Informed opinion and active co-operation on the part of the public are of the utmost importance in the improvement of the health of the people (WHO, Basic Documents, 47th Edition, 2009)

Stone arrangements about refugees from the Syrian artist Nizar Ali Badr (Jabl Safoon)
Poems and paintings from our colleague and friend Kalula

Root woman
Woman from here and there
Age-old guardian
of the harmonious pact
between the gods and evil djinns
of paradoxical fate
woven with esteem and abuse
whose torn soul floats serenely
between
the celestial stars of a lost paradise
and
the deep waters
of a sunken world.

Root woman
Woman from here and there
From thy fiery loins
bogged down
in outdated royal blood
spring up intermingled words,
gestures and breaths
of shredded dreams and hopes
of frozen feet.

Root woman
Woman from here and there
Princess of charm enveloped
in the multi-coloured chador
which the fury of the Elements
strives to tear off you in vain
before scattering in the vast quicksands
which change at the whim
of the treacherous shifting dunes.

Translated from French by Sue Block Tyrrell
EDITORIAL

Currently we are going through a trying period. First, a new integrated software is being introduced by the Pension Fund in New York and although current pensioners are not suffering, new retirees have seen their first pensions delayed by five to six months. They have not obtained any advance nor any warning before they retired. (see p 17).

Our current membership has about 8% annual members and the rest are life members. We are actively considering abolishing annual membership. The reasons are that it involves considerable extra work for our Treasurer who has to send out reminders every year and answer questions of how much members have paid in the past. Moreover, the banks in Switzerland have increased their charges and now it costs a considerable sum to credit amounts. In cases when annual members send us cheques in USD or Euros, the charges can be more than the amount of the cheque. If you have strong feelings, please let us know your views since we shall probably act on this soon.

We continue to provide service to our members – whether called for or not. For instance, collaboration between the retiree representatives to SHI and SHI staff to ensure that those whose pensions are delayed can continue to benefit from SHI coverage even though their SHI contributions have been held up.

Despite the services we try to provide, we find very few volunteers among newly retired staff to help us.

In October this year, you will have to elect the new Executive Committee. You will soon receive details and a call for candidates. As we have said many times, our Committee has to be rejuvenated. So, we expect a maximum number of candidates. Even after the elections, you may be co-opted, according to our Statutes.

DC
Alternative medicines

"Acupuncture, auriculotherapy, homeopathy, hypnosis, sophrology, to name just those most commonly practiced, the traditional, alternative and complementary medicines are gradually making their way into hospitals. This is an undeniable social, cultural and economic reality." In contrast to 'conventional' western medicine, which is scientifically verifiable, the approaches generally opposed to it include homeopathy, traditional medicines, unconventional therapies, as well as alternative and complementary medicines.

**Non-allopathic medicine**, often originating from societal practices, comprises a heterogeneous group, but the majority of the practices aim to be holistic, meaning that they consider the patient as a whole, physically, mentally and environmentally, whereas conventional western medicine focuses on the diseased organ.

Semi-official instruction exists in hospitals for some of these practices, although they are not (or not yet) recognized to be separate medical specialties, and health insurance companies are starting to provide coverage for some of them.

The alternative and complementary therapies have at the same time some success but also provoke some distrust in as much as they are not always recognized legally and can lead to derivatives that may be more or less dangerous.

Why do people turn to the parallel forms of treatment? Most often, because of disappointment with conventional medicine; absence of adverse side effects; dealing with the entire body and not just the affected part; they are «natural», an important consideration in the polluted world in which we live.

The people who use alternative therapies are convinced of their efficacy and usefulness, particularly when conventional medicine is unable to cure them.

How many such therapies are there? They are extremely numerous and only a few of the best known are listed here:

**ACUPRESSION**: Consisting of gentle but deep pressure of the fingers on precise points, which helps to relax the muscles or relieve chronic muscular tension.

