WHO will celebrate its 60th Anniversary this year! To mark this occasion the Organization will present its achievements in public health throughout the world over the last 60 years, highlight the impact of its work and show how it will respond to the challenges of the future.

AFSM, within the limits of its modest means, will participate in the events in Geneva. D.C.
Reception on 7 December 2007

Some shots of our 2007 reception which, as usual, was a resounding success.

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Errata  The caption of the photo opposite, taken at the General Assembly (QNT 70, p.8), mistakenly referred to Mrs. Ferrara rather than Mrs. Marie-Léonce Errera, for which we apologize.

Also in QNT 70, page 8, the name of Ms. Coby Sikkens was unfortunately omitted from the list of those who had prepared the report. We apologize to Ms. Sikkens.
A word from the President

Dear friends,

This year, WHO is celebrating its sixtieth anniversary. A number of events will take place, particularly at Headquarters, Geneva. As in the past, our association will take an active part in the celebrations and we are delighted to take this opportunity to strengthen links between former and active staff. Your committee is studying various possibilities in coordination with WHO management and the Staff Association. We shall keep you informed of activities foreseen, and hope that many of you will be able to participate. We have already planned a get together on 14 June and we shall confirm the date as soon as possible.

I take advantage of this issue of Quarterly News to remind you that our secretariat (office 4141, main WHO building) is open every working day of the week, with few exceptions. You are most welcome. Those of our colleagues who wish to join our association are also very welcome. We thank them and wish them a happy retirement.

Roger Fontana

Elections: First announcement

According to the Statutes, the election of a new Executive Committee should take place this year in October. We shall be calling for candidates in the near future and hope many of you will come forward.

FOR WHO’s 60th ANNIVERSARY

The Medical Society of WHO and the International Association for Humanitarian Medicine Brock Chisholm will hold a joint Celebratory Meeting to mark the 60th Anniversary of WHO.

The Conference will take place on World Health Day, 7 April 2008, 2 p.m., Salle C at WHO Headquarters, Geneva

The principal themes of this lecture will be the historical mission of WHO, the right to health, and health ethics

Interested WHO retired staff are cordially welcome.
Information on EMS in the Lac Leman region

Recently one of our colleagues requested our help in urgently finding him a place in a retirement home.

This request drew attention to a gap in our information. We realized that we did not even have a satisfactory list of EMS in the area. The President of AFSM spent many hours in contact with friends of the colleague and arranging visits to try and solve the problem. A survey enabled us to constitute a list of EMS in neighbouring France (Ain and Haute Savoie) and the Swiss cantons of Vaud and Geneva. All this made us wonder how many of our retirees are already thinking of personal solutions to the dilemma of what to do when we cannot take care of ourselves well? Our EMS file can be consulted by AFSM members on Tuesday mornings between 09.30 and 12.30.

AAFI/AFICS Seminar on long-term care on 24 January 2008

On 24 January a meeting on long-term health care, as announced in QNT 70, took place at ILO Headquarters, Geneva. This very successful meeting, which was organized by, inter alia, Roger Eggleston and Gerald Walser was attended by 330 retired staff. It consisted mainly of a review of retirement homes and social-medical homes in Geneva and neighbouring France (EMS), and information on how to access these.

Drinks and refreshments were offered prior to the seminar, which was opened by Dr Halfdan Mahler, former Director General of WHO. The different establishments around Geneva, and in France (Ain and Haute Savoie), were presented by social assistants.

The meeting concluded with a humorous account by Mrs. Angela Butler, former UN staff member, of her life as a resident of an EMS. Throughout the meeting many questions were raised by members of the audience.

Staff Health Insurance

The Staff Health Insurance team at HQ wishes to remind us that retired staff are received by the team between 14h and 16h. We are kindly requested to respect these hours.

Communique from VERF (Voluntary Emergency Relief Fund)

The 2008 VERF Book Sale

which took place on 10 and 11 March raised the extraordinary amount of CHF 13764.-

Our grateful thanks to everyone for once again making the book sale such an unprecedented success. Special thanks to those, including many retired colleagues, who participated in the preparation, classification and sale as well as to those who helped with the logistics. Remaining books have been given to Emmaus Geneva

MANY THANKS TO EVERYONE AND...DO NOT FORGET THE VERF ACCOUNT UBS 0279-D3587161.0
**New lunchtime seminar series for 2008 with Wellcome Trust support**

Since WHO launched its Global Health Histories (GHH) project in late 2004 with the participation of many retired staff, one of its most successful features has been the series of lunchtime seminars held at the Organization’s headquarters in Geneva, Switzerland. The first of these was held in January 2005, when the guest speaker was former Director-General Dr Halldan Mahler.

An audience of more than 150 current or former staff members enthusiastically received his contribution to the inaugural seminar. This was the first real evidence that WHO has a deep and abiding interest in the history not only of the Organization, but of global health in general, and it was a strong endorsement of the GHH initiative.

There have been 17 more successful lunchtime seminars under the GHH banner since then. The speakers have included leading historians from many countries. They have covered a wealth of subjects ranging from child health in Uruguay and cholera in Egypt to tuberculosis in India and HIV/AIDS in Africa. Several have been devoted to primary health care, adding valuable input to the continuing debate on the subject.

