open. He welcomed the large number of retirees attending and referred to all those who, for reasons of distance or health, were unable to be present.

He welcomed Mr. J.-J. Chevron, President of AAFI-AAFICS, and introduced Drs. A. Vessereau and R. Pal, Honorary Presidents of AFSM; unfortunately, the third honorary President, Dr. S. Flache was unable to attend. Finally, he welcomed Mr. Jacques Deville, Chief of DUPLI (Impression), representing the Staff Association as well as Dr. Fernando S. Antezana who had chaired the previous Assembly.

The President informed the Assembly that as from now all paid up members of AFSM in the Geneva region would receive a copy of UN Special.

ELECTION OF THE CHAIR OF THE ASSEMBLY

On the proposal of Marguerite Melloni, Suzanne Cherney was elected Chair of the Fourth General Assembly. On assuming the Chair, Mrs. Cherney said how happy she was to see so many familiar faces in the room.

Mrs R. Bell, Mr Michel Chambost, Mrs Paule Leccia, Dr Mangas-Maglacas and Mr Gérard Perrin were elected polling officers.

REPORT OF THE AFSM PRESIDENT

Roger Fontana presented his report which is attached as Annex 1.

In response to an intervention from Peter Ozoario regarding the Quarterly Newsletter, the Chair proposed that the subject of the QNT be taken up under item 12, “Any additional items”. It was so agreed.

BUDGET AND FINANCE REPORT; ELECTION OF ACCOUNT AUDITORS

Averil Foster, Treasurer, presented the financial situation as shown in Annex 2.

The main points to be noted were the drop in the level of contributions from members, the increase in the interest provided by the MEC, the drop in the income from the money market as a result of the transfer of part of the funds into an account with UBS, and an important decrease in the production costs of the newsletter.

Rosemary Bell, expressing her appreciation for the good management of the finances of the Association, suggested that in view of the healthy state of the balance sheet, donations be made by the Association to help the victims of the recent disasters in Asia and South America. This proposal was unanimously agreed.

Noting the comparatively large sum disbursed for the annual reception, Dr Antezana proposed that ways be found to ensure that such events were self-financing. It was agreed that this matter would be reviewed by the Executive Committee.

VISIT FROM DR LEE JONG-WOOK, DIRECTOR GENERAL

On behalf of the participants, the President welcomed the Director-General, Dr Lee Jongwook, and thanked him for his interest in the Association.
Addressing the Assembly, Dr Lee noted that among the familiar faces were a number of newly-retired staff and commented that had destiny not decided otherwise he himself would have been one of them. He considered that retirees were still an integral part of the Institution linked by their friendship with serving staff and their interest in the work of the Organization. Their dynamic interaction with serving staff could make an important contribution to ensuring the good health of the Organization. Together they could help WHO to be stronger and more effective in its support of Member States.

WHO had not been created overnight and he paid tribute to those who had built the Institution, such as Dr Halfdan Mahler, whose portrait, and those of other Directors-General, had, at his instigation been brought out of the library to more prominent positions in the conference rooms.

Dr Lee underlined the importance of history, tradition and continuity in the life of the Organization and said future staff should be aware of and able to draw inspiration from the past. Unfortunately, institutional memory was quickly lost, whereas in planning for the future it was vital to learn from the lessons and experiences of the past. He welcomed any contribution that the retirees could make to building a healthier future.

There had been some criticism of retired staff continuing to work for the Organization but he believed that the Organization could, and should, benefit from their experience and that such employment should be selective but not prevented.

The Assembly co-opted Dr Lee as an honorary member of the Association.

Dr Antezana believed that the experience and capability available among the retirees could indeed enable them to make an input to WHO on technical and managerial issues. He proposed that a group of 3 to 4 interested persons be formed to prepare proposals.

Mr. Ozorio recalled that on the basis of responses to a questionnaire sent out by the Association, Dr Masironi had drawn up a roster of those willing to contribute to any such undertaking. Perhaps this initiative could be revitalized.

Dr Kreysler, who had participated in the seminar on the history of primary health care, supported the proposal of Dr Antezana. He noted that management changes led to policy changes and new initiatives, and institutional memory disappeared.

The Chair said that in response to the Director-General’s invitation to the retirees to play a more concrete role in support of WHO, a group would be set up to review options and prepare proposals.

**WHO MEMORY**

Carole Modis presented the “memory activities” being undertaken by AFSM and, in the absence of Mr. Thomson Prentice, Managing Editor of the World Health Report, (Department of Knowledge Management and Sharing), who was unable to be present, briefly described the WHO Global Health Histories Initiatives (Annex 3).

Mr. R. Harrison drew attention to the work on UN history being undertaken by the British Association of Former United Nations Civil Servants (BAFUNCS) and the Bodleian Library, Oxford, UK.

Participants voiced their support for the activities being undertaken by AFSM which would
indeed complement the work of the group to be set up to review possible AFSM input to the future work of the Organization. They wished the effort every success.

HEALTH INSURANCE

Claude Hennetier (Coordinator, Staff Finance Services) presented an organigram of the service and a series of graphs and tables showing the financial situation and the breakdown of receipts and disbursements between employed staff and retirees, according to the WHO regions. The Health Insurance had no reinsurance and operated solely on its own funds. The number of retirees as compared to those in service had considerably increased in recent years and the costs entailed were fairly heavy. The contributions of the retirees only covered 72% of the costs they incurred (in fact 40% in the Region of the Americas). The Fund had to build up significant reserves in order to provide cover for all retirees during their lifespan. For 2004, the global figure showed an excess of US $1.5 million, but an increase in contributions sometime in the next few years appeared inevitable.