**ACUPUNCTURE**: Natural therapy which is part of Chinese traditional medicine and which consists of the insertion of fine needles at precise points in the body following the meridian system.

**AROMATHERAPY**: Use of essential vegetable oils which reduce pain, increase well-being, stimulate or relax the body, etc.

**AURICULOTHERAPY**: Therapy derived from acupuncture based on the fact that a map of the body exists on the auricle of the ear.

**AYURVEDA**: Indian holistic medicine concerning longevity and health, proposing long lasting well-being in individual, family and social life. It aims to return the person to his/her physical and spiritual milieu. Based on a dietetic approach, the treatment consists of herbs and meditation for the prevention of disease and cure of pain, and the re-establishment of physiological equilibrium.

**CHIROPRACTIC**: A manual approach promoting maintenance of human health by diagnosis, treatment and prevention of functional deficiencies. It focuses on integrity of the nervous system in relation to all the other systems of the human body, whether healthy or not, with particular attention to the vertebral column.

**HOMEOPATHY**: Alternative medicine that treats patients with small doses of highly diluted substances which can reproduce the symptoms of the treated disease in a healthy person.

**HYDROTHERAPY**: Return to fitness by therapeutic use of the physical and chemical properties of water with or without stimulating or relaxing products.

**HYPNOSIS**: A state of altered consciousness induced by suggestion, allowing the unconscious person to liberate his/herself from hindrances and obstacles impeding the conscious state, and in order to function autonomously.

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1. Sources: www.WHO.int; www.hopital.fr/Medecines-alternatives-et-complementaires#sthash.XYM6FGMm.dpuf; www.snf.ch/fr/ and many other sites
2. Some of the practices and therapies mentioned in this article are reimbursable by the WHO Staff Health Insurance. Please refer to the January 2016 edition of the WHO Staff Health Insurance Rules. In case of doubt, it is essential to ask for advice from SHI before starting treatment.
Alternative medicines

MAGNETISM: Application of magnets on the body to soothe pain and treat health problems. This therapy is based on control of the field of energy (aura) which encircles the body.

NATURAL MEDICINE: The range of therapies based on natural remedies such as nutrition, lifestyle, phytotherapy, massage, etc..., the aim being to re-equilibrate the function of the organism by means of a good quality of life and a healthy environment.

TRADITIONAL CHINESE MEDICINE: An approach based on the principle that the human being belongs to a universe and which aims to achieve good circulation of energy (le Qi).

MESOTHERAPY: Micro-injection, given superficially by intradermal and subcutaneous injection, of small quantities of conventional medicines, at the site of pain or other problem. This reduces the percentage of side effects that may occur following absorption of the medicines by the oral route.

PILATES METHOD: Physical exercise system designed to improve muscular performance, combining the philosophies of western exercise (muscular) with the oriental (bodily control and flexibility).

MUSICOTHERAPY: Use of music as a basic therapeutic tool, to recover, maintain or improve a person’s mental, physical and emotional health.

OSTEOPATHY: A manual approach based on the fact that every mechanical disturbance of the body (alteration of the mobility of the bones or viscera) leads to consequences for its general functioning. The manipulation of the body by the practitioner favours self-cure.

PHOTOTHERAPY: Treatment for seasonal emotional problems based on exposure, longer or shorter, to bright light.

PHYTOTHERAPY: Use of medicinal plants, in their entirety, for their therapeutic properties.

REFLEXOLOGY: Manual therapy acting by pressure on specific points on the feet (map of the body), aiming to liberate the energy canals linked to the organs/muscles.

SHIATSU: A holistic energy approach based on the practice of traditional Chinese medicine. The thumbs and palms of the hands are used to put pressure on certain parts of the body along the meridians in order to stimulate and rebalance the circulation of the body’s energy. This also includes techniques of stretching, oscillation and mobilization based on the power of the body to self-cure.

SOPHROLOGY: An approach concerning harmony and awareness with as objective the full expression of the person and the positive transformation of his/her existence with the help of different psychosomatic techniques (such as suggestion, yoga, zen…).

TAI CHI CHUAN: A Chinese martial art which focuses on the development of supple and dynamic force, rather than pure physical force.

YOGA: A Hindu discipline promoting the union of individual consciousness with universal consciousness. It allows the full physical and psychic expression of a person, based on exercises for respiration, breath control and specific postures.

ZEN: Meditation and philosophy leading to personal fulfillment.

As we see, there is no shortage of such methods; it is difficult to evaluate their efficacy, for which one can only be based on the subjective reaction of the patient, with the placebo effect certainly playing an important role. But is not the satisfaction of the patient what is being sought?

It is however essential to take care:

1. Not to fall into the hands of charlatans
2. Not to miss the presence of a serious condition, and above all not to believe that any of these therapies can cure cancers or other serious diseases. It is therefore advisable, before using any of the alternative/complementary therapies, to make sure that there is no underlying serious condition. In this case, they could help to relieve the patient, not to cure him/her.
News from WHO

Executive Board – 138th Session

The Board met from 25-30 January 2016. More than 1,100 participants were registered to discuss the 55 agenda items with 700 pages of documents. In her opening address, Dr Margaret Chan provided an update on the Ebola situation in West Africa, expressing her confidence that no-one would let this virus take off and run away again. She described the new emergency programme that transforms the way WHO responds to outbreaks and humanitarian crises. She also discussed the implications for health of the Sustainable Development Goals and several major crises that threaten health worldwide. The main topics at the EB focused on WHO reform; noncommunicable diseases; promoting health through the life-course; preparedness, surveillance and response; communicable diseases; health systems; financial, management, legal and staffing matters. Recommendations were made to the World Health Assembly to adopt resolutions on:

- addressing the burden of mycetoma
- strengthening integrated, people-centred health services
- WHO global plan of action to strengthen the role of the health system within a national multisectoral response to address interpersonal violence, in particular against women and girls, and against children
- prevention and control of noncommunicable diseases: responses to specific assignments in preparation for the third High-level Meeting of the UN General Assembly on the Prevention and Control of Non-communicable diseases in 2018
- strengthening essential public health functions in support of the achievement of universal health coverage.

On 30 January, the Director-General and Regional Directors issued a statement on their commitment to the transformation of WHO’s work in outbreaks and health emergencies, through the establishment of one single programme, with one budget, one workforce, one set of rules and processes and, above all, one clear line of authority. A detailed structure of the new programme and roll-out plan is under development with concrete actions according to a monthly timeline. A more detailed report is being prepared for input by EB members, for transmission to the World Health Assembly in May.

On 28 January, Dr Chan briefed the EB on the Zika situation and on 1 February the first meeting was convened of the Emergency Committee on Zika virus under the International Health Regulations. The Committee met by teleconference, assessed the level of threat and agreed that the situation met the conditions for a Public Health Emergency of International Concern. A first situation report was released early February. A second meeting of the Emergency Committee was held on 8 March. Substantial new research has provided increasing evidence of a causal relationship between Zika virus and the occurrence of foetal malformations and neurological disorders. Evidence also suggests that sexual transmission of the virus is more common than previously assumed. The Committee made recommendations on surveillance, vector control, risk communication, clinical care, travel measures for pregnant women, research and product development.

Highlights of other news

- On 8 December, WHO launched a new report of global health trends since 2000 and an assessment of the challenges ahead to reach the health targets in the Sustainable Development Goals (SDGs) which came into effect on 1 January 2016 – “Health in 2015: from MDGs to SDGs”
- WHO’s 2015 health highlights are on the WHO website in the Year in Review 2015
- On 15 January, WHO reported on the historic low number of guinea worm cases: 22 in 2015, compared to 3.5 million in 1986
- On 22 January, WHO published revised onchocerciasis guidelines for countries as they approach elimination targets
- On 11 February, WHO launched a global survey to gather views on the most necessary and useful assistive technologies for the elderly and disabled: the survey – available on the WHO website in an impressive 50+ languages – will feed into the first ever WHO mandated list of essential assistive technologies
- WHO continues to deliver medicines, medical supplies and vaccines to hard-to-reach areas in Syria
- This year’s World Health Day in April focuses on diabetes: the main goals of the campaign are to increase awareness, trigger actions to tackle the disease and launch the first Global report on diabetes
By 1988, GPA had established projects in over 100 countries increasing from three to over 100 million, with staff at headquarters increasing from three to over 100. From 1987 to 1990, voluntary funding rose from around $18 million to 100 million, with staff at headquarters increasing from three to over 100. By 1988, GPA had established projects in over 100 countries, with the development of national AIDS strategies.

Jonathan believed that AIDS was not only a medical or scientific phenomenon, but also a social issue. He worked against discrimination against persons with HIV/AIDS who were refused employment, insurance, travel and immigration. He understood that infringement of rights caused by poverty and exclusion made people more vulnerable to the disease. The Programme’s global strategy was unprecedented in international public health in that it specifically incorporated human rights principles. It engaged non-traditional partners – sex workers, homosexuals and drug users – to work with government officials and WHO staff in the Programme.

The priority given to HIV/AIDS within WHO, the funds given to the programme, his inclusion of human rights and his unorthodox practices brought Jonathan into conflict with Dr H. Nakajima who had succeeded Mahler as Director-General in 1988, and probably with rivals in the organization. Nakajima felt that the disease had been given too high a profile, at the expense of malaria, a bigger killer at the time – estimated mortality due to malaria was estimated at 584,000 in 2013 as against 1.5 million from AIDS. Jonathan’s public profile was lowered, the emphasis on human rights was reduced and adminis
Public Health Leaders in WHO (2)

In the three years since Jonathan Mann died, many have talked about his important contributions to public health. Jonathan was a tireless advocate for the rights of patients infected with Human Immunodeficiency Virus (HIV), a bold, compassionate man, an exceptional leader of the World Health Organization, a gifted teacher, and the Director-General of WHO for a period of intense crisis. Who are the people who are competent, hard-working and obtain results in their field. Most of them do not achieve public fame, and many probably do not seek it. Achieving public fame may be a target for attacks by governments, and internal rivals. Being considered a rival by the head of a UN secretariat may be fatal to the famous official’s career. In recent times, Sergio Vieira de Mello remains perhaps as the best known example of an outstanding UN peacekeeper, diplomat, and humanitarian figure still remembered in UN and human rights circles, after his death in Baghdad on 19 August 2003 with twenty-one other victims.

Both DA Henderson and Jonathan Mann showed exceptional technical competence in their work. Their programmes had important public health relevance giving them priority over other competing programmes. They gave an expectation of achievable results within a set period. They were important to both industrial and developing countries, an essential element for obtaining the support of governing bodies. They both had a strong personality, leadership skills, dedication to their work and determination to override technical, operational and bureaucratic obstacles. At key points, they took risks in breaking rules and overcoming hierarchical hurdles.

They both needed the Director-General’s support: when Dr Nakajima decided to change the priority previously given to AIDS, Jonathan Mann had no option but to leave WHO.

Yves Beigbeder

Edith Bernard, secretary to Jonathan Mann, kindly provided us with documents about him from which we have taken information for this article: they showed the lack of support given to him for such an important health problem.


Gostin Lawrence

“….I wandered into a cluttered and cramped office ‘filled with unopened boxes and scattered papers Jonathan Mann and a competent Swiss’ secretary Edith Bernard had just moved in. Together they alone constituted the ‘WHO team that: would mobilize the global effort against an emerging plague—the acquired immunodeficiency syndrome (AIDS) Jonathan had recently come from Kinshasa where he led Projet SIDA, an innovative international program to reduce the already weighty burden of the human Immunodeficiency virus (HIV) in Africa. Jonathan had a disarming absorbing smile. an indefatigable personality and penetrating eyes that revealed an inner determination to prevail against enormous odds I recall wondering how it would be possible even for a person with Jonathan's heart and skills, to place, a check on the seemingly relentless course of the AIDS pandemic. I left Geneva several days later, returning to Harvard where I watched Jonathan build the WHO Global Programme on AIDS (GPA) into the largest program in the history of WHO in just four years GPA

1 Edith Bernard corrected into: « French ».
Jonathan Mann (continued)
employed 280 people with a USD109 million annual budget. More than money, Jonathan developed a cadre of loyal professionals who then and now have become global leaders in the AIDS pandemic: Jim Chin, Jose Esparza, David Heymann

Tribune de Genève: “Two people will not be too much, at the Office of communicable diseases, to, ..... carry out the wide international programme of action...”

From an anonymous source, dedicated to enthusiastic movers and path finders in support of implementation of the GPA workplan

Whatever the entire world may say, We genuinely try To do our work in GPA My little red book and I. Up it goes, from boss to boss, I hope that they’ll be kind; If my views have come across, The memo will be signed.

Alas, there’s always a delay, The system is unique, The fax that should have left today, Won’t leave until next week! We’ll never know the reason why, My little red book and I

GPA: Global Programme on AIDS

In the last issue of the QNT we informed you that you would soon be receiving several documents concerning SHI. We hope that all retired staff have now received them in English, French or Spanish as the case may be. In particular, please read carefully the SHI Newsletter. It contains important information allowing you to benefit from our Insurance. The improvements particularly concern reimbursement of dental care, optical costs, and direct payments.

Some of you have indicated difficulty in consulting the extranet site of the Health Insurance for retired staff. As indicated in the SHI Newsletter, it is essential to recopy the address https://extranet.who.int, then select “SHI retiree”, which is the user ID and password. SHI confirms that a new internet site is under preparation. It will be easier to access and will offer possibilities of advanced searching.

Lastly, the Global Standing Committee (GSC) now deals with all legal cases, including those submitted until now to the regional surveillance committees, which have just been abolished. One exception has been made for the Region of the Americas, whose cases will be treated by a sub-committee of the GSC in Washington.

For those who live in the Geneva area, SHI advises you to obtain your medication in neighbouring France and to ask for the generic preparation. Everyone will be a winner! Don’t forget to give your e-mail address to SHI if you haven’t already done so.

Possible visit to CERN

Would any readers be interested in a guided tour of CERN? Most likely one afternoon in early September. The visit would last about three hours.

If you are interested, please send an email to the AFSM – aoms@who.int, marked for the attention of Sue Block Tyrrell, or send us a letter to office 4141, WHO, avenue Appia, 1211 Geneva 27, before the end of May. Kindly also indicate whether you would prefer to have an anglophone or a francophone guide.

Sue Block Tyrrell
In the Geneva area

The 21st Solidarity Fair was held on 9 December 2015 to help replenish the Solidarity Fund, set up in 1995 after the Reduction in Force exercise, to help staff in emergencies and difficult situations. Since then, thousands of francs have been distributed either as grants or interest-free loans to our colleagues and to other charitable causes.

Many humanitarian associations participated with stalls selling food from around the world, arts and crafts, the usual bake sale and there were musicians to entertain us. The AFSM was pleased to continue to organize its now traditional tombola, helped by Dev Ray and Sue Block Tyrrell. We provided two prizes of Italian confectionery and raised the amount of CHF 526, just below our 2014 record of CHF 550, which has been donated to the Solidarity Fund. Two active staff won the prizes – Kathrin Bruchmann from the Human Resources Department and Sue Piccolo in the Ebola Virus Outbreak Response team.

We are pleased to continue to support this event to demonstrate our solidarity with the staff and the Fund. It also provides a good opportunity for us to promote our Association. Several people asked for information and/or took documentation and one new life member signed up. With the mild weather, we were delighted to see more local AFSM members at the Fair who stopped by for a chat.

Social Welfare Assistance in the Geneva area

As from 1 January 2016, the Association of Former International Civil Servants (AFICS), Geneva, is no longer able to offer the services of a social welfare assistant.


This information is only available in French for the time being.

If you need other information please send an email to the AFSM at aoms@who.int or call us on +41 (0) 22 791 3192 and we will do our best to help, in consultation with the WHO staff counsellor.
To celebrate its last meeting of 2015, the group decided to hold a luncheon instead of the usual coffee get-together on Friday 4 December. Our coordinator Pauline Nicholls, ex WMO, made the reservation at La Puccia restaurant in Nyon, where more than 30 of us occupied three long tables and enjoyed the plat du jour of filets de perche. The Nyon group comprises former staff of many UN agencies and of course we have a lot in common to chat about. If you live in the area, please come and join us – the 2016 venue and dates are shown in QNT 102.

Sue Block Tyrrell

How many of us have travelled around the world and by chance bumped into colleagues, friends or neighbours far from home? Please share details of your encounters with us and provide a photo if you have one. The photo shows such a chance encounter in early March with former staff members Ruth and Piero Malaguti after breakfast at the Coconut Court Beach Hotel in Barbados – what a lovely surprise to meet them there!

Sue Block Tyrrell
This prize was awarded with half jointly to William C. Campbell and Satoshi Ōmura for their discoveries concerning a novel therapy (avermectin) against infections caused by roundworm parasites, and the other half to Youyou Tu for her discoveries concerning a novel therapy (artemisinin) against malaria.

Our colleague, CP Ramachandran who has played an important part in the elimination of lymphatic filariasis (details of CP’s biography were published in QNT 101) attended the ceremony and extracts from his message to his friends and colleagues are shown below:

“I returned this morning, 14 December, to Kuala Lumpur after attending the week long Nobel Prize function in Stockholm, Sweden. It was indeed a week to remember for the rest of my life. A week full of joy, happiness, satisfaction, emotion, pride, sense of accomplishment, fulfilment and humility. In many ways the epitome of my life in a personal way!

The week commenced on Monday 7 December with Nobel Laureate Lectures in Physiology or Medicine by Professor Campbell and Professor Ōmura, and then by Professor Youyou Tu on their discoveries. They were introduced to the public by Professor Hans Forssberg, a Member of the Nobel Assembly at the Karolinska Institute and Member of the Nobel Committee for Physiology or Medicine. In his introductory remarks, he said “All around us, in nature, in our skin and our bodies, a constant power struggle is under way between myriads of microscopically small creatures that are fighting for their survival. Many are important constituents in nature’s ecosystem, while others attack us humans and cause disease and death. This year’s Nobel Prize in Physiology or Medicine is awarded to scientists who have enlisted the help of nature and made use of weapons from this power struggle in order to develop drugs against parasites that have plagued humankind since ancient times”. On 8 December, Nobel lectures in Physics, Chemistry, Literature and Economic Sciences followed. On 9 and part of 10 December visits were made to Nobel Museums (Nobel Museet) and to Tekniska Museums. Thursday 10 December commencing at 4.30 pm was the event of the week - the Nobel Prize Award Ceremony followed by the Nobel Banquet at the Stockholm Concert Hall and Stockholm City Hall. Music was performed by the Royal Stockholm Philharmonic Orchestra. The prize-giving ceremony was most colourful in the presence of the King and Queen of Sweden. Again at the prize-giving ceremony each recipient had a citation read of his or her discoveries and contributions, followed by the award by His Majesty the King of Sweden. I was very much overcome by emotion when Professor Campbell and Professor Ōmura received their much deserved prizes. My thoughts went to each and every colleague who has contributed to the ivermectin story and to making the onchocerciasis and lymphatic filariasis elimination programmes a global success story.

So my dear friends and colleagues, you all deserve congratulations for your singular contributions to eliminate diseases of poverty from this world. With warm regards, CP Ramachandran”

The Special Programme for Research and Training in Tropical Diseases (TDR) played a role in both of these novel therapies, by supporting local researchers to run clinical trials and to develop a community-based approach to treatment delivery. The current Director John Reeder was invited to the Nobel Prize ceremony, together with Tore Godal, Director of TDR at the time of the trials. Dr Bjorn Thylefors, formerly Director of WHO’s Prevention of Blindness Programme (PBL) and subsequently Director of the Mectizan Donation Programme, (MDP) Atlanta, was also invited to attend. PBL was the focal programme for ivermectin distribution in the field from the late 1980s operating through the NGDO Collaborating group it set up for that purpose. Dr Thylefors was invited to meet with Dr William Campbell at the Swedish HQ of Merck on 8 October where he gave a lecture on the MDP and the progress made in eliminating onchocerciasis and lymphatic filariasis through ivermectin.

Sue Block Tyrrell
Andy Crump who took the photos

1. Ivermectin is a chemical derivative of 22,23-dihydroavermectin B

Juhana received his M.D. and Ph.D. degrees from the University of Helsinki, and after practising medicine for some years, was appointed to academic posts in pharmacology in Finland and the USA. He then served as the Chief Medical Officer of the Finnish National Medicines Control Agency from 1970-1990. He was a member of the WHO Expert Advisory Panel on Drug Evaluation from 1975 to 1990, and also served as a Temporary Adviser to WHO on 12 occasions.

In 1990, he was appointed Deputy Director of WHO’s Division of Drug Management and Policies, and was its Director from 1995 until his retirement in 1999. His activities were manifold, and included a strong focus on the biennial International Conferences of Drug Regulatory Authorities, with topics of particular interest to developing countries being placed on the agendas. No less important was his work in the development of critical guidelines, and in the initiation and ongoing activities of the major new drug regulatory harmonization programme initiated by the European Commission, the USA, Japan, and the IFPMA.

Juhana was the author of more than 130 publications and articles in his many fields of expertise.

Subsequent to his retirement from WHO, he served with great distinction (from 2000 to 2006) as the Secretary-General of the Council for International Organizations of Medical Sciences (CIOMS), which has official relations with WHO (and is also an Associate Partner of UNESCO), and played a key role in the preparation and publication of several CIOMS reports and guidelines on diverse aspects of drug safety and research ethics.

He is survived by his wife Ulla and three children (all active in the health sector) and seven grandchildren.

A more detailed obituary, including acknowledgements, etc., can be consulted on the CIOMS website, www.cioms.ch. Sev S. Fluss

Margaret Joy Baker born on 19 February 1931 in London, died on 13 December 2015 in Peillonnex, Haute Savoie, France.

During her career Margaret worked in several UN agencies, namely UN New York and Geneva, WIPO Geneva and WHO Alexandria and HQ Geneva. She was well thought of wherever she worked and was always willing to be of help to the staff.

In WHO/HQ where she worked in the Personnel and Administration Division, she always found time to listen to the staff members’ problems and help them as much as possible with positiveness and in a cheerful manner. She also helped to boost staff morale. She concluded her career by taking early retirement.

On a personal basis, I have to say that Margaret was a very good friend to me, in fact my mentor, and I owe my own career to a large extent to her. As a friend she was always there when one needed advice or assistance.

Margaret was a very active person and entertained her friends in her large house in Peillonnex. She loved music and would attend concerts and the theatre in Geneva and in and around her home. She also participated in the activities of the village, especially the church, as a member of the choir. The people from the village and church who knew her had great respect for her and her willingness to participate in local events. Her positiveness, sense of humour and generosity are qualities appreciated by those who knew her.

We who knew her well shall miss her.

Antoinette Vanigasooