Happy and sparkling New year 2007

This year has seen our Association grow stronger and evolve. We regularly register new life memberships which reflects your confidence in your Association. We hope that this will continue — our Committee will make sure it does!

WHO was saddened by the sudden death of its Director-General, Dr Jong Lee-wook, who took an interest in AFSM, and attended our general assemblies and our receptions. In addition he spontaneously gave the Association a donation so that we could establish a new web site which will soon be available.

We send our warm congratulations to the new Director-General, Dr Margaret Chan, to whom we wish a successful mandate. We send you, dear colleagues, our best wishes for the new year, hoping above all for peace and prosperity in the world.
Following the untimely death of Dr. Lee, Director-General of WHO, on 22 May 2006, the Executive Board (EB) met on 23 May and decided to accelerate the process of electing a new DG. Normally, the procedure for the election of a DG is to invite nominations from Member States and submit the list of candidates to the January session of the EB. Currently the EB consists of 34 members (7 from the African Region (AFR), 6 from the Americas (AMR), 5 from the Eastern Mediterranean (EMR), 8 from Europe (EUR), 3 from South-East Asia (SEAR) and 5 from the Western Pacific (WPR)). By accelerating the process, a special session of the Board met from 6 to 8 November and nominated Dr. Margaret Chan of China to be the next DG. The nomination was approved by a special session of the World Health Assembly on 9 November.

In all, 13 candidatures were received before the deadline (one from AFR, two from AMR, two from EMR, five from EUR, one from SEAR and two from WPR). Some of the candidates were relatively unknown, others better known in public health circles. Before the opening of the Board on 6 November, three of the candidates had withdrawn. It was well known that some candidates had travelled widely to lobby support while others were relatively passive. The role of the governments of the countries to which the candidates belonged was also very varied – while some took a passive attitude, others lobbied hard among the countries represented on the Board.

The Board had first to select a short list of five candidates to interview. What was surprising was that Dr Bernard Kouchner of France was not included in this short list although he has a high public profile. Some of the international Public Health journals covered the election – the Lancet went out of its way to propose a candidate (Dr. Frenk) according to its own criteria. Sometimes such heavy-handedness can be counter productive.

The final voting in the Board proceeds by eliminating one candidate at a time – the one receiving the least number of votes. It appears that Dr. Kazem Behbehani (Kuwait and previous ADG), Dr. Elena Salgado (Minister of Health of Spain) and Dr. Shigeru Omi (Japan and Regional director of WPRO) were first eliminated. In the final vote, Dr Chan won by a heavy margin over Dr. Julio Frenk – Minister of health of Mexico.

The victory of Dr. Chan signifies various trends – this is the first time a Chinese national has assumed the stewardship of a big UN agency. This is the second time WHO is led by a woman (Dr. Brundtland being the first). Thirdly, east Asian countries are projecting themselves much more in the international arena as signified by the election of Dr. Nakajima of Japan and Dr. Lee of Korea as the previous DGs of WHO, the naming of Mr. Ban-ki-Moon as UN Secretary General and now Dr. Chan as DG of WHO. When Dr. Nakajima was elected as DG in 1988, Japan was rumoured to have played a very “active” role. The lesson may be that candidates from small and not-so-rich countries will be progressively at a disadvantage, especially if they adhere to strict ethical principles.

Dr Chan obtained her Medical Degree from the University of Western Ontario in Canada. She joined the Hong Kong Department of Health in 1978, where her career in public health began. In 1994, Dr Chan was appointed Director of Health of Hong Kong. In her nine-year tenure as a director, she introduced new initiatives to improve communicable disease surveillance and response, enhance training for public health professionals, and to establish better local and international collaboration. She has effectively managed outbreaks of avian influenza and of severe acute respiratory syndrome.

In 2003, Dr Chan became WHO’s Director of the Department of Protection of the Human Environment. In June 2005, she was appointed as Representative of the DG for Pandemic Influenza and as Assistant Director-General for the Communicable Diseases cluster until she took a leave of absence from WHO in July 2006 in relation to her candidacy for the position of WHO DG. She is currently 59 years old.

Recently the Organization has been faced with a never-ending sequence of “reforms”, and an ever increasing number of high level appointments, and WHO staff feel that they need a respite to consolidate their work. Dr Chan is uniquely qualified to provide this opportunity. We wish her all the best in her new responsibilities.  

Dr Margaret Chan, new WHO DG
News and events

New UN Secretary-General

On 13 October 2006, the UN General Assembly appointed Mr Ban Ki-moon, a respected diplomat from South Korea, to the post of Secretary-General of the Organization, upon the recommendation of the Security Council. Mr Ban will replace Kofi Annan on 1 January 2006 for a five-year term.

According to the UN Charter, the Secretariat is one of the principal organs of the UN, at the same level as the General Assembly and the Security Council. The SG is the chief administrative officer of the Organization. He may bring to the attention of the Security Council any matter which in his opinion may threaten the maintenance of international peace and security.

As demonstrated by the incumbents of the post, which Trygve Lie (the first SG) described as “the most impossible job on Earth”, the SG must be both a manager and an effective diplomat. Most have offered their good offices to countries in conflict. Dag Hammarskjold invented the peacekeeping forces which brought to an end the Suez crisis: these forces now include more than 92 000 personnel. The UN and Kofi Annan play an important role in the crises of the Middle East, Darfour, and the problems of nuclear proliferation (Iran, North Korea). The UN and Kofi Annan were jointly awarded the Nobel Peace Prize 2001.

It is likely that Mr Ban will need all of his recognized qualifications as a diplomat in order to exert an influence on conflicts in the coming years. At his first press conference, Mr Ban, the eighth incumbent of the post, identified three priorities: to rebuild trust among all stakeholders, to stay the course with ongoing reform of the Secretariat management, and to enhance coherence and coordination.

Yves Beigbeder

AFSM : New Committee 2006-2008

The results of the election of the New Committee held on 24 October 2006 were as follows:

Number of envelopes received: 439; Invalid ballots 16; Valid ballots 423
David Cohen : 369 votes; Roger Fontana : 367; Rosemary Villars : 362; Yves Beigbeder : 358; Dev Ray : 355; Samy Kossovsky : 349; Jean-Paul Menu : 347; Carole Modis : 341; Averil Foster : 339; Bunty Muller : 332; Roberto Masironi : 328; Neel Mani : 308.

Anne Yamada was not elected, but she was unanimously co-opted by the new Committee during its first meeting 7 November 2006. The three honorary presidents, Alain Vessereau, Stanislas Flache, and Rajindar Pal participated in the meeting as non-voters.

The new Committee immediately assigned responsibilities for its activities. (see photo next page)

President: Roger Fontana; Vice-presidents: Carole Modis, Jean-Paul Menu; Treasurer: Roberto Masironi; Vice-Treasurer: Samy Kossovsky

BUREAU

Treasurer: Roberto Masironi; Vice-Treasurer: Samy Kossovsky

QNT: Edition and layout: David Cohen

Editorial Board: Yves Beigbeder, Samy Kossovsky, Carole Modis, Jean-Paul Menu, Dev Ray, Rosemary Villars

List of Retirees: Management: J-P Menu; New members: J-P Menu with Treasurer/Vice-Treasurer

Health Insurance: David Cohen, Samy Kossovsky

Pensions: Dev Ray, Bunty Muller

Representatives to AAFI/AFICS: Roger Fontana, Stanislas Flache

Relations with Staff Association: Roger Fontana

Relations with Regions: not yet attributed

Relations with GINA: Roger Fontana, Carol Martin, Rajindar Pal, Yves Beigbeder

Relations with Geneva State and City: Stanislas Flache

Social and Cultural Activities: Samy Kossovsky, Bunty Muller

Self-help: Roger Fontana, Yves Beigbeder (for the Haute-Savoie)
News from AFSM

Computer, website: Carole Modis, Anne Yamada, Björn Sletta (not on the Committee).
Permanences: each Thursday, 9:30 to 12:30, from December
Memory WHO/AFSM: Carole Modis, Dev Ray, Rosemary Villars
Mediatheque AFSM: Jean-Paul Menu
Legal issues: Yves Beigbeder

Members of the New Committee

From left to right: first row: Dev Ray, Yves Beigbeder, Bunty Muller, Roger Fontana, Rosemary Villars, Samy Kossovsky.
Behind: Jean-Paul Menu, Carole Modis, Alain Vessereau, Stanislas Flache, Roberto Masironi, Averil Foster, David Cohen.
(Neel Mani, absent from Geneva, and Rajindar Pal, who had already left, do not appear on the photo).

A message from the President

We are heading towards a new year and we intend to continue our progress in the areas of activity identified so far. The Executive Committee that you have elected for 2006-2008 held its first meeting on Tuesday 7 November, prepared its programme and assigned responsibilities to each of the elected members. At the same meeting, the Committee decided to co-opt Ms. Anne Yamada whose competence and support we welcome. Speaking of the election, we thank the large number of you who sent in your votes. Contrary to previous elections, the vote counting was carried out without the support of the WHO polling officers. Nine tellers, all volunteers, handled the operation very efficiently and I would like to thank this group most warmly: Dr Jean-Jacques GUILBERT, Mrs. Pamela HINDE, Mrs. PAULE LECCIA, Ms. CAROL MARTIN, Mr. ROLAND PÉGUET, Mr. GÉRARD PERRIN, Ms. ANDRÉE PRODHAM, Mr. GÉRARD ZEMP, and Mr. SERGE PETROFF.

Kind regards to all our colleagues near and far, and our warmest thanks for all the messages of support that we receive.

In the name of the Executive Committee and also on my own behalf, I wish you all

A VERY HAPPY AND SUCCESSFUL NEW YEAR 2007.
News from AFSM

Vaccination against Influenza: 203 retirees vaccinated!

The 203 retirees vaccinated against the flu on 16 and 17 October during the sessions organized by the Association had the opportunity to meet and renew contact with former colleagues. The Health Insurance paid for the vaccines, provided by the WHO Medical Service, as well as the services of a retired nurse, Mrs Caloz, formerly employed in the Medical Service. Drs Cohen and Kossovsky, former staff of the Joint Medical Service, supervised the proceedings keeping an eye open for possible adverse reactions. Other members of the Committee also gave a hand.

Dr S. Kossovsky, Dr D. Cohen

This photo, taken by Samy Caloz vaccinating Mrs Mahassen, former laboratory officer of the Joint medical service (JMS).

International Day of Older Persons

The International Day for Older Persons was celebrated this year on 10 October at WHO headquarters; the theme was “Challenges of Ageing in a Foreign Land”.

Dr Halfdan Mahler, former Director-General of WHO, was the guest of honour. The speakers were Prof. Naina Patel (Director, Research Institute on Ageing and Ethnicity, GB); Professor Charles Wanner, Demographer from the University of Geneva; Ms Christine Schneider, project director for the “Age and Migration Bus”; Mr Maurice Graber, Social Service and Chief of the WHO project on Friendly Cities, Geneva.

Dr Alexander Kalache, President of Geneva International Network on Ageing (GINA) and coordinator of the programme on Ageing and Life Course was the moderator.

Dr Astrid Stückelberger, president of the non-governmental organization Committee on Ageing and co-founder of GINA gave a retrospective on the ten years of GINA. A very successful cocktail followed this interesting meeting, giving participants an opportunity to continue their discussions.

Self-help Group

We are looking for volunteers for the Self Help Group - to visit the sick, handicapped and isolated and support those who need it. For years, Rosemary Bell and Margaret Baker spared no effort in this regard. They also organized the monthly lunches at the Hôtel Montbrillant. They are unable to carry on. We thank them warmly for their efforts. The problems remain; the distress, often hidden, also. We seek volunteers among our former colleagues who are in good health to carry on the work started by our two friends. If you are willing to give some time to these activities, please contact the Association by letter, telephone or by email.