The good news was that at a joint meeting in October 2004 it had been decided to apply a level of reimbursement of 80% for long term health care and discard the degressive level applied up until now. Temporary staff were also receiving better coverage. An explanatory brochure would be sent to participants together with their new health insurance cards. SHI tried to be accessible and welcoming. Apart from mail and telephone access, it was planned to set up a link to the SHI Web pages on the AFSM website. Finally, Claude Hennetier recalled that the period 14H – 16H was reserved for visits and enquiries from the insured.

Dr Kossovsky, speaking as the Association’s representative on the Health Insurance Surveillance Committee, noted the excellent collaboration between SHI and AFSM. The Association had fought strongly for the suppression of degressivity in the reimbursement of long term health care.

The SHI had participated in the organization of vaccination against flu (see article on page 18). In reply to a question from Dr Antezana, Mrs Hennetier explained that the different forms of traditional medicine were only reimbursed in countries where these practices were officially recognized (e.g. ayurveda in India).

INTERNATIONAL CIVIL SERVANTS’ MUTUAL ASSOCIATION (MEC)

Marie-Pierre Fleury, Executive Secretary of AMFI described the background and purpose of the MEC which had been founded in 1959 as a non-profit making association intended to sponsor mutual support among the employees of the UN system, as well as assisting them in their installation. Since 1980, the MEC was officially known as The Mutual Association of International Civil Servants of the United Nations and its specialised Agencies in Geneva (AMFI). Its main functions were:

1) deposits (deposit and current accounts);
2) loans (for housing and purchases);
3) mobility – public transport (to obtain favourable conditions for season tickets with UNRESO and CFF).

Retirees could join the Association on production of proof of identity and payment of CHF10. The secretariat was located in the Library building of the Palais des Nations, Office Building.
B.214D; e-mail address: mec.amfi@unog.ch

PENSIONS

Marc Briant, Chief, Finance and Informatics, Office of the UN Joint Staff Pension Fund representing Gilbert Ferrari, Head of the UNJSPF Office in the Palais des Nations in Geneva, said that the number of participants in the fund, active staff and retirees, was growing. The Fund now covered 21 organizations, including the Interparliamentary Union (UIP) which had joined in January 2005. In 2004, the Fund had disbursed US$ 1,110 billion to 53,879 beneficiaries in 17 currencies (about 74% on the dollar track and 26% on local track). The financial situation was healthy (US$ 29.1 billion on 31.12.04) with an actuarial excess of 1.14% and investment returns which had remained above the target level for 45 years. This situation had enabled the 1.5% downward adjustment of pensions, introduced in the 1980s, to be reduced to 1%.

However, since 1995, the amount of contributions was slightly less than the pensions paid, despite the increase in participants. Good management of the assets was therefore vital. More information was available in the Annual Report for 2005 accessible on the website at www.unjspf.org. The many requests for a change of track as a result of the drop in the dollar exchange rate had led to a backlog since staff resources were inadequate to cope with the additional workload. However, the changeover was made retroactive so that retirees were not penalized by the delay.

Mr. Briant noted that the requests for additional resources rarely received the support of the retirees’ representatives; Mrs. Melloni explained that these were present in the capacity of observer with no right of vote, which seemed inappropriate.

Mr Fraser said that the long delayed and only partial reimbursement of the withheld portion of cost-of-living adjustments to certain pensioners (after 30 years) could by no stretch of the imagination be described as a “present” and would be of little comfort to the many pensioners who had died in the meantime.

SOCIAL AND CULTURAL ACTIVITIES.

Mr. Fontana mentioned the participation of the Association in World Health Day and the International Day of Older Persons.

Dr Cohen recalled that a ten-day cultural trip to Morocco planned for end April 2006 had been announced in issue No. 61 of the Quarterly News, and those who would possibly be interested were requested to complete and return the form provided as soon as possible.

Dr Kossovsky regretted that certain activities which required considerable organization (such as the trip to Lubéron) did not meet sufficient response. Dr Maglacas suggested that in order to plan such activities a survey might be made regarding retirees’ interest and preferred destinations. It was agreed that this would be considered.

Rosemary Bell clarified that although the Self-Help Group no longer functioned as such, the gatherings at the Buffet de la Gare, Cornavin, at 11h00 on the first Friday of the month were continuing. Those who wished could remain for lunch. Roger Fontana regretted that after 8 years Marianne King, Margaret Baker and Rosemary Bell had decided to terminate the official activities of the Group. He thanked and
congratulated them on their action which had been highly appreciated (Applause).

Mrs. Bell noted that the functions of the WHO Social Assistant at Headquarters, who was about to retire, did not extend to retirees and suggested that advantage could be taken of current Director-General’s positive interest to request that the future incumbent’s mandate be extended for this purpose.

**AMENDMENTS TO THE AFSM STATUTES**

Speaking at the invitation of the Chair, Dr Beigbeder presented the five proposals in the document before the assembly (Annex 4).

In reply to a question by Dr Antezana concerning the appropriateness of any reference to the possibility of “dissolution” of AFSM, which might be considered defeatist or unduly pessimistic, it was pointed out that according to the law of most countries, the statutes of any association were required to contain such a provision.

**ADDITIONAL ITEMS**

**Quarterly News**

Speaking at the invitation of the Chair, who apologized for the long wait he had had to support, Mr Ozorio commended the editorial group on its work on QNT 61, much better in his view than No 59, which had contained too many errors. He took exception to the express requirement that contributions or letters should contain only “constructive criticism” - constructiveness might be considered to be “in the eye of the beholder”. The editors should be able to cope with criticism¹, which was one of the elements needed to ensure a lively publication... more space might be given to correspondence in QNT².

The Chairman said that Mr Ozorio’s points had been noted. The meeting rose at 17h30.

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1. **ED**: We welcome, of course, any criticism, constructive or not; when speaking of “constructive” we mean criticism that helps us improve the newsletter.