Now, the seminar initiative receives a substantial boost with a new series of lectures in 2008, which apart from the inherent value of each presentation, will also be a significant addition to the activities that are being arranged to mark WHO’s 60th anniversary. The new series begins in March; it has been organized on behalf of GHH by Dr Sanjoy Bhattacharya, of the Wellcome Centre. He said: “This series of lectures deals with some of the most important elements of international and global public health. Apart from dealing with the origins of the WHO and some of the early challenges faced by it over time in national and international contexts….”

The new seminars will ensure the Global Health Histories initiative maintains a high profile during 2008, while its work on other aspects continues. These include two books aimed for publication this year. The first is a history of the third decade of WHO, covering the years 1968 – 1977, written by Socrates Litsios, historian and former senior scientist at WHO. The second is a special collection of “public health classics” – landmark health, medical and scientific papers from leading journals across the ages that have been reprinted with modern commentaries in the Bulletin of the World Health Organization.

All former WHO staff are cordially invited to attend any or all of the seminars, which are listed below. Your presence will be a valuable addition to the event. All the seminars will be held in the WHO Library’s main meeting room. Just come to the WHO Library and ask for directions. We hope to see many of you and of course it is always possible to lunch in the WHO cafeteria.

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**Speaker List**

27 March 2008: The United Nations Relief and Rehabilitation Administration (UNRRA) and the ‘world task in public health’ after the Second World War
- **Speaker:** Dr. Jessica Reinisch, Birkbeck College, London, UK

17 April 2008: Who threatens the forests of West and Central Africa? The legacies of climate changes and land use on West African vegetation
- **Speaker:** Prof. James Fairhead, Sussex University, UK

29 May 2008: Marcel Proust and the global history of asthma
- **Speaker:** Prof. Mark Jackson, Exeter University, UK

12 June 2008: A Terminal Case? Cold War Politics and the 1951 Closure of the International Health Division of the Rockefeller Foundation
- **Speaker:** Prof. Paul Weirding, Oxford Brookes University

- **Speaker:** Prof. Daniel Pick, Birkbeck College, London, UK

17 July 2008: Towards a history of psychotherapy
- **Speaker:** Dr. Sonu Shandasani, The Wellcome Trust Centre for the History of Medicine at UCL, UK

18 September 2008: Professionalism and prestige: a British perspective on international nursing organization in the 20th century
- **Speaker:** Prof. Anne Crowther, Glasgow University, UK

2 October 2008: The fruits of a new internationalism: South Asian governments, the WHO and global smallpox eradication
- **Speaker:** Dr. Sanjoy Bhattacharya, The Wellcome Trust Centre for the History of Medicine at UCL, UK

20 November 2008: The rise of the global health consultant: The life and times of Brian Abel-Smith (1926-1996)
- **Speaker:** Dr. Sally Sheard, Liverpool University, UK

- **Speaker:** Dr. Lynette Schumaker, Manchester University, UK, and Dr. Virginia Bond, London School of Hygiene and Tropical Medicine and the ZAMBART Project, University of Zambia

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For additional information, please see the web site at: [http://www.who.int/global_health_histories](http://www.who.int/global_health_histories)
Pascal Diethelm receives “International Tobacco Industry Documents Award”

The Public Health Advocacy Institute, USA, and the University of California, San Francisco Center for Tobacco Control Research and Education are two US based institutions involved in the fight against tobacco. They jointly award a prize - the International Tobacco Industry Documents Award - to mark significant work in documenting tobacco industry practices. Shortly after his early retirement in 2000, Pascal started unearthing documents on the internet to expose Ragnar Rylander\(^1\), who was a professor at the University of Geneva and had been “performing” various researches into the effects of tobacco consumption. In particular he studied passive smoking, and came to the conclusion that it was not harmful. Through dogged internet research Pascal traced that Rylander was being "secretly paid" as a consultant by Philip Morris during all his involvement in research on tobacco, and denounced the scheme as a “scientific fraud without precedent”.

As a response to a lawsuit brought by Rylander, the Geneva court ruled against Pascal and his co-defendant, Dr Jean-Charles Riele (now a member of the Swiss parliament), and levied considerable penalties on them. However, Pascal and his colleague persisted. They brought the case before the Supreme Court of Switzerland and finally succeeded in proving the actual relationship between Rylander and Philip Morris and its fraudulent nature of unprecedented scope. The University of Geneva, which also had earlier exonerated Rylander, reversed its view. As a result, the Commission of Inquiry has proposed to the University to prohibit its staff from soliciting subsidies or consultancies from the tobacco industry. In recognition of the innovative study methods used and the dogged search for the truth, Pascal was awarded the above quoted prize in October 2007. He has, further, contributed to a practical manual to analyse tobacco industry documents, published by WHO in 2004. We wish Pascal all success in his continuing fight against the insidious practices of the tobacco industry.

\[\text{Dev Ray}\]

\[\text{\ref{1} Cf. QNT 69, page 15 (Header Publications)}\]

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\textbf{Aftenposten: (Norway) 7, 10 and 17 January 2008: Brundtland in the news}

The following is based on newspaper articles and does not reflect any opinion of AFSM or its members

Former Prime Minister of Norway and former Director General of WHO, Gro Harlem Brundtland, has long been a formidable figure in Norway and the international arena. She was the head of the long dominant Labour Party. She has been known for her brash and matriarchal style and is no stranger to a fight. She retired in 2003 from WHO and moved to the south of France with her husband.

Gro Harlem Brundtland has been criticized for signing up with a US speakers’ bureau known for charging exorbitant fees for speeches by its celebrity clients and for agreeing to be a paid consultant for Pepsico, even though she has been a fierce opponent of the sugar industry. She angrily rebuffed questions of her involvement with Pepsico when confronted with it during the UN Climate Conference in Bali in December last year. According to her - “Our experience in WHO was that Pepsico was the most positive and active in cooperation when we invited follow-ups to our expert recommendations on new and improved nutrition practice”.

A new public opinion poll in Norway indicates that her image has been tarnished in Norway and 43% of Norwegians said that their confidence in the Labour Party has been weakened. \[\text{D.R.}\]
Malaria and Gates Foundation

Recently, a controversy has appeared\(^1\) re the role of the Gates Foundation in malaria control. The articles have been based on reports published in the New York Times, and while IHT has tried to be neutral about the controversy, the Economist, in following its own bias of catering to the rich and the mighty, has been less generous to the critics of Gates Foundation. The controversy started with an internal memo by WHO’s malaria chief, Arata Kochi, to the DG Margaret Chan. Apparently the memo was circulated to the heads of several health agencies – by who is not clear.

Kochi wrote that many of the malaria scientists are now locked up in a cartel with their own research funding being linked to that of others within the group. Because “each has a vested interest to safeguard the work of the others”, getting independent reviews “is becoming increasingly difficult”. The Gates Foundation has poured about USD 1.2 billion into malaria research since 2000 out of a total of about USD 8 billion for global health. Kochi insists that the Foundation’s massive spending leads to a near-monopoly. There is no doubt that the Foundation’s decision to invest so much in some of the global health problems is to be applauded especially when governments are not investing enough.

However, reliance on high technology and measurable targets, although laudable, can lead to short-sighted measures. For instance the Foundation is proclaiming that the total eradication of malaria is a realistic goal – bringing to mind the malaria eradication efforts of the sixties by WHO. The focus on high profile research also diverts funds from the more mundane health systems development – and although denigrated by the same proponents of such research, leads to devastating shortages of health workers on the ground in many of the developing countries. It is also true that huge amounts of money can lead to “self serving cockiness” as Tadataka Yamada, executive director of the Gates health programme, stated that “we don’t have to choose between one thing and another: we have enough resources to do both”.

An article by Laurie Garrett of the council on Foreign Relations last year laid out similar arguments for massive private sector investments in health.

The close relationship between funds is well exemplified by the recent statements by President Bush when giving funds for bed nets in Tanzania. He quoted the World Bank and the Global Fund as collaborators in malaria control efforts but WHO was absent from any such mention. The recent USD 105 million grant to create an Institute for Health Metrics and Evaluation at the University of Washington is a further example of such sideling – it is directed by Chris Murray who spearheaded a similar effort at WHO under Gro Harlem Brundtland. The big question is whether money will solve the problems of the world or whether a huge investment in the development of society in general will also be needed.

\(^{1}\)(International Herald Tribune-18 Feb, The Economist – 23 Feb)

It’s good to work – but beware of stress!

According to a British study carried out on 10 000 civil servants, a causal link can exist regardless of any predisposition to cardiovascular accident.

It was already known that exposure to stress at work doubled the risk of a cardiovascular accident (“Interheart” study conducted on 50 000 individuals in 52 countries published in 2004 in The Lancet).

A new wide-ranging study (10 308 civil servants over 12 years) undertaken by a group of British research scientists headed by Dr Michael Marmot, Professor of Epidemiology and Public Health (University College, London) and Chair of the WHO Commission on Social Determinants of Health goes further: stress alone can be the origin of heart attacks through the neuro-vegetative system which controls the respiratory, digestive, cardiovascular and endocrinical functions. It thus plays a central rôle in neuro-endocrinical reactions to the phenomenon of stress. The research scientists showed that persons subject to chronic stress have a much higher level of cortisol in the blood in the early morning. The usual risk factors – tobacco, sedentarity etc. - account for only one third in the occurrence of clinical manifestations.

David Cohen

Sources: European Heart Journal, online Journal of the European Society of Cardiology, 23 Jan. 2008; Le Monde, 24 Jan 2008..
Keep your balance!

A recent article by Jane E. Brody in the International Herald Tribune (10 January 2008) says that balance can be improved and proposes exercises. Among the points made in this article:

One normal consequence of ageing is a steady decline in the three main sensory contributors to good balance: vision, proprioceptors on the bottoms of the feet that communicate position information to the brain, and the tiny hairs in the semicircular canals of the inner ear that relay gravity and motion information to the brain. Add to that the loss of muscle strength and flexibility linked to ageing. Vertigo, which may be caused by inner ear infections, low blood pressure, brain injuries, certain medications and some chronic diseases, is loss of balance in the extreme.

But while certain declines with age are unavoidable, physical therapists and fitness specialists have repeatedly proved that much of the sense of balance can be preserved or even restored through exercises that require no special equipment or training. Two main routes improve balance: exercises that increase the strength of the ankle, knee and hip muscles, and exercises that improve the function of the vestibular system, which controls the sense of movement and balance. Start with strength exercises and, as you improve, add vestibular training by doing some of them with closed eyes. A few exercises are suggested:

- stand with feet shoulder-width apart and arms straight out in front. Lift one foot behind, bending the knee at 45 degrees. Hold that position for five seconds or longer, if possible;
- repeat this exercise five times, then switch legs;
- try one-leg stands with your eyes closed,

You can incorporate one-leg stands in daily routines—while on the telephone, brushing your teeth, waiting for a bus, cooking or washing dishes. Other exercises aim at increasing the strength of the ankle, knee and hip muscles. Among them:

- sit straight in a firm chair (don’t lean against the back) with arms crossed. Stand up straight and down again as quickly as you can without using your arms. Repeat the exercise three times and build to ten;
- walking on your toes, then on your heels.

**My warning:** if you decide to try some of these exercises, and depending on your state of health, don’t fall while you are trying to improve your sense of balance! Stay close to a chair or a banister, or even keep hold of a chair or armchair, or stand with your back against a wall, particularly when you exercise with your eyes closed. The article also recommends the slow, continuous movements of tai chi, the Chinese exercise, which has been shown in scientific studies to improve balance and reduce the risks of falls. I would add, why not join a yoga group for persons of 50 or 55 years of age, where several of the typical exercises parallel those recommended in the article.

Yves Beigbeder

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1 The article is based in part on a book by Scott McCredie, health and science writer, “Balance: In Search of the Lost Sense” (Little, Brown Publisher, 2007) and “Fitness over Fifty: An Exercise Guide from the [US] National Institute on Aging”, Hatherleigh Press (2003), which is an illustrated guide for men and women aged fifty and older. It includes safety tips, ways to get and stay motivated, tips on nutrition and healthy eating and more. See also “Age-Defying Fitness” by Marilyn Moffat and Carole Lewis, Peachtree publishers (2006).
The creation in France of a new school of public health (Ecole des Hautes Etudes en Santé Publique (EHSP)) is for AFMS an occasion to rejoice because its director is Antoine FLAHAULT, the son of our colleague and friend, Daniel FLAHAULT.

This project is impressive, ambitious and quite complex. It responds to a need. It should give France a better place in the international scientific leadership in the domain of public health. It will use the competencies of numerous French specialists well recognized in the fields of research, of international cooperation, of expertise and of training. As it is presented it stands a great chance of succeeding if measured by the criteria used in international competition.

The initiators indicate their intent to « Construct a new model to respond to new questions, taking into account the rich heritage of the ex-Ecole Nationale de Santé Publique (Rennes), its exceptional links with the hospital and social services of the country, and to respond to the training requirements of an evolving health administration ».

The preparatory documents indicate four domains « i) training; (ii) international cooperation; (iii Research, (iv) and Expertise, in pedagogical domains, in quality assurance, in institutional financial analysis, in regional health care organization, and in the management of health risks related to the environment ».

Among 18 methodological domains or themes, that the school intends to deal with over the next 10 years, related to training as well as to research, none appears related to the education and training of health personnel.

It is indicated that «Pedagogic Objectives (have been) defined according to recommendations from a centre located in Washington (USA) (Council on Education for Public Health / CEPH affiliated to American Public Health Association) in close collaboration with ASPHER (Association of School of Public Health in the European Region) « in view of accreditation by this centre ».

The initiators expect to « Obtain for France a leadership in this domain, especially within ASPHER, by becoming the first country in continental Europe to participate to a process of accreditation for its school of public health ».

In order to respond to the accreditation requirements, the school intends to have a « very innovative teaching (...) based principally on training for research in teams, laboratory assignments, personalized development, including workshops with European Credit Transfer System labels for selected students in partnership with other graduate schools ».

It remains to be seen if for each domain (informatics, epidemiology, health and environment, health management, social sciences and health policies) the corresponding professional competencies (intellectual competencies, interpersonal communication competencies and eventually sensory-motor competencies), expressing in measurable terms what a candidate to a diploma from the School must demonstrate at the end of her/his studies, will be explicitly defined in order to ensure enough validity to the certification exams (which should all be “open book”) ³.

J-J Guilbert

2 http ://www.ceph.org, « le seul organisme d‘accreditation des écoles de santé publique existant aujourd’hui dans le monde ».
3 With the exception of competencies related to vital emergencies if any exists in public health.
An article\(^1\) on this subject was recently brought to my attention by a (non medical) colleague. It describes a decision taken last December by a US federal agency\(^2\) to shut down, a “safety checklists” program conducted in 2007 by the Johns Hopkins University.

This programme had “insti- tuted in intensive care units (ICU) in Michigan a simple five-step checklist designed to prevent certain hospital infections. It reminds doctors to make sure, for example, that before putting large intrave- nous lines into patients, they actually wash their hands and don a sterile gown and gloves\((…)) The results were stunning. The average ICU cut its infection rate from 4 percent to zero. Over 18 months, the programme saved more than 1500 lives and nearly USD 200 millions\(^3\). My colleague had difficulties in believing that doctors do not wash their hands, with 1500 deaths as a consequence, not to mention the annual 98,000 deaths\(^4\) in the USA and 40,000 in the UK due to preventable medical errors in general.

The federal decision was based on the fact that “by introducing a checklist and tracking down the results without written, informed consent from each patient and health-care provider, scientific ethics regulations had been violated”. The author of the article considers that “the bizarre govern- ment decision” followed “a certain blinkered logic: it could put not only the patients but also the doctors at risk – by exposing how poorly some of them follow basic proce- dures”. My colleague felt that the risk was seriously more important for the patients.

The good news is that there is a WHO programme\(^5\) aiming “to introduce safety checklists worldwide”\((…)) “to ensure that safety steps are actually followed in operating rooms” and including “tracking suc- cesses and failures and learn- ing from them”. In collabora- tion with WHO, one of the patients’ safety programmes of the Geneva University Hospitals, strongly promotes, since 2003, the use of alco- hol-based hand rub among its staff\(^6\).

Let us all hope that the WHO programme will be more suc- cessful than when we failed, in the seventies and the eighties, to ensure period, to o- btain from member states that certification exams granting MD degrees in Member States validly measure (listed) professional competencies and not mainly factual knowledge. “Towards Cer- tified Safe Doctors for All” (before Year 3000) would be a good motto. J-J Guilbert

\(^{1}\) A lifesaving checklist. Dr. A. Gawande. International Herald Tribune – January 9, 2008
\(^{2}\) Office of Human Research Protections (Bethesda Maryland, USA)
\(^{3}\) Clinton, William. Remarks by the President on Health Care, The White House, 7 December 1999
\(^{4}\) WHO “Patient safety solutions” (World Alliance for Patient Safety) (Leotsakosa@who.int)
\(^{5}\) Professor Didier Pittet (didier.pittet@hcuge.ch) / Dr. Pierre Chopard (pierre.chopard@hcuge.ch).

New members

We have pleasure in welcoming the following new members into the large AFSM family and we congratulate them on their decision.

**Life members**

X. AKROFI, Kathryn BOOTH, Anne BUCKLEY, Jacques BURY, Marilyn DI LAURO, Paul LUBIN, Pie MASUMBUKO, Michael O’REAGAN, Rodolfo SARACCI, Elisabeth STUSSI, Dorothy VAN SCHOONEVELD, Claudine SUADEAU, Anna VERSTER.

**Annual members to Life members**: J.M. LOWES, Barbara PUMFREY, Jean BONDET, Valentine EYAKUZE, Parasuramana NARAYANAN, Rolf WEITZEL.

**Annual members**: B.N. AGRAWAL, Basharat JAZBI, Pascale BRUDON, Pierre CARTERET, Ferga EATOUGH, Bernadette GANIMIAN, François GENOUD, Erika HEINZE, Ursula Mary KING, Nubia MUÑOZ, Ramachandra PARARAJASEGARAM, R.H. STRUDWICK.

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1 A lifesaving checklist. Dr. A. Gawande. International Herald Tribune – January 9, 2008
2 Office of Human Research Protections (Bethesda Maryland, USA)
3 Clinton, William. Remarks by the President on Health Care, The White House, 7 December 1999
4 WHO “Patient safety solutions” (World Alliance for Patient Safety) (Leotsakosa@who.int)
5 Professor Didier Pittet (didier.pittet@hcuge.ch) / Dr. Pierre Chopard (pierre.chopard@hcuge.ch).
**Pensions: what is new?**

Some of you might have heard of efforts by the former staff association of ILO to try to reduce the taxes on pensions paid in France and Switzerland. They have obtained a statement from their Administration outlining that the Pension Fund is financed by one-third of contributions by participants on which they have already paid taxes through Staff Assessment. The intention is to request the individual tax authorities to consider whether some of the pension can be treated as annuity from savings. There also have been stories of reducing taxes by about one-third. While not wishing to detract from the efforts of ILO seniors, I feel the effort is shortsighted.

First, these arguments were made in France about two decades ago by the UNESCO staff association, and recently the legal basis of such an appeal was also considered for Switzerland. However, the appellate court in France had rejected the appeal and the lawyers in Geneva felt that there was very little chance of success in Switzerland. Although many countries exempt a portion of the UN pensions on the “annuity” ground (e.g. Germany, now Denmark and others), taxation is a national prerogative and neither France nor Switzerland appear likely to follow the example of other countries.

Secondly, the plea of ILO seniors for other pensioners to request similar declarations from their Administrations also does not seem promising. The respective Administrations may not wish to provide such statements and, also, how are the different tax officers supposed to react to such statements? Either they will just file them away or refer them higher up. The danger is that this may antagonize some of the tax people without getting any benefit.

The desirable course of action would be to request the respective Administrations to send a joint (or separate) statement to the Permanent Missions of the countries in Geneva and see what effect it would have. But for the time being, the effort by ILO former staff seems unlikely to succeed.

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**The oil-for-food programme: who was guilty?**

The Oil-for-Food Programme, established by the United Nations in 1995 and terminated in 2003 was intended to allow Iraq to sell oil on the world market in exchange for food, medicine, and other humanitarian needs for ordinary Iraqi citizens without allowing Iraq to rebuild its military. Throughout its existence, the programme was dogged by accusations that some of its profits were unlawfully diverted to the government of Iraq and to UN officials. The UN was accused, in particularly by US conservative circles, of widespread corruption. The affair threatened to discredit the whole UN system and almost brought down Kofi Annan, the former UN Secretary-General.

In its final report in October 2005, the committee of inquiry, headed by Paul Volcker, former chairman of America’s Federal Reserve, found that 2,253 firms, including major ones, had made illegal payments totalling $1.8 billion to the Saddam Hussein regime, less than 2% of the total value of all transactions. According to The Economist (15 March 2008), most of the malefactors have been businessmen and a few politicians and diplomats from many countries, not UN staff members. So far, only two UN officials have been charged with oil-for-food offences. For the periodical, “the real culprits at the UN were not its officials, but the Security Council whose five permanent members invented a scheme that was wide open to abuse but who failed to impose the necessary safeguards”.

Yves Beigbeder
The international Geneva Forum: Towards Global Access to Health is organized in partnership with the major international organizations active in health in Geneva, Switzerland, and around the world. The upcoming event, which focuses specifically on ‘Strengthening Health Systems and the Global Health Workforce’ will take place at the International Conference Centre of Geneva, Switzerland, from 25 to 28 May 2008, immediately following the WHO General Assembly.

Why the Geneva Health Forum?

- The Forum responds to the need to address ‘Global Access to Health’ on a regular basis in an international setting
- Emphasis is placed on giving an equal voice to all actors in the field of global access to health, including the private sector and civil society, as well as the development sector (multi-sector approach)
- Particular attention is given to linking policy to practice and vice versa, providing a think-tank for concrete and adapted solutions
- Independence from any single organization allows for neutrality and freedom in the programme
- Special effort is exerted to sponsor participants from low-income and lower-middle-income countries to join the Forum (NB: the first edition sponsored 63 delegates, the second edition aims for a minimum of 100)
- The ‘Marketplace’ of the Forum offers a fertile ground for networking (NB: the first edition included 47 organizations, the second edition will double the surface area)

The Geneva Health Forum has clearly demonstrated its potential for becoming the European and international platform for all major actors in global access to health to meet regularly and for becoming a mobilizing force for the promotion of global access to health, due to its location in Geneva (deemed the ‘world capital of health’) and since no other international event of this kind is held in Europe. Focusing on innovation, the Forum places special emphasis on new approaches and on new perspectives on improving global access to health. The Geneva Health Forum incarnates the spirit of a multi-stakeholder approach to solving problems in global access to health and stands firmly by its policy of having all actors participate in the Forum on equal footing.

The 2008 Forum (Strengthening Health Systems and the Global Health Workforce) in particular aims to convey the following key messages:

- Access to health is a global issue: local initiatives can provide models for global tools.
- All actors have a role to play in strengthening health systems. It is necessary to empower these actors within their respective fields.
- Caregivers and medical professionals are key actors who form the bridge between policy and practice in order to decrease fragmentation and inefficiency of healthcare.
- Information technology is bringing about a generation of self-informed patients, who contribute to changing health systems, and their impact on health systems must be assessed, followed by appropriate changes.
- In the current context of globalization and extreme mobility, training of health workers is more complex than ever and we have to stop training for the past.

AFSM members can book for online www.genevahealthforum.org or at the Forum at a special price of CHF 165.- for the three days and the opening ceremony (collective price arranged between Geneva Health Forum and AFSM).
On the lighter side

A fairy said to a married couple: as you have been such an exemplary couple for 25 years, I shall grant each of you a wish. The wife said: I should like to go round the world with my beloved husband. The fairy waved her magic wand and, abracadabra, airtickets appeared in the hand of the wife.

Then it was the turn of the husband: euh...that would be very romantic, but an opportunity like this only occurs once in a lifetime. So, I am so sorry my darling but I should like to have a wife 30 years younger than I am.

The wife was terribly disappointed but a wish is a wish. The fairy made a circle with her magic wand – abracadabra.

Suddenly the husband was 90 years old! Men are perhaps sons of bitches, but fairies are women!

The Peach Perspective

Hello! My name is Peach and I belong to a former WHO staff and member of AFSM. The tyrannical editor of the QNT has recruited me to write an amusing column which is not sexist, racist or ageist or off-color or too “scientific” (in other words mind numbingly boring). It seems that none of the humans on the QNT editorial staff are capable of doing this so it falls to me. From the refreshingly new perspective of a cat, I have to say that I cannot understand all this fuss about an active retirement. If I have torn another strip off the living room sofa, shed cat hair on all the surfaces in the apartment and snarled at a few birds through the window, I feel I have put in a good day’s work and deserve to settle down for a six-hour nap. I do not feel compelled like my owner does to rush around eating five different fruits or vegetables (red, light green, yellow, orange and dark green) drink a litre of water and wander aimlessly around the countryside getting exercise.

So here is the news from Geneva, my hometown. Yesterday, February 19 the first leaf appeared on the official chestnut tree on the La Treille esplanade. This event has been recorded every year since 1929; it is the first welcome sign of spring. On February 24, people in Geneva will vote on banning cigarettes, dangerous dogs and airplane noise—I have no use for any of these, so I hope they pass.

I went in to the WHO headquarters with my owner the other day. The AFSM office 4141 was buzzing with activity as usual. Next time your owner goes to WHO, do go along. The AFSM treasurer is particularly fond of animals so if you see him, don’t hesitate to jump up on his lap and give his face a good lick. The WHO building is very animal friendly these days. Pets receive a courtesy badge and they can roam the halls at will. Personally I think many of the humans working there could use some help. It is a good idea to keep a sharp eye out, however, as there are rumors that domestic animals of WHO staff are being outsourced (whatever that means) to Kuala Lumpur. I don’t think a tropical climate would suit me.

If you like my column do send me some fan mail; include a photo and a few lines about your life as the pet of a WHO retired staff and you may appear in the QNT. You may even make the color spread.

So long, and remember: stay relaxed and don’t let your owner forget who is the boss.

Peach
Publication


The book contains a description of 129 productive lives in medical science, age 65 and more. It is meant to encourage the author’s statistical colleagues to look at the problem of wasted intellectual talent due to enforced retirement. Among the short selected biographies:

- Albert Schweitzer (France), physician, theologian, philosopher and organ player, who created and ran the Lambaréné hospital against great odds, received the Nobel Peace Prize for 1952.

- Joseph Rotblat (UK), the physicist who worked on the atomic bomb, then morally opposed its continuation. In 1955, he was a cosignatory of the Russell-Einstein manifesto against nuclear war, which resulted in the founding, in Canada, of the International Pugwash Conference on Science and World Affairs, of which he was its first Secretary-General, and later President-Emeritus. In 1995, he received, in his 80s, the Nobel Prize for Peace.

- Others listed in the book were also awarded Nobel Prizes:

  in physics, W. C. Röntgen (Germany) in 1901; in Physiology or Medicine: I. P. Pavlov (USSR) in 1904, Sir Frederick Hopkins (UK) in 1929, Sir Charles Scott Sherrington (UK) together with Edgar Douglas Adrian (UK) in 1932.

- Frances Kelsey (Canada/USA) who resisted mounting pressures from a pharmaceutical company seeking to import into the USA Germany’s popular “sleeping pill”, thalidomide. The drug was later found to have caused serious body defects in babies whose mothers had ingested the drug. Thanks to her stamina and courage, the drug never reached the American market.

*The author, Professor Gibson, created the Department of the History of Medicine at the University of British Columbia, and the Woodward Memorial Library. Our former WHO colleague and friend, S.W.A Gunn, now President of the International Association for Humanitarian Medicine Brock Chisholm, has written the book’s Foreword. Yves Beigbeder*

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Security in airports

Many big cities are already equipped; a “body scanner” that can look under the dresses and clothes. After Amsterdam and London, Zurich airport will soon be equipped with this latest technology against terrorism – according to “Tages Anzeiger”. These white cabins, costing 12,000 francs apiece, can see through the clothes of passengers and detect arms or explosives. Compared to X rays, these frequencies are harmless - sand can detect plastic or ceramic. In the USA, defenders of civil liberties are worried about the use of such intrusive equipment. But the manufacturers and the airport management and security claim that this equipment puts all passengers on the same footing. Targeted searches depending on looks of passengers will end as well as the unwelcome physical body searches; however, the security personnel will have some amusement.

*Le Matin Bleu, 20 février 2008*

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Our friend Rajindar Pal informs us that he has just been registered in the list “TOP 100 Scientists”, a kind of Scientists’ Who’s who.

We forward him our warmest wis
In memoriam

Dr Hilary Owen Meredith King, M.D., D.Sc. 31.07.1949 – 13.10.2007
Senior Medical Officer Responsible for Diabetes Programme, WHO, Geneva

Hilary was born in Yorkshire, U.K., in July 1949. As a boy he developed a great interest in the natural world. He was a young explorer of nature and particularly keen on birds of prey. He kept falcons later in his life. Going to remote and wild places of the world and later seeing traditional styles of living fascinated Hilary. In his youth he hitch-hiked alone to Scotland, St.Kilda and Shetland Islands and took opportunities to travel to Africa and South America as a member of adventurous and scientific expeditions.

Hilary began studying medicine in King’s College Medical School, London, but graduated in Medicine from the University of Adelaide (1978). He left Britain in 1974 for Papua New Guinea where he worked as a research assistant. His first article concerning Kuru was published in The Lancet in 1975.

Hilary practiced medicine subsequently in Australia, Papua New Guinea and the Falkland Islands. He undertook postgraduate studies on epidemiology in London (1981). Then he returned to Australia to conduct medical research projects in Asia and the Pacific Islands. In 1986-87 he worked in the Australian National Antarctic Research Expedition, twice sailing to Antarctica.

In 1987 Hilary joined WHO at headquarters, where he ran the Programme on Diabetes Mellitus until 2003. Hilary succeeded in increasing awareness of diabetes worldwide and made a considerable impact on the knowledge of its epidemiology. He contributed much to the development of National Programmes on Diabetes particularly in developing countries. He conducted diabetes field surveys and trained medical teams in Pakistan, Uzbekistan, Mongolia etc. He taught and inspired young epidemiologists in seminars in Cambridge, U.K. Hilary was awarded the Harold Rifkin Medal for distinguished international service, 1995; and elected Honorary Life Member by the International Diabetes Federation in 1997.

In retirement, Hilary remained passionately engaged in his last professional project on Diabetes in Cambodia. For many years he devoted his artistic talent to environmental photography, preparing 3 photo albums for publication. He planned to visit the Arctic in 2008. The depth of his knowledge of a wide range of interests from ornithology, biology to horology, antiques, art, ethnography and anthropology was impressive. Hilary was married twice and raised two children. A globally thinking person with an independent mind and a free spirit, humble, sensitive and compassionate, Hilary was loved and admired by many people around the world.

Dr Elena King-Gulyaeva

Deaths recently notified to us

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<tr>
<th>Name</th>
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<tr>
<td>Louis Anahi ATAYI</td>
<td>5 January 2008</td>
<td>22 February 2008</td>
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<td>Xavier BONNEFOY</td>
<td>18 November 2007</td>
<td>16 February 2008</td>
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<td>Pierre CLÉMENT</td>
<td>19 December 2007</td>
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<td>Sadanand GROVER</td>
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<td>Carole WILLIAMS</td>
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Readers' Corner

NEWS OF THE ASSOCIATION OF FORMER WHO STAFF IN THE SOUTH-EAST ASIA REGION

Dear AFSM Friends,

When I was in New Delhi this autumn, the President of AFSM (SEARO), Mr H. S. Dhillon, invited me to a luncheon get-together of members of the Association held on Sunday 18 November 2007 in WHO SEARO at the World Health House. The event was very well attended so that I had the welcome opportunity to meet many colleagues and friends. I was also given a tour of the new AFSM (SEARO) office and its facilities, which were recently provided to the Association by SEARO.

After lunch Mr Dhillon and the assembled members expressed their thanks to me and to AFSM in Geneva for the tremendous effort we made to help to get the new office. I responded with warm greetings, congratulations, encouragement and best wishes for the future of AFSM (SEARO).

R. Pal

Here is a very kind letter from Dr W. Barton, Nairobi, whom everybody here remembers:

Dear Dr Cohen, QNT 70 reached me early this year, which gladdened my spirit. Regrettably Kenya, my birthplace, whither my wife and I finally retired in 2003, was in the grip of a post election crisis which rather distracted our peace for personal correspondence. Fortunately the Country is slowly in the process of recovery, thanks largely to the untiring efforts of our former Secretary General, Kofi Annan, and we can start to catch up with our mail.

Thank you and your editorial colleagues for the wonderful edition; with its appropriate cartoon on the front page, its wonderful collection of photographs and its comprehensive cover of news. It truly brought the joy of recollection of those happy days and above all of the friendships shared while in service in HQ.

The cartoon; yes I have grown old! I suddenly realized that next month I will celebrate my 85 birthday and with it the realization that it will be 25 years since I retired. Blimey! How time does fly. Your collection of photos included so many with whom I served in HQ. May I name a few wondering if they recall me? Ingar Bruggemann, Rosemary Bell, J Kilker, R (Roger?) Fontana, Tamas Fulop, Warren Furth, Stan Flache, J-J Guilbert, Daniel Flahault and my close colleague in Pers, Yves Beigbeder. Your text also brought back the memory of Sam Moday, Neel Mani, and Jean-Paul Menu.

The two lovely articles on the 'Congo' in the 1960s recalling the names of Arnaud, Bellerive, Daniel Flahaut and J-J Guilbert himself. I was ADMS Zanzibar at the time and remember reading of the WHO's first really wonderful field operation.

I couldn't close this letter of thanks without appreciation for Sami Moday's eulogy on Maurice Piot and PSA. I recall it was Dr Mahler who was picked by Dr Candau to develop the concept. I always felt very privileged to be included in his panel of three, which included Prof Maurice Schaffer of UNC a Swedish I.T. expert to join his team on a retreat to Ferney Voltaire to review with his team the concept. Maurice became Chief of the Project and as I write, many names rush into mind of those associated with the early development and later great success of PSA; Soco Litsios, Steve Sapire, James Potts, Peter Schletter, John Bainbridge and there must be many others. Funny how we are able to recover such moments of happy memory! Thank you for that eulogy of Maurice, for it brought back happy memories and allowed me to share in the sadness of the loss of 3 an old friend and great servant of WHO.

Surely there must be a history of PSA and of the lead it gave to the future of programme management.

I enclose a photo to share with the few who might remember me!

Again congratulations on QNT

RED: You can be assured, dear Dr Barton, that all your friends here will be happy to hear from you.

“...However, I would be pleased if you would continue sending me your excellent Quarterly News”

Carl Krummel
Joining AFSM – Updating membership

**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.*

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 – 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 ............................... City .............. Country ..........................................................

Phone ............ Fax ....................... e-mail ..........

Date of Birth ......................... Nationality ..........................................................

Date of separation from WHO ..................... Length of service with WHO ...........................

Function occupied on separation ..........................................................

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I should like to receive documentation in □ English □ French

Date .......................................................... Signature