Samy Kossovsky

12th Solidarity Fair

As usual, the Solidarity Fair brought many people this year to the main hall in WHO headquarters. Mrs Lee, wife of the late Director-General and Dr Margaret Chan the newly elected Director-General honoured this gathering with their presence. Roger Fontana, Carol Martin and Samy Kossovsky as well as other AFSM members gave their help. On this occasion, Mr Philippe Dreyer, Director of UBS, offered a cake for three hundred people, celebrating the fortieth anniversary of the UBS at WHO headquarters.

Many stands of all kinds, food, drinks, and clothing from many countries attracted the attendees. There was also a musical accompaniment for this very successful event.

In our next QNT we will report on the amount and destination of money raised by the Fair. D.C.
News and events

Our pensions: a storm in a teacup?

No, but... A letter was sent to all of AFSM members on the decisions of the Pension board and the resulting spate of protests from Participants representatives. The situation has since been overtaken by events... First, UN USG for Administration, Mr Burnham, resigned. Whether this was due to the pressures building up on his controversial management style or merely reflects a changing of the guard with the departure of the current SG is a moot point. Secondly, ACABQ (Advisory Committee on Administrative and Budgetary Questions) recommended to the UN General Assembly that decisions related to changes of management of the investments of the Fund be deferred until information, including the results of the soon to be started asset-liability management study, is presented to the Pension Board. If the UNGA accepts these recommendations, there will be no change in the management of investments of the Fund.

FAFICS: What it is; what it does2.

In the UN system we are confronted with a plethora of acronyms. Not to be outdone, the retirees also have established their own acronyms. First came AAFI-AFICS, or an Association of Former International Civil Servants, which was originally established in 1955 in Geneva from an informal association of ILO retirees. Similar Associations were then established in Paris, Rome and New York. Not being content with local Associations, a Federation of Associations of Former International Civil Servants (FAFICS) was created in 1975. The purpose of FAFICS is to give an institutional framework to the concept of a far-flung international community.

FAFICS holds an annual Council and usually it is held just prior to the UN Pension board (UNJSPB) meeting, and in the same location, in order to permit the FAFICS delegation to attend. This year, since the Pension board meeting was being held in Nairobi, AAFI-AFICS, Geneva, hosted the session in the UN premises from 4 to 7 July. FAFICS president, currently Witold Zyss (previously of UNESCO), chaired the session and 20 member associations attended the meeting. With four new member associations, the total membership has risen to 37. They vary in size – from a 3340 member AAFI of Geneva to many associations of less than 100 members.

A major item on the agenda was the position of FAFICS in the forthcoming UNJSPB meeting. The UN USG for Administration, Mr Burnham, had been proposing to outsource the management of the investments of the Fund’s assets. FAFICS council reaffirmed the four principles underlying the Fund’s investments: safety, profitability, convertibility and liquidity; and that any major change in the investment policy should be based on a proper study. It appears that Mr Burnham withdrew the controversial proposals and the Board voted on a proposal to move the investments of North American equities to an index based system. Since such a system satisfies the four principles, it came as a major surprise to see the Participants representatives objecting to them and floating a petition to forward to the UN General Assembly. For unknown reasons, FAFICS representatives also fully supported that stand2.

The Council approved the recommendations of a working group on Long-term care and considered revision of its own statutes. The Council reached an agreement that, as a general rule, decision would be taken by consensus, and in case of a vote, by a simple majority of associations present and voting except on matters with financial implications where a double majority would be required i.e. majority of associations voting and representing a majority of individual members in the Federation. Also a two-thirds double majority would continue to be required for amendments to the statues. However these proposals need to be approved by the next Council.

The office holders were elected by acclamation. At the end of the session, many questions and doubts were raised as to the effectiveness of the Council session and AAFI-AFICS will present some proposals to improve the conduct of business. This includes ways to be inclusive of smaller member associations in the discussions, the duties of office holders, conduct of the session and the double role of the President of FAFICS as Chair of the session. However, the continued existence of FAFICS was not in doubt since it provides a unified voice for the retired international community to the UNJSPB and other bodies such as ECOSOC, Department of Public Information and CONGO, a collection of NGO’s. It comes at a very low cost – the budget being around USD 22,000 and contributions being USD1.25 per individual member. The next council session will be held in New York in July 2007. 

1 Cf. QNT 54, where the matter was already dealt with.
2 Ed. The leaders of FAFICS considered that it was essential to maintain solidarity between the retirees and active staff. This position resulted in lively debate, particularly at the AAFI-FAFICS Geneva Committee meeting – which finally voted in its favour.
7 December: our annual reception

As usual, our annual reception was very well attended, no less than 240 people—AFSM members and their families, serving WHO staff, guests—all were present at the annual reception of the Association which was held on December 7, 2006 in the WHO headquarters cafeteria at Geneva from 17h to 20h.

After a brief word from Roger Fontana, AFSM president, Dr Kean, representing the Administration addressed the assembly. The next speaker was Dr Margaret Chan, the newly elected Director-General who will take office in January 2007. She took the opportunity to reaffirm solidarity between serving staff and former staff.

In a very moving moment, Roger Fontana reminded us that at the last AFSM General Assembly, the late Dr Lee had said that if he were not the Director-General of WHO, he would be a member of AFSM. Since the Assembly had decided to extend an honorary life membership to Dr Lee, this was given at the reception to his wife Mrs Lee Reiko Kaburaki. She was given a warm welcome and a lovely bouquet of flowers.

The reception gave us all a chance to see former colleagues and to make new acquaintances. The buffet was as usual very generous and appreciated by all.

Communication: TV programmes in English: If you don't have satellite or cable TV but would still like to watch an occasional programme in English (recorded from British television), maybe you would like to consider joining my small video club. The cost is CHF 36 per month and for this you receive four tapes a week, from which you can choose the programmes you would like to watch.

For more details, please contact Lynda Pasini, tel: 022 774 3307 or email: pasinil@tiscali.ch
A prospective study of the years 2000, 2010 and 2030 was published by Murray and Lopez in the context of the Project on morbidity in the world.

These projections, based on data from 1990, are now out of date, in particular as regards the spread of HIV/AIDS, greatly underestimated.

Mathers and Loncar thus used WHO estimates for 2002 with three scenarios, baseline, optimistic, and pessimistic, according to the probable social and economic development of different regions.

The data were updated in the light of the improved death registration data and the latest available projections concerning HIV/AIDS, income, human capital, tobacco consumption, body mass index, etc.

In the three scenarios a spectacular shift in the distribution of causes of death is noted, from the younger to older ages, from communicable diseases, maternal, perinatal and nutritional causes to non communicable diseases.

The first general observation of the two authors is that whatever the scenario, in 2030 life expectancy at birth will increase in all regions of the world, the most signifiant increases occurring in Africa and South Asia.

In Africa, however, according to the baseline scenario, life expectancy for men will remain inferior to 55 years.

Generally, men will mainly benefit from the increase in life expectancy, but women will retain the advantage. In 2030, in countries with high income, life expectancy for women will reach 85 yrs and for men 79.7 years.

While the gap men-women is supposed to decrease in these countries, it will grow significantly in countries with low income.

The total annual deaths in the world in 2030 will reach 73 millions (baseline scenario) 65 millions (optimistic scenario) and 80 millions (pessimistic scenario).

The second marked trend: the increasing burden of AIDS in mortality, while that due to other communicable diseases should decrease. Using the basic hypothesis according to which antiretroviral drugs will be accessible to 80% of those who need them but preventive efforts will not change, the number of annual deaths due to HIV will rise from 2.8 millions in 2002 to 6.5 millions in 2030. According to the baseline scenario, the total number of deaths due to AIDS during the period 2006-2030 will be 117 millions.

Moreover, as a result of the ageing of the population, mortality due to non communicable diseases (cancer, cardiovascular diseases, etc.) will increase and represent nearly 70% of the causes of death in 2030. From 7.1 millions in 2002, deaths from cancer will increase to 11.5 millions in 2030, and those from cardiac causes from 16.7 millions in 2002 to 233 millions in 2030.

The third major trend is the growing impact of tobacco. From 5.4 millions in 2005, tobacco related deaths will reach 6.4 millions in 2015 and 8.3 millions in 2030. Tobacco-related deaths will decline by 9% in high income countries but will double in those of low and middle income. In 2015, tobacco will cause 50% more deaths than AIDS and will be the cause of 10% of all deaths.

Finally, the number of deaths from (largely traffic) accidents, should increase by 40% between 2002 and 2030, when they will total 2.1 millions, largely due to socio-economic development in low and middle-income countries.

Sources: PLoS Medicine
Le Monde 30 November 2006

1. Colin Mathers, Evidence and Information for Policy Cluster, World Health Organization, Geneva, Switzerland
2. Public Library of Sciences, Bibliothèque gratuite en ligne ;
3. Harvard University Press
Matters of History

Concerning Dr Litsios’ seminar...

Following up on our article summarizing the seminar of Socrates Litsios, we asked Dr Jean-Paul Jardel, Chief of Evaluation in Health Promotion at AFRO and later Director Programme Management EURO before becoming Assistant Director General at HQ from 1987 to 1995, for his reactions. Here they are:

In the document entitled “Mission Impossible” reporting on the seminar given by Dr Socrates Litsios, it is stated that the “failure of the UN system to adopt an integrated approach to country programming greatly undermined WHO’s visionary efforts to promote health as an integral part of national socio-economic planning.”

I agree for the most part with this point of view, but the responsibility for the difficulties encountered should not be reduced to just the problems of coordination between the UN agencies. There were other reasons why the integrated approach to health planning in the general framework of national socio-economic development planning did not have the success it deserved.

Some of these factors are related to the difficulties WHO had in adapting to its new missions. It was necessary in fact to evolve rapidly from an organization with mainly technical expertise (the eradication of diseases requiring scientific expertise) to a new type of socio-political organization in which there was much less room for certainty. This evolution was partly hindered by factors which were inherent in the very culture of the Organization. I will cite two of these:

1) The tendency which came from the tradition of vertical technical programmes to furnish directives or guidelines based more on so-called expertise rather than on real experience in the field. Too often standard procedures were imposed on countries rather than engaging in a process of consulting with countries to find procedures adapted to their capacities and to their needs.

2) The habit which came from the tradition of “technical assistance” to formulate and propose programmes corresponding to the criteria of the Organization (ideally in coordination with other UN agencies) when it would have been better to help the countries to develop competencies and ways to formulate their own programmes so that they could themselves coordinate external multilateral and bilateral aid.

In fact the relative failure of the approach is without doubt largely due to the fact that WHO and the other agencies did not know how to sell the approach to the countries concerned.

WHO was not able to sell the integrated approach to Health

J-P Menu and J-P Jardel

Another comment

Dr Litsios concludes that the failure of PHC has been due principally to the lack of success in inter-sectorial coordination and the failure of the UN agencies to follow a cohesive approach under the leadership of UNDP. However much Dr Mahler himself would like to believe it, I feel it is only one of the contributing factors. Human nature being what it is, a degree of competitiveness and seeking the “glory” of achievements is perfectly natural. In national governments, each ministry seeks the maximum resources it can obtain and the final allocations are decided by either the President (or Prime Minister) based on the imperfect advice of a number of deliberative bodies such as the Council of Ministers or a Planning Commission. Similarly, WHO itself had internal conflicts of “technical programme managers” fighting for their turf and, in spite of efforts to the contrary, the highest decision making groups – including Global and Headquarters Programme Committees - failed to integrate different programmes wisely. Apart from outside pressures, WHO could not rise above its own imperfections which were accentuated by an intensive search for extra-budgetary funds with all the attached strings. The conclusion of Dr Jardel is the second most important contributory factor – i.e. the inability of WHO and other agencies to empower national authorities to actively coordinate all external inputs.

Dev Ray
AGFUN D* INTERNATIONAL PRIZE FOR 2006

Our readers know well Dr Khaled Mneimne, former EMRO Regional Adviser and consultant, who is a frequent contributor to our columns and a devoted supporter of AFSM. Dr Mneimne has been selected as an arbitrator for AGFUND International Prize 2006 and wrote to the QNT about the awards. Here is an abstract of his letter:

The Eighth Meeting of the Prize Committee was held under the chairmanship of HRH Prince Talal Bin Abdul Aziz Al-Saud, President of AGFUND, on 12 September 2006 at AGFUND’s Headquarters in Riyadh, Kingdom of Saudi Arabia.

The aim of the prize is to identify development projects that best contribute to the objectives of AGFUND which include improvement of the educational level in poor countries for children and women in particular, improvement in health conditions, institutional development and capacity-building, ensuring that development projects or activities today do not harm the capacity for development tomorrow.

The 2006 AGFUND Prize focused on sustainable development integrating micro-credit, primary health, human services, training and job creation for the poor in rural areas. 37 projects had been nominated from four continents. AGFUND Prize is classified into three categories in accordance with the nature of the implementing bodies.

The First Category Prize was for projects implemented by UN, international or regional organizations (USD 150,000).

The project recommended for the prize was: "Community-based primary health care development in Azerbaijan", implemented by the International Medical Corps (IMC).

Dr Mneimne was invited to Riyadh to participate in the selection of the winning project in this category. The Second Category Prize was for projects implemented by NGOs (USD 100,000). The one recommended for the prize was: "Discovering the Ocean World: Education resources for primary schools", implemented in Mauritius by Shoals Rodrigues.

The Third Category Prize was for projects founded, sponsored and/ or implemented by individuals (USD 50,000). The project recommended for the prize was: "Workplaces creation through training of women in vocations and business skills", implemented in Uzbekistan upon the initiative and efforts of Ms Dildar Alimbekova.

The Prize Committee and participants recommended an increase for next year’s AGFUND prize to reach a total of USD 500,000 instead of USD 300,000.

ABOUT THE CONGO EMERGENCY OPERATION (QNT 64)

…Having worked in the African Region from ‘59 thru’ ’70, 1 was especially interested in the article entitled «Matters of History» (QNT 64). On page 4 is a picture of the first WHO Medical team in Leopoldville.

Whilst aware of the problems in the Congo and the responsibility that WHO accepted from the Government and UN to co-ordinate assistance, I had no inkling of the details and particularly of the prodigious effort undertaken by WHO to staff, “all responsible posts in the country’s health services with Congolese medical officers”. This was accomplished by the end of 1967 and WHO must be congratulated on this achievement. In the photo showing the first WHO Medical Team I have some good friends. Athemas Bellerive who was locally responsible, under the direction of the DG, Dr. Candidau, was a very good choice with a wry sense of humour. I remember him best for a remark he made when we were on a Staff Course for Senior WRs in Geneva. The subject was a suitable type of car for the WRs in the field and his response when asked was. “I do not know, I have a plane”

Others in the photo personally well known to me are that utterly charming British gentleman Dr. Yarom and the very capable Dr. Flahault. I flew once with David Yarom on an Air Mali Flight and he started conversing with the crew in Russian whereupon we were upgraded to the 1st Class. ! He explained to me that he had been brought up by a grandmother who was Russian. When the State of Israel was created he moved there. Greetings David if you are still with us. Daniel Flahault is the one I know best, from the many years we spent under the direction of AFRO and subsequently in retirement. We are still in touch. It is in keeping with the high standards he has always maintained that he never in all the years I have known him made any mention of his contribution to the solution of the Congo crisis. Warmest greetings to you Daniel.

Dr D.A.W. Nugent 27 Golf Side Cheam SM2 7HA

Retiring on 1 October 2006 in Niamey, Dr Lazare Loco, WHO Representative in Cotonou, sent us already in September his application form to become a life member of AFSM

Responding to our letter of welcome, he wrote:

“…Thank you for your message and most especially for your welcome to my new family. I offer my unconditional support to the Association, and I will spread the word here in Niger and in the African region. Have a good weekend, and let us stay in touch”.

ED: Once again, congratulations Dr Loco. We are always happy to hear from you.
In memoriam

Viviana Micucci

Already thirty years have passed! It was during the black years of the military dictatorship in Argentina. Viviana Micucci, Librarian of the PAHO Zoonoses Centre in Buenos Aires was taken away by armed men, together with her parents, in the middle of the night of 11 November 1976: she was defending human rights. Her parents later described how from the place where they were detained they could hear planes taking off and landing. Neither they, nor the Organization, ever received any information regarding what had happened to Viviana, as indeed was the case for many others at that time. A new episode of “Night and Fog”. The WHO Staff Association cried its indignation and showed its solidarity with her family. Viviana’s mother responded in a moving, emotional letter. Her memory has been commemo-rated over the years by the Staff Association, a flame lit beside her picture either on the anniversary of her arrest or on 10 December, Human Rights Day. The Human Rights Commission continued its search for the truth, till now in vain. This year marks the 30th anniversary of her disappearance. Investigations in her country have been reinforced. Viviana Micucci will be remembered once again, her portrait will be hung in the hall of the main HQ building – which bears her name – near the commemorative plaque opposite the library. It is an opportunity for all of us to remember those from WHO and elsewhere in the UN system who have been massacred, imprisoned, badly treated or who simply disappeared in the course of service. These are often locally recruited staff and for various reasons little is known about their fate. We must remain vigilant and never forget that in the event of such an incident immediate action is of utmost importance. The case of Viviana brought this home – a too long and tragic delay occurred between her absence from work and the start of investigations. The hours following the arrest of a person can be crucial to their release, if not their survival.

Rosemary Bell, Samy Kossovsky

It was Rosemary Bell’s initiative to have the ceremony this year devoted to the thirtieth anniversary of Viviana’s disappearance.

Good-bye Dr Arthur Brown

It was always a great pleasure when Dr Arthur Brown arrived at the AFSM office in his three piece suit, his eyes bright with another new idea, with his rueful remarks on the failings of human nature, and his indestructible faith in the important role of the World Health Organization in past times as well as for the world today. He always carried his WHO identification card issued by the WHO Interim Commission in 1947. In 1953, he became the WHO Area Representative for Cambodia, Laos, and Vietnam. He was the WHO Deputy Chief of Mission during the UN intervention in Congo Zaire, WHO Representative in Ethiopia and Bulgaria before becoming Assistant Director of Health Services at EMRO until his retirement in 1974. As a public health doctor, Arthur was an acute observer and a communicator. He once told a WHO team engaged in developing a complex health services survey, “Give me three days to walk around the villages and talk to the people and I will tell you what the health problems are and how they can be solved.” In QNT no 62, we reviewed Arthur’s latest book, A public health odyssey: prevention is better than cure. Sadly, Arthur died on 7 September 2007. He was truly an adventurer, a larger than life personality, and an inspiration. We shall miss him, and we offer our sincere condolences to his family and many friends.

Carole Modis
In memoriam

Roger Marc LYONNET (21 June 1934 - 25 August 2006) has passed away.

He leaves the memory of a faithful friend, a competent physician and a warm hearted man.

His friends, colleagues and former colleagues of the WHO medical service (including Dr Pascale Gilbert-Miguet), wish to associate themselves with this tribute. I myself met Roger in 1991 in the Medical Service; we remained close friends until his death, meeting for lunch every Tuesday at WHO with former colleagues and friends, (including Dr Jean-Paul Menu).

Dr Pierre Delon.

Dr David Cohen

Adrian van Pernis was born and grew up in the Dutch East Indies, now Indonesia. At the age of eighteen, his parents sent him to Holland to study economics and become a chartered accountant so that he could take over his father’s business in Surabaja. He studied at Rotterdam University until it closed in 1942—not to open again until after World War Two. He found a post in a public accounting office, married and his first child was born; then on 11 November 1944, all young Dutch men were “recruited” for work in Germany. Adrian left Rotterdam packed in a cattle wagon on a freight train for a journey which took over three days. Finally arriving in Bedburg, he was housed in an abandoned factory and told that he was now employed by the railway.

Adrian’s account of how he and a friend escaped from the Bedburg camp, their journey on foot westward toward the Rhine, and their encounters with other refugees is a story in itself. He ended up in Remagen and remained there until the American army captured the famous bridge and crossed the Rhine—a decisive event that led to cessation of hostilities. With his knowledge of Dutch, English, French and German, the Americans employed him as a translator with the many displaced people who were being repatriated. Adrian returned to Rotterdam in 1946 and got a job with UNRRA in London. The Organization was then finishing its work and arranging to hold its final meeting in the Palais des Nations; he travelled to Geneva carrying on his person ten thousand dollars (a colossal sum at that time) to finance the meeting. He remembered walking in to the Palais on that first day in July 1946 to find vacant offices—the only people around were the gardeners. A chance encounter with Dr Yves Biraud to
In memoriam

whom he mentioned he would soon be without a job led to an invitation to join WHO. He started work in December 1946 under Milton P. Siegel. His position dealing with pensions and health insurance brought him into direct contact with HQ and regional staff. His colleagues remember him as a kindly man, calm and patient, always ready to sympathize and to listen and help. Adrian was one of the people who helped create the WHO of today.

My old friend, Al Malakoff, was the sort of chap who, once you have met him, you were liable to bump into time and again in various parts of the world. With me, this process started in Korea, where Al was the UNKRA Personnel Officer responsible for the local (Korean) staff. In spite of work pressures, Al was very popular with the staff. Al was a very kind man. In those days, Korea was still at war and the inhabitants were lacking in just about everything. I found out that Al had organized his home-town in the US into a collection and shipping centre for Korean refugee relief. He never mentioned this to any of us. That was typical of Al. He was preparing to move on from an assignment as WHO Personnel Officer in SEARO, New Delhi, when I next bumped into him upon my transfer to that Regional Office. I recall that I mentioned to Al that the Regional Director of the time enjoyed the reputation of being very tough. Al’s reaction to this comment was “If you don’t take him seriously and mess about in the job, then watch out! But if you survived our previous boss in Korea, there will be no problem on that score.” So it turned out. Yes, Al was wise.

Before retirement, he was transferred to WHO headquarters in Geneva and so eventually was I. We ended up as happy but somewhat inadequate golfing retirees. Al was stricken down some years ago and he faced up to that situation with courage and humour. He and his wife decided to return to the US, their home country, and soon we were receiving jokes by e-mail, knowing, as he did, that there was not much to joke about in his condition.

Yes, we miss you, Al. Rest in peace, old friend.

Brian J. Edwards

Al Malakoff passed away on 7 October 2006. His many friends send their condolences to his widow and their two children, and share in their grief.

Y. Beigbeder

List of deceased recently notified

<table>
<thead>
<tr>
<th>Name</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>BIDWELL Ernest,</td>
<td>13.11.2006</td>
</tr>
<tr>
<td>CULLEN J.</td>
<td>26.08.2006</td>
</tr>
<tr>
<td>FITZSIMMONS Marie</td>
<td>27.11.2006</td>
</tr>
<tr>
<td>GALLAGHER Seamus,</td>
<td>24.04.2006</td>
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<td>MITCHELL, S.E.M.</td>
<td>13.11.2006</td>
</tr>
<tr>
<td>NAKHLA, Ehsan.</td>
<td>13.11.2006</td>
</tr>
<tr>
<td>RANQUE, Philippe J. A.</td>
<td>26.11.2006</td>
</tr>
<tr>
<td>SUMMERS Kathryn</td>
<td>25.11.2006</td>
</tr>
<tr>
<td>TOMASI, Antonio</td>
<td>21.09.2006</td>
</tr>
</tbody>
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Publications

Judging War Crimes and Torture, French Justice and International Criminal Tribunals and Commissions (1940-2005)  


Even democracies commit war crimes. France, like other democracies, has not always lived up to the high standards expected from the “homeland of human rights”. Its colonial past, now over, shows that its expressed “civilizing mission” was tainted with military actions, economic and religious abuses, denounced by a few courageous groups and individuals. Even democratic countries, like France but not France alone, are liable to commit war crimes, crimes against humanity, torture and even to be accomplices in genocides. Reasons include pressures in exceptional periods of internal and/or external political/military tensions, nationalist policies, lack of media exposure to abuses, weak parliamentary control, dependent justice. Past crimes must be recalled and exposed, particularly if they have been hidden, covered by amnesties, and thus not judicially punished. They must be shown in the country’s history so that they are not repeated.

The book reviews major French trials over the periods of colonisation (Indochina, Madagascar, Algeria), then during the German occupation of France and its aftermath. France’s participation and attitude towards the international criminal tribunals (Nuremberg, Tokyo, Rwanda, Yugoslavia and the International Criminal Court) are then reviewed. This follows his two previous books on international criminal justice.

The author: Yves Beigbeder (Doctor in Public Law) has written a number of books and articles on international administration, the World Health Organization, the international civil service and international criminal justice. As a young graduate, he worked as Legal Secretary to the French judge at the Nuremberg trial (March-August 1946). Following his long service with the World Health Organization, he gave courses or lectures in European and North-American universities. He is now a legal counsel for international civil servants in Geneva.

A new book by a former WHO staff member—also an eminent entomologist


Pierre Jolivet sets down in this book his personal account of his often adventurous life in search of the Coleoptera Chrysomelidea and the habits of ants in plants. The author has roamed the world motivated by research and profound love for the nature of the tropics and its biological marvels, plants and insects.

In his youth, Pierre Jolivet climbed Ruwenzori in Zaire; later he explored Mt Wilhelm in New Guinea (not so high in elevation but equally interesting for its flora and fauna.) Later, he had to settle for ascending Mt Baru in Panama by automobile, Mt Bolivar in Venezuela by cable car and Mt Humboldt by helicopter. There are few countries that Pierre Jolivet has not visited with his green insect net in hand.

To give you an idea of the charm of this book, we cite below its first lines (it has not yet been translated into English):

Je suis arrivé au monde le 12 octobre 1922, à deux heures du matin, en la bonne ville d’Avranches, place Valhubert, en face du jardin des plantes et du Mont Saint Michel, dans une modeste quincaillerie. Comme on était superstitieux en Normandie, on ne préparait jamais d’avance le berceau, et la Cigogne me déposa dans une boîte a clous ! Peu digne d’un futur entomologiste.

Some of the other books by this author are:

Ants and plants : an example of coevolution. Leiden, 1996

Host-plants of Chrysomelidae of the world, Leiden, 1995

Fascinating insects, some aspects of insect life, Sofia-Moscow, 2005

For more information about the books and how to order them, see the web site at: www.pensoft.net
Portraits of Healthy Life Styles, by Shiv Kumar Varma, New Delhi, India

Mr Varma has brought out a small booklet of 16 pages describing the experiences of six (including himself) elderly gentlemen who have kept in good health and avoided any serious illness. Mr Varma worked in WHO, New Delhi, for a long time – the last decade being Personal Assistant to the RD, Dr Uthon. I have met him on numerous occasions, both in Delhi and Geneva, where he came regularly to accompany the RD. As he narrates, he was always smiling and ever helpful.

The five others have been drawn from different walks of life – “a businessman, a religious leader, a technical hand, an office worker and a tailor”. All of them share some characteristics – regularly waking up early, taking a morning walk, faith in God, simple food and avoiding alcohol and tobacco. All of them – ranging in age from 70 to 90 – express a sense of optimism, respect for others and nurture positive values. There are lessons to be learnt by all retirees if they wish.

The same theme is recently reiterated by José Paganini of Argentina in a tailpiece in the PAHO journal of the retirees. He quotes the definition of “old” in “the dictionary of the Royal Academy – 1) any person over 70 years of age, 2) something tarnished or spoilt. Since no one wants to be tarnished or spoilt, old age is a state of mind…”A poet questioned on his state of permanent youth responded “I don’t spend time with old people.”…”We only live to discover (wisdom and) beauty, all else is waiting” (Kahlil Gibran).

Dev Ray

Passive smoking – Philip Morris mole infiltrated the University of Geneva

In its report “Tobacco Strategies to Undermine Tobacco Control Activities at WHO”, published in the year 2000, an Expert Committee revealed how the tobacco industry worked to counter WHO’s efforts to combat tobacco smoking. Every effort was made to discredit and undermine WHO, in particular by trying to reduce its research budgets, denigrate its priorities, and convince developing countries that its fight against tobacco was to their detriment. In their campaign against WHO, tobacco companies succeeded in using international scientific experts with whom they had hidden financial ties. Even retired WHO toxicologists were hired as consultants. In this way, the industry managed to slow down WHO’s tobacco control programme.

Apart from such action against WHO’s campaign, an affair implicating the Faculty of Medicine of Geneva was uncovered by Pascal Diethelm, a retired WHO staff member, and Dr Riehl. This involved a Swedish researcher, Ranar Rylander, associate professor at the Faculty of Medicine of Geneva, who for 30 years collaborated with the firm Philip Morris and who concluded, based on his studies, that tobacco smoke was innocuous for non-smokers. This story, which was brought to court, is told by two journalists, Sophie Malka and Mario Gregory. A review of this fascinating book will be included in our next issue.

New members

<table>
<thead>
<tr>
<th>BEN MUSA, Zohra</th>
<th>KREISEL, Wilfred</th>
<th>MUSTAPHA, Allaf</th>
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<tbody>
<tr>
<td>CONSTANTSE, Robert</td>
<td>LARTIGUE, Liliana</td>
<td>PIERCY, Ena</td>
</tr>
<tr>
<td>FARKAS, Tibor</td>
<td>PACHNER, Peter</td>
<td>ROCHE, Catherine</td>
</tr>
<tr>
<td>HOFFMAN, Dorothy</td>
<td>MONTOYA Aguillar</td>
<td>ROYNETTE, Fiona</td>
</tr>
<tr>
<td>KELLER, Martina</td>
<td>MULLER, Bunty</td>
<td>WEBB, Francis</td>
</tr>
</tbody>
</table>

It has not been possible in this issue for us to distinguish between life members, annual members and conversion of annual members to life members. These distinctions will be included in the next issue.

Association of Former WHO Staff
On the lighter side

Why, Why, Why

do we press harder on a remote control when we know the batteries are getting dead?
Why do banks charge a fee on “insufficient funds” when they know there is not enough money?
Why does someone believe you when you say there are four billion stars, but check when you say the paint is wet?
Why doesn’t glue stick to the bottle?
Why do they use sterilized needles for death by lethal injection?
Why doesn’t Tarzan have a beard?
Why does Superman stop bullets with his chest, but ducks when you throw a revolver at him?
Why do Kamikaze pilots wear helmets?
Whose idea was it to put an “S” in the word “Lisp”?
Why is it that no matter what colour bubble bath you use the bubbles are always white?
Is there ever a day that mattresses are not on sale?
Why do people constantly return to the refrigerator with hopes that something new to eat will have materialized?
Why do people keep running over a string a dozen times with their vacuum cleaner, then reach down, pick it up, examine it, then put it down to give the vacuum one more chance?
Why is it that no plastic bag will open from the end on your first try?
How do those dead bugs get into those enclosed light fixtures?
Why is it that whenever you attempt to catch something that’s falling off the table you always manage to knock something else over?
In winter why do we try to keep the house as warm as it was in summer when we complained about the heat?
How come you never hear father-in-law jokes?
The statistics on sanity are that one out of every four persons is suffering from some sort of mental illness. Think of your three best friends -- if they’re okay, then it’s you.

CARDIOLOGY

THE CARDIOLOGIST, PUT A BATTERY IN ME: HOW AM I GOING TO DIE NOW?

With me, Doctor, you’ll not have to labour: I’m doing all the work

On right, medicines I don’t tolerate
On left, those with no effect on me

Dr Dufour (ESCUAPEPRO.COM)

GENERAL MEDICINE

This, my dear, is your practitioner’s job!

CARDIOLOGY

GENERAL MEDICINE

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The opinions expressed in this newsletter are those of the authors and not necessarily those of the editor or editorial board.

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Page 16 Association of Former WHO Staff
New trip to Morocco

As announced in QNT no. 65, another trip to Morocco is planned from 4 – 13 March 2007. This ten-day trip, which will complement that organized in April-May this year, will include a visit to the North and terminate in the South.

The itinerary is as follows:

Departure: Saturday 4 March.
Return: 13 March.
Day 01 : Geneva/ Tangier
Day 02 : Tangier/Tetuan/Tangier
Day 03 : Tangier/Chaouen/Al-Hoceima/ Fes
Day 04 : Fes
Day 05 : Fes/Midelt
Day 06 : Midelt/Errachidia/Erfoud
Day 07 : Erfoud/Tinejdad/Tinghir/Gorges of Todgha/Ouarzazate
Day 08 : Ouarzazate /Marrakech.
Day 09 : Marrakech

NB: On day 05, according to the arrival time in Erfoud, continuation on bus to Merzouga to admire the sunset and back to Erfoud; otherwise postponement to day 07 and waking very early and departure to Merzouga to admire the sunrise.

<table>
<thead>
<tr>
<th></th>
<th>20 pax</th>
<th>21 to 25</th>
<th>From 26 to 30 pax</th>
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<tr>
<td>Double room</td>
<td>6500 dhs¹</td>
<td>6390 dhs</td>
<td>6050 dhs</td>
</tr>
<tr>
<td>Single room supplement</td>
<td>1600 dhs²</td>
<td>1600 dhs²</td>
<td>1600 dhs²</td>
</tr>
</tbody>
</table>

1. Approx. 950 CHF  2. approx. 250 CHF

The price per person, half-board, is about CHF 1’550 with the flight from Geneva-Marrakech/ Tangier-Geneva round trip included

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, 3* in Midelt (there is no 4*).
- Half-board in the hotels
- Visits to the monuments,
- An English/French speaking guide.
- Tips in the hotels.

Not included:

- Drinks and extras
- Any expenses outside the programme

Hotels or similar:

- Marrakech : Kenzi Farah 5* www.kenzi-hotels.com
- Ouarzazate : Kenzi Azghor 4* www.kenzi-hotels.com
- Erfoud : El Aï 4* www.hotel-elati.com
- Midelt : El Ayachi bon 3* à travers google.com
- Fès : Menzeh Zalagh 4* www.zalagh-palace.ma
- Tanger : Ramada les Almohades 4* www.ramadainternational.com

I am interested in the trip to Morocco 4 March/13 March

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

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

FIRST ANNOUNCEMENT: In September, a 10 day-journey along the “Romantic Road of Bavaria”, Lake of Constance, castles, monasteries, landscapes, Munich, Salzburg, Nierenberg, etc.etc.

Full details in our next issue!
Joining AFSM / Updating membership

OBVIOUSLY, THIS FORM IS NOT FOR THOSE WHO ARE ALREADY LIFE MEMBERS. It is intended only for those who are not yet members, or are annual members. It is not possible for the Mailing Service to distinguish between about 3,500 persons to whom our newsletter is sent.

Are you still not a member of AFSM? Is it because you don’t like it or what it stands for? Let us know. Or, do you keep forgetting to join? Hope you will become a life member – it costs only 250 CHF – the price of a good meal for two; and you will never again have to remember to pay your dues. Or, you want to give it a try? Then join for a year at 25 CHF – and decide after a year. Fill in the form below and send us your payment.

- I am not yet a member and I want to join
  - as a life member
  - as an annual member

(Please fill in the application form below)

- I am already an annual member and I want
  - to convert into a life member
  - to pay my dues for the current year

Dues can be paid either in cash at the office or through a postal form (add 2 CHF for charges) for persons who live in Switzerland, or by bank transfer to the AFSM account number (+ bank charge, if any):
IBAN: CH 4100279279-D310-2973-1
SWIFT: UBSWCHZH80A

APPLICATION to JOIN

Name ……………………….. First Name…………………………………………….
Address:
Postal Code ………………… Country …………………………………………………
Phone …………… Fax ………… e-mail ………
Date of Birth ………………… Nationality ……………………………………………
Date of separation from WHO ………………… Length of service with WHO ………
Function occupied on separation ……………………………………………………
I should like to receive documentation in □ English □ French
Date…………………………………………………………………….. Signature