2. As for the space devoted to readers, it depends on the readers themselves.
Annex 1 - Report of the President

Introduction

Following the General Assembly held in October 2003, the incumbent Executive Committee continued to function with the same composition and with Dr Cohen as President.

The election of a new Executive Committee was organized in 2004. President Cohen convened those who had been elected.

Since President Cohen had served two consecutive terms, he was no longer eligible for the position. The Executive Committee 2004-2006 elected a new Bureau composed of five members.

<table>
<thead>
<tr>
<th>President:</th>
<th>Vice-presidents:</th>
<th>Treasurer:</th>
<th>Assistant Treasurer:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Roger Fontana</td>
<td>Roberto Masironi</td>
<td>Averil Foster</td>
<td>Richard Saynor (co-opted)</td>
</tr>
<tr>
<td></td>
<td>Jean-Paul Menu</td>
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<td></td>
</tr>
</tbody>
</table>

Representatives to the Health Insurance Surveillance Committee:

Samy Kossovsky, David Cohen

Representatives to the Pensions Committee:

Dev Ray, Marguerite Melloni

Editorial Committee of the QNT:

Managing Editor: David Cohen

Anglophone QNT team:
- Carole Modis
- Dev Ray
- Rosemary Villars

Francophone QNT team:
- Yves Beigbeder
- Samy Kossovsky
- Jean-Paul Menu

Organisation

The Bureau meets once a month to finalize the minutes, consider the programme of activities and prepare agendas for meetings.

The Executive Committee meets once a month to discuss, adopt and make suggestions. Alain Vessereau, Stanislas Flache and Rajindar Pal, “Honorary Presidents”, attend the meetings with all rights, except the right to vote.

AFSM is always committed and welcoming. In order to carry out its numerous obligations, the AFSM Secretariat is open during 80% of the working hours of WHO Headquarters. We are consulted about many different subjects, but especially on matters related to health insurance and pensions. When help is requested on the occasion of the death of one of our colleagues, we provide the support of the Association.

Information Dissemination

Quarterly News (4000 copies of each issue are printed)

Letters and Circulars

Directory - List of Former WHO Staff

In 2005 we continued to improve our data base of the members of the Association. This task was carried out by a group led by Jean-Paul Menu and Carole Modis with the technical assistance of Louis Allegrini (a former Staff member).

This work permitted us to publish the 2005 Directory - List of Former WHO Staff (Members or non-members).

I hope that you have all received it and found it useful.
We also updated the coordination between our database and the Distribution and Mailing Services to improve the accuracy of mailings to our members. I would like to thank Pascal Frachet for his support and his understanding.

Finally the database gave us the opportunity to compile statistics on the distribution of our membership in the world. (Please see the attached table)

Relations with the Staff Association
As the Staff Association has many commitments, our collaboration takes place principally at WHO headquarters. We would like to thank our two colleagues who are so efficient and open to our activities.

Relations with the Regions
Contacts have been established with the regional staff associations who receive the Directory of Members and the QNT. In order to promote more awareness of the existence of AFSM, we made contact with the offices of one hundred and forty-five WHO Representatives who now receive all AFSM regular mailings.

AAFI / AFICS
We have cordial relations and regular contact with this Association. The AFSM President continues to take part in all of the AFICS/AAFI meetings.

Pre-retirement Seminars
AFSM has arranged for the first day of the seminars to take place at WHO. We participate actively in the seminar by presenting AFSM and putting our documentation at the disposal of the participants.

Other Activities
We paid careful attention to the preparation of the annual Reception which took place in December 2004. Around 240 members attended, enjoying the buffet and drinks. Dr Lee, Director-General, took the time to come and greet the assembled guests.

AFSM participated actively in the organization and proceedings of the following activities:

- **The Tenth Solidarity Fair**: 8 December 2004
- **World Health Day**: 7 April 2005
- **International Day of Older Persons**: 1 October 2004 and 3 October 2005

**Travels:** this year it was not possible to organise a trip, but next year a trip to Morocco is planned for April 2006; other activities will be planned.

Conclusion
In conclusion, I would like to thank, in the name of our Association, Director-General, Dr Lee Jong wook for his support
The WHO Administration for all the services that it puts at our disposal.
The Security Services for its assistance and openness to retired staff
The Printing, Distribution, and Mailing Services for their expertise and valuable collaboration.
# Annex 2 - Financial report

## INCOME AND EXPENDITURE FOR THE BIENNium ENDED 31 DECEMBER 2004

(expressed in Swiss francs)

<table>
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<td>17 117</td>
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<td>2 500</td>
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<td>37 499</td>
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<td>MEC</td>
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<td>Gain Money</td>
<td></td>
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<td>Dues Pro-Gina</td>
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<td>Market</td>
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<td>1 664</td>
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<td>Annual reception, of which: WHO grant, members' donations</td>
<td></td>
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<td>Annual Reception</td>
<td>8 120</td>
<td>8 384</td>
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<tr>
<td></td>
<td>1 833</td>
<td>1 552</td>
<td>General Assembly</td>
<td>555</td>
<td>225</td>
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<td></td>
<td>2 821</td>
<td>3 339</td>
<td>Elections</td>
<td>280</td>
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<td></td>
<td>Flowers</td>
<td>200</td>
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<td>Contributions to Excursions</td>
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<td>3 763</td>
<td>2 778</td>
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<td>Special gift</td>
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<td>60</td>
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<td>TOTAL INCOME</td>
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<td>TOTAL EXPENSES</td>
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<td>27 097</td>
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<td>Excess income over expenditure</td>
<td>14 975</td>
<td>22 564</td>
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<tr>
<td>TOTAL</td>
<td>32 421</td>
<td>49 661</td>
<td></td>
<td>32 421</td>
<td>49 661</td>
</tr>
</tbody>
</table>
The WHO Global Health Histories Initiative began in early 2005 within the Department of Knowledge Management and Sharing at WHO Headquarters in Geneva. It is gratifying that WHO serving staff are examining WHO history and creating links with WHO former staff for information and inspiration to help chart the history of global health. Of particular note is the following statement from the Global Health Histories Initiative:

*Understanding the history of health in the last 60 years helps us respond to the health challenges of today. Learning from history is vital in helping shape a healthier future for everyone, especially those most in need. Sharing health knowledge that is inspired by history enriches global public health and benefits society at large.*

Here are some of the valuable contributions which the GHH Initiative is developing.

**The Role of WHO in the History of Global Health:** Written by internationally reputed health historians with input from WHO offices, this book will cover the role of WHO in major health events and issues, since its founding in 1948. It will be set within the context of political and economic developments such as the end of European colonialism in the 1960s, the end of the Cold War in the 1990s, and the shift of the field from tropical medicine, to international health and now global health.

**An Official History of WHO in the 1970s:** The GHH Initiative has commissioned retired WHO senior scientist Socrates Litsios, to write this history, as the sequel to the existing volumes covering the first two decades of the Organization.

**A WHO Bulletin - Global Health Histories Special Issue:** Drawing from the above-mentioned publications, symposium and oral histories, a series of articles on the history of WHO and global health, with eminent guest contributors is proposed.

**An International Global Health Histories Exhibition:** The History of Medicine Division of the National Library of Medicine is planning a Global Health Histories exhibition to coincide with World Health Day 2008 providing a great opportunity for collaboration with WHO.

**A series of global health history seminars:** Eminent historians from many regions of the world give talks on issues with relevance to health issues today.

**A Series of WHO Oral Histories:** The WHO Association of Former Staff Members is conducting a series of interviews with important figures in WHO's history. These are being recorded and transcribed and will be archived for posterity and made available to historians, researchers and others.

( AFSM members who would like to be on an email mailing list to receive information about talks and conferences on the history of WHO and public health, please send an email to cmodis@gmail.com.)

For further information contact Mr Thomson Prentice - Managing Editor, World Health Report, prenticet@who.int and see the web site at: http://www.who.int/kms/initiatives/ghhistories
Annex 4 - Amendments to the statutes

After some discussion in which it was pointed out that the proposed membership of active staff raised questions of election to office and voting rights, it was agreed to reconsider the proposal concerning article 3.

As the General Assembly of 16 October 2003 has added a new Article 6, articles 6 to 9 are renumbered 7 to 10

Article 7 (former article 6)
Add to the 1st line of the present text «a bureau consisting of» as below
The Executive Committee shall elect from among its members a bureau consisting of a Chairperson...
Reason:
To name the group of those serving as officers of the AFSM as "bureau".

Article 9 (former article 8)
No change of a) before changing Article 3. Keep the text of b), but delete "b)"

Article 10 (former Article 9)
Any amendment to the Statutes must be approved by a two-thirds majority of paying members of the AFSM, either present or represented at the General Assembly.

Reason
To confirm the practice that amendments to the Statutes are approved during General Assemblies by paying members, and allow paying members to be represented.

New Article 11 "Dissolution" (approved by the General Assembly of 16 October 2003)
2nd line: add in "with all members": with all paid-up members

Reason
Only members up to date with their dues are allowed to take part in the vote on the possible dissolution of the AFSM.
The amendments were adopted.

Annexe 5- Regional distribution of WHO former staff
(listed in Directory 2005 and receiving QNT)

<table>
<thead>
<tr>
<th>Region</th>
<th>Life members</th>
<th>Annual members</th>
<th>Others</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>AFR</td>
<td>11</td>
<td>6</td>
<td>84</td>
<td>101</td>
</tr>
<tr>
<td>AMR</td>
<td>39</td>
<td>35</td>
<td>20</td>
<td>94</td>
</tr>
<tr>
<td>EMR</td>
<td>12</td>
<td>6</td>
<td>66</td>
<td>84</td>
</tr>
<tr>
<td>EUR (Geneva excluded)</td>
<td>201</td>
<td>117</td>
<td>164</td>
<td>482</td>
</tr>
<tr>
<td>Geneva area</td>
<td>295</td>
<td>218</td>
<td>81</td>
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<tr>
<td>SEAR</td>
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<td>WPR</td>
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</tr>
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<td>TOTAL</td>
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<td>418</td>
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<td>1634</td>
</tr>
<tr>
<td>Total members</td>
<td>1015</td>
<td></td>
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</tr>
</tbody>
</table>
How to recognize a stroke

A stroke is a sudden disruption of the blood flow to the brain due, in principle, to a blood clot which blocks a brain blood vessel (ischaemic stroke which accounts for about 80% of cases) or to a haemorrhage resulting from a sudden rupture of a brain artery (haemorrhagic stroke or brain haemorrhage). Strokes (or cerebrovascular accidents) are the third cause of death in developed countries after cardiovascular diseases and cancer, and are one of the leading causes of disability. According to WHO, about 20 million people worldwide are victims of stroke each year and of these about 5 million die.

Causes and risk factors

The main cause of stroke is atherosclerosis for which the principal risk factors are high blood cholesterol levels, high blood pressure, and tobacco. Obesity, diabetes, high blood levels of triglycerides, lack of physical activity and stress also play an important role. Risk increases with age.

Symptoms

Symptoms vary from slight dizziness to coma with varying sequelae which can range from slight physical or mental slowness to complete paralysis of one side (left or right with or without loss of speech according to the hemisphere affected) or both; several functions being controlled by opposite zones of the brain – an accident in the right side of the brain will affect the left side of the body and vice-versa.

Treatment

Medication or surgery may be required; however prevention is paramount - as for any cardiovascular disease – do not smoke, treat hypertension, diabetes, etc. eat a healthy and balanced diet and undertake regular physical exercise.

How to recognize a stroke

A message describing how to recognize a stroke is circulating on the internet (“The smile test”) taken from a scientific poster presented to the 2003 International Conference of the American Stroke Association* on cerebrovascular attacks, under the heading “Untrained adults can identify symptoms of a stroke using the Cincinnati pre-hospitalization stroke scale” which suggests that asking 3 questions would enable bystanders to identify an attack:

1) ask the individual to smile;
2) ask him/her to raise both arms;
3) ask him/her to speak a simple phrase coherently

The American Stroke Association which had financed the study did not, however, endorse “the smile test”, despite positive results, because the study was very small. Therefore, one should rely on the classic warning signs:

- Sudden numbness or weakness of the face, arm or leg, in particular on one side of the body only
- Sudden confusion, difficulty in speaking or understanding
- Sudden blurred vision in one or both eyes
- Sudden difficulty in walking, dizziness, loss of balance or coordination
- Sudden severe headache with no obvious cause.

Call the emergency services immediately! As the American Stroke association says: “Time lost is brain lost”

Dr. D. Cohen

* The American Stroke Association: www.strokeassociation.org/
Our health

Avian influenza - a pandemic, but when?

H5N1 is the strain of the type A flu virus which is infecting large quantities of birds. Strictly speaking, it is not transmissible to man. However, as of 5 August 2005, 112 persons in South-East Asia had been infected, of whom 57 had died. These were individuals in close and frequent contact with poultry. No case of transmission of H5N1 between human beings has yet been identified.

As for all flu viruses of type A, H5N1 has the capacity to mutate. It could also swap genetic material with closely related viruses, including those infecting mammals and therefore man. As any possible new virus would be completely undetected by the human immune system, it would be capable of rapid and global dissemination. But such a pandemic does not yet exist and its potential level of virulence remains unknown.

Because it is unknown, it is problematical to develop a specific preventive vaccine: 6 to 8 months must be allowed between the isolation of a flu virus and the commercial production of a specific vaccine. A candidate vaccine, capable of overcoming this difficulty is, however, being developed under the auspices of WHO (the French government has already reserved 20 million doses). It will be necessary, of course, to check at the outset of the pandemic whether this vaccine is effective against the strain concerned.

Anti-viral medicaments – several governments are holding stocks as a precaution – are potent; but as with antibiotics used against bacteria, they may come up against viruses which have developed resistance to their action.

Precautionary measures are Draconian: the elimination of potential reservoirs of the virus: the destruction of millions of poultry; extremely rigorous hygiene for the personnel working in the poultry-farming sector, etc. As the virus affects nearly all species of birds, migratory birds represent the least controllable vector.

Ordinary vaccine against seasonal flu, which results in hundreds of victims each year, currently subtypes H3N2 and H1N1, does not, of course, protect against the strain H5N1.

The surveillance system established under the aegis of WHO throughout the world, calls for all countries to prepare themselves as much as possible for the alarming possibility of a flu pandemic which is feared to be inevitable, but for which neither the severity nor the timing is known.

The UN system has set up a coordinating mechanism to ensure the best possible protection for the UN personnel and their dependents. Excellent initiative: but what about the former staff members like us? 1

The pandemic has not yet occurred. Hundreds of thousands of poultry were destroyed in Romania when avian flu infested the Danube delta. The infection is spreading, geographically, to more and more bird populations. China has decided to vaccinate millions of chickens. The cases of transmission to man remain extremely rare with, however, a mortality rate of about 50%. At the Institut Pasteur in Hanoi there has been evidence of genetic mutation of the strain H5N1 in birds and humans. These mutations increase the risk of the emergence of a virus capable of transmission to mammals and humans, or even from person to person.

Dr Samy Kossovsky

Sources : WHO releases ; Institut Pasteur, Paris

NB : This article was written in early November and the situation may evolve rapidly.

1. A letter has since been sent by the Committee of AAFI/AFICS to all the heads of UN agencies requesting that they make provision for retired staff, including those in isolated situations, in any emergency measures.
On the lighter side

A Polish man goes to the ophthalmologist, who shows him a card with the letters:
C Z W X N Q S T A C Z
"Can you read this?" he asks.
"Read it!?" the Pole replies: "I know the guy!"

A few citations

Only Irish coffee provides in a single glass all four essential food groups: alcohol, caffeine, sugar and fat. Alex Levine
Money can't buy you happiness but it does bring you a more pleasant form of misery. Spike Milligan
The secret of a good sermon is to have a good beginning and a good ending; and to have the two as close together as possible. George Burns
Santa Claus has the right idea ... Visit people only once a year. Victor Borge

Wiki, the latest flea in the ear of the Web
If you are a frequent web surfer, you already know how the online encyclopaedia, Wikipedia works. For the rest of you, this is the most frequently consulted free access encyclopaedia/dictionary on the Web; its content is written by the people who use it. Basically, anyone can put his or her “two cents worth” into any of the articles. This can cut both ways as the contributions range from scholarly sublime to ridiculous babble.
For some time there has been a rash of voluntary contributions on many subjects on the Internet. Regrouped under the generic term “wiki” which comes from the Hawaiian language and means “rapid or informal”, the articles on this site are fascinating to many users. Anyone can open a Wiki on any and all subjects. Why not a Wiki on fly fishing? Or on the Association of Former WHO staff?
To find out more, go to: http://en.wikipedia.org/wiki

International Herald Tribune, 27 October 2005
The Readers’ Corner

About Kenneth Sinclair-Loutit...
Dear Sir, 11 November 2005
I have read in QNT 61 under "History matters" the excellent précis on Kenneth Sinclair Loutit. For the last 1 - 5 years of his life we were in constant touch thru letters. We first met in the late sixties when he accompanied the Deputy of UNICEF, Mrs. Sinclair, on a visit to Ibadan and I booked them in a double room - for which they graciously forgave me, saying "it was not the first time this had happened"!
We next met on a Course for Senior WHO Representatives in Geneva run by the charming James Deeny. One of the Sessions was conducted by a bright young Professor from the MIT and James, wishing to make it informal, held it in his apartment in the evening. After serving us all with drinks, James gave the floor to the Professor who spoke about the importance of interpersonal relations and then said to a French Médecin-Général (a friend of mine) " I am sure, Sir, looking back you will recognise a situation where later you realised that if you had taken a different action to the one you did, you would have had a better result. Can you tell us about this? The General sat up and said firmly "I will not participate in this nonsense". There was a shocked silence and then K-SL jumped in and told a very pertinent story which got him into some trouble. The action was typical of the man…
He spent his last years living with a Moroccan family in Rabat Mechouar having abandoned his house because it was constantly being visited by Tourists.
I knew he had difficulties with his breathing. We had a regular on-going correspondence - and then there was silence. Later, I saw the Obituary in the Times…
I feel I owe it to my friend to add this to the excellent tale in the Quarterly News.
Yours sincerely.
D.A.W. Nugent, 27 Golf Side, Cheam, Surrey, SM2 7HA

ED: Thank you Dr Nugent, for adding additional light on K-SL’s personality through this very interesting story. 
Note by Yves Beigbeder: I helped Dr Deeny (as administrator) during these Courses for WHO Representatives and I fully enjoyed this story. You will find a Chapter on « WHO Training » and these Courses in Dr Deeny’s memoirs: « To Cure and to Care, Memoirs of a Chief Medical Officer » (The Glendale Press Ltd., Dublin, 1989)

Improving WHO impact on developing countries...
Dear Editor, July 26. 2005
This is 81 year old WHO member who took retirement in Dec.1983 after 21 yrs of service with the Organisation on mostly country-based assignments – Thailand, Nepal, Afghanistan and Sudan -- except the last two years with SEARO as Director, Development of Comprehensive Health Services. I am writing this letter to solicit your help in interesting my retired colleagues to consider joining me in strengthening public health practices in India with over a billion population… WHO could do a great deal more through creative use of available resources at country level. In this context enclosed copies of two letters exchanged recently with the Regional Director, WHO/SEARO on the theme of World Health Day may serve as backgrounder for you to design an appropriate write-up in one of the QNTs.
I believe that a small group of committed AFSM volunteers engaged in constructive research on understanding the current impact of WHO assistance on health of populations in developing countries may in due course influence WHO’s policy strategies for more effective outcomes.
I would be pleased to e-mail to colleagues inclined to consider joining this venture in partnership with me, a copy of my recent response to the Govt of India, Ministry of Health and Family Welfare on the subject. “A Cabinet level R&D initiative in the area of basic education, health care, environmental protection and basic social safety”. I am confident that though my request is unusual you would do a good job in communicating my interest to involve some of my colleagues. It is understood of course that should you need additional information/clarification it will be my pleasure to provide it to you. Yours truly
Satnam Singh, MS MPH # 221 Sector 16, Chandigarh-160015, India. Phone: +91172-2549728; Fax : +91172-2542829
E-mail: riphc@sancharnet.in

RED: Thank you Mr Singh; those interested are invited to get in touch with you.
**Publications**

**UN Voices: The Struggle for Development and Social Justice**

Thomas G. Weiss, Tatiana Carayannis, Louis Emmerij, and Richard Jolly, editors

Kofi Annan, Boutros Boutros–Ghali, and 71 other UN professionals speak about international cooperation and the ideas that have shaped the accomplishments of the UN.

*UN Voices* presents the human and moving stories of an extraordinary group of individuals who contributed to the economic and social record of the UN's life and activities. Drawing from extensive interviews, the book presents in their own words the experiences of 73 individuals from around the globe who have spent much of their professional lives engaged in United Nations affairs. We hear from secretaries–general and presidents, ministers and professors, social workers and field workers, as well as diplomats and executive heads of UN agencies. Among those interviewed are noted figures such as Kofi Annan, Boutros Boutros–Ghali, Alister McIntyre, Conor Cruise O'Brien, Javier Pérez de Cuéllar, and Kurt Waldheim, as well as many less well known UN professional men and women who have made significant contributions to the international struggle for a better world. Their personal accounts also engage their contributions in dealing with such events and issues as the UN's founding, decolonization, the rise and fall of the Berlin Wall, human rights, the environment, and September 11, 2001.

See image at:
http://www.indiana.edu/~iupress/books/0-253-34642-8.shtml

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This is a challenging book with twenty-one internationally known contributors, most of them previous WHO members, and former WHO consultants or Panelists. Its Editors are S.W. Gunn (Chief Editor), P.B. Mansourian, A.M. Davies, A. Piel and B. McA. Sayers. The WHO « retirees » offer a refreshing example of what retirement should be like. With a free spirit, the authors examine the bioethical, socio-political and scientific aspects of health, epidemics, aging populations, the double burden of disease, food safety, and other major public health concerns at the international level. Following an inspiring Foreword by Halfdan Mahler, some of the chapters deal with these topics:
- The Health, Poverty, and Development Merry-Go-Round : The Tribulations of WHO (S.Litsios) ;
- Old and New Pestilences (A.A. Arata) ;
- World Health: A Mobilizing Utopia ? (M. Manciaux, T.M. Fliedner) ;
- The Humanitarian Imperative in Major Health Crises and Disasters (S.W.A. Gunn) ;
- Dealing with Global Infectious Disease Emergencies (D.L. Heymann) ;

This publication is sponsored by the International Association for Humanitarian Medicine, named after Dr Brock Chisholm, the first Director-General of WHO.

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**New members**

**Annual:**
CHERNEY, Mme Suzanne; EID, Mme Monique; GARWOOD, Mrs Isabel ;
GIANNASI, Mme J.; MARLOWE, Miss Pat; RATCLIFFE, Mrs Penelope.

**Life:**
ATTALLAH, Dr Sadek; BONETTI, Mme F.; HEYES KIENER, Mrs Ann; HOSSEY, Mme C.(veuve RAMDOYAL); LOGAN, Dr William; NGUYEN, Dr C.T.; ROCH, Mme Catherine; SUPHI, Mr Huseyin.
In memoriam

Jill Forman (1930-2005)
Jill Forman died in Chichester on 29 July. She was dealt a cruel hand in her adolescence which left her with complex health problems for the rest of her life. The way in which she overcame these problems and made a fine career for herself in the World Health Organization was truly amazing.

Jill joined WHO in 1953 as a secretary and soon entered the Parasitic Diseases Section. This increased in importance and Jill rose to become the Administrative Assistant to the programme. She worked with two of the most eminent men in the field of parasitic diseases, Dr Ansari and then Dr Rick Davies, and her dedication and devotion to them and to the programme were legendary. Jill must have been one of the most knowledgeable lay people in the world on the subject of parasitic diseases, although with her characteristic modesty I don’t think she was ever aware of this.

Jill came from a happy and loving family who came often to stay with her in Geneva. This solid background enabled her to make solid friendships – if you were Jill’s friend; you were a friend for life.

To the world, Jill presented a calm and tranquil exterior. Inside, however, she felt things very deeply indeed. This made her stoicism and courage in the face of ill-health and pain, both physical and emotional, all the more remarkable. She bore everything with quiet and uncomplaining fortitude. But in spite of all this, and throughout her whole life, she knew how to enjoy herself. She loved her work, she loved her friends, she loved parties, she loved her travels, and she made a happy and interesting life for herself wherever she happened to be. She retired to Chichester in Sussex where she made new friends and found new interests, was an active member of BAFUNCS and was very happy in her beautiful apartment. All her friends will miss her so much.

Bernardette Rivett, former Staff Development and Training Officer, HQ & WPRO

John Polling (4.10.1928 - 17.4.2005)
Some of John Polling’s friends and ex-colleagues may not know that he has passed away. These lines are intended for them.

John was born and grew up in Brighton, Sussex. After completing his studies at Brighton Technical College he became an experimental nuclear scientist at the Atomic Energy Research Establishment at Harwell. Later he moved into scientific and technical writing and editing, working as a journalist on the New Scientist and as an editor for the Institute of Electrical Engineers. In 1964 he joined the World Health Organization in Geneva as a technical editor - a post that he occupied for more than 20 years.

On retiring, he and his wife Jennifer and their children Michael and Sonia returned to England, living first in Teignmouth, Devon, and later in Bosham - a village that they had always loved. He died of cancer in April 2005.

That was a brief account of John Polling’s life and career. But who and what was he? A man of keen intellectual curiosity, he had a voracious appetite for books, which brought him exceptionally wide-ranging knowledge. An idealist and dreamer, he had many ideas for the improvement of Man’s lot. Thus he had an abiding concern for renewable sources of energy.

He had a deep moral commitment to doing what was right. Always questioning, challenging, and researching, John never accepted any argument at its face value. Freedom of the individual lay at the heart of his political convictions, though he recognized the importance of communities. One of the things he most admired in the Swiss was the way in which they used their communities as a foundation for their democracy.

John was a born organizer and had many talents, not the least of which was painting - whether still-life, landscape or portrait. He had a fine sense of humour and considered laughter to be one of humanity’s greatest assets. Friends were extremely important to him and he had a knack of making lasting friendships wherever he went. His friends will greatly miss him.

Grace Servais
In memoriam (cont’d)

Maurice Keiser was born in Lyon, France in 1924; he died on 13 November 2005 in Geneva. He began his distinguished career at WHO in 1952 when he joined the Personnel and General Services, Supply Services as a Special Services Officer. On his retirement in 1982, he was Chief of the unit as Administrative Services Officer. Colleagues remember him for his expertise and dedication in the area of medical supplies and transport services. Maurice Keiser was known and appreciated for his kindness. He was deeply interested in classical music, French songs and poetry--and of course his cats which he loved.

Dr Norman GRATZ, former Director, VBC, died on 21 November 2005.

In and around Geneva

Fitness Centre

The enrolment session of the WHO Fitness Centre took place on Tuesday, 13 September 2005. The Fitness Centre is open to all staff members, spouses and former staff members. The annual subscription is CHF 20.00. You may join at any time of the year by contacting Maria Alyanak, Membership Secretary on extension 12770.

The programme of classes is extremely varied and includes: Pilates, Line Dancing, Hatha Yoga, Ash-tanga Yoga, Power Yoga, Pump, Body Sculpt, Strong Smooth Moves and Total Body Conditioning. The cost of each class varies. Should you be interested in joining any of these classes, contact Susan Allemby on extension 12801. However, if you prefer to work out on machines, feel free to do so on the mezzanine of the Fitness Centre.

The WHO Fitness Centre is located in the Sous-Sol of the L Building.

Vaccination against Influenza

As planned, two sessions of free vaccination against flu took place on 12 and 26 October. This first “edition” exceeded all expectations: we had anticipated that perhaps 40 to 50 retirees would sign up but, in fact, 181 former staff members and spouses registered and were vaccinated. Some others, who had not registered, contacted us after the sessions but for logistical and organizational reasons it was not possible for them to be vaccinated.

As we had explained in our announcement, it was essential to register beforehand so that the necessary arrangements, including sufficient stocks of vaccine, could be foreseen.

These sessions provided an opportunity for former colleagues to meet and exchange news and were thus quite a social event!

A big thank you to the Health Insurance which agreed to finance this preventive measure, and to the Medical Service which ensured its smooth operation.

We wish to thank all those who collaborated on this issue with articles and/or translations (Editorial Board: Yves Beigbeder, Samy Kossovsky, Jean-Paul Menu, Carole Modis, Dev Ray, Rosemary Villars. Translations, Editorial coordination and layout: David Cohen).

Our thanks to Jean-Michel Leclercq, Jean Fromen, Richard Harrison, and Rosemary Villars, who reported on the General Assembly, as well as to the interpreters.

Special thanks go to the WHO Printing, Distribution, and Mailing Services.

The opinions expressed in this newsletter are not necessarily those of the editor.
USEFUL INFORMATION FOR RETIRED STAFF LIVING IN THE GEX REGION

"CLIC" (Local Centre for Information and Coordination) for the Gex region is located at Chevry: Les terrasses de Chevry - Route de Prost Bât. D - 01170 Gex, Tel: 04 50 41 04 04
At "CLIC", above all, you will receive a warm welcome, meeting with people who will listen to you and give you information. "CLIC" was developed for retired and older people and their families as well as for professionals. The object of "CLIC" is to improve your daily life by centralizing and co-coordinating the information and contacts which are essential for you.
Meant for convenient access, this public service called "CLIC" is dedicated to you, the user. The service assures a personalized welcome which is free of charge whatever the type of request, and whether it is from the person concerned, the family, the social services, an attending doctor or a hospital or another type of medical or social institution.
Specifically, you will find at "CLIC" information and advice in the following areas:
Home care and assistance services, meals on wheels, health services, financial assistance, information about social or medical establishments, adaptation of home facilities, fiscal or technical advice, legal protection measures, or leisure activities and groups.
"CLIC" can also tell you where to find home care, companions for daily outings, care, home alarms and so forth.
In addition, "CLIC" distributes a very interesting, free-of-charge brochure giving you a host of information -- ask for it at the address listed above or contact "CLIC" on the internet at: www.cc-pays-de-gex.fr/clic, email: clic@ccpg.fr.
Telephone "CLIC" at: 04 50 4104 04 from Monday to Friday from 9:00 to 12:30 or from 15:00 to 17:00 (except Wednesday afternoon)
"CCAS" (Community Centre for Social Action) is an administrative service that you will find in every "mairie" or town hall.
"CCAS" supports, for example, the organizing of certain services such as meals on wheels. "CCAS" is an excellent partner for all social assistance needs. "CCAS" centres are well-acquainted with the problems encountered by the inhabitants of the area. Do not hesitate to go to them for your concerns and questions.
The next number of the QNT will list some useful addresses for retired staff living in the Haute-Savoie region.

Maggie Melloni

Events at WHO/HQ

FRIDAY, 3 DECEMBER 2005 INTERNATIONAL DAY OF DISABLED PERSONS
Exhibition all day long in the main lobby;
Seminar 12h30 to 14h00:
“Working with a disability”, “Disability, Health and Ethics”, “The role of WHO”.

WEDNESDAY, 7 DECEMBER 10H00 TO 16H00: TENTH ANNIVERSARY SOLIDARITY FAIR
As usual, “bric-à-brac”, bake sale, bottle stall, logistics, entertainment, food.

THURSDAY, 8 DECEMBER 17H00: AFSM RECEPTION
As every year, our reception is an unique opportunity to meet colleagues; unfortunately, only people living in the Geneva area can come; we encourage other regions to organize such receptions.
Trip to Morocco

As announced in the QNT no. 61, a ten day trip to Morocco is planned for spring 2006; this trip will include visits to the imperial cities (Rabat, Meknès, Fès, Marrakech) as well as visits to Essaouira (Mogador) and Safi.

**The itinerary is as follows:**

**Departure:** Saturday 22 April (or Sunday 23 April: to be decided later).

**Return:** 1 May or 2 May.

Day 01: Geneva/Casablanca

Day 02: Casablanca/Rabat

Day 03: Rabat/Meknes

Day 04: Meknes/Moulay Idriss/Volubilis/Fès

Day 05: Fès

Day 06: Fès/Beni Mellal.

Day 07: Beni Mellal/Afourer/Marrakech.

Day 08: Marrakech.

Day 09: Marrakech/Essaouira/Safi. (Safi is a coastal village known for its port and its crafts, in particular, pottery.)

Day 10: Safi/Airport Mohamed V Casablanca.

Inclusive price per person:

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<th>From 25 to 30 pax</th>
<th>From 31 to 35 pax</th>
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<tr>
<td>Double room</td>
<td>6 500 dhs&lt;sup&gt;1&lt;/sup&gt;</td>
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<tr>
<td>Single room supplement</td>
<td>2 050 dhs&lt;sup&gt;2&lt;/sup&gt;</td>
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1. Approx. 970 CHF  
2. approx. 310 CHF

The price per person, half-board, is about CHF 1’500 to 1’600 with the flight from Geneva-Casablanca round trip included (according to taxes and fuel charges applying at the time).

This price includes:

- Transportation by air-conditioned tourist coach from the airport to the hotel and back to the airport.
- Stay in a 4* hotel room, 5* in Marrakech.
- Half-board in the hotels.
- Visits to the monuments, except the visit inside the Hassan II mosque in Casablanca which costs 120 dhs per person. (env.CHF 18)
- An English/French speaking guide.
- Tips in the hotels.

Not included:

- Drinks and extras
- Any expenses outside the programme

The following activities are on offer as extras:

- A typical lunch in an ancient palace in the medina of Fès: 250 dhs/pax not including drinks
- A typical lunch in a restaurant in Moulay Idriss: 200 dhs/pax not including drinks
- A dinner show in a typical restaurant in Marrakech: 250 dhs/pax not including drinks

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I am interested in the trip to Morocco in spring 2006:

Name                    First Name
Address
Tel:     Fax:     Email:
Number of persons :
Any suggestions:
Date, signature:

Please send this form as soon as possible addressed to AFSM; Office 4141, by mail or email to AOMS@who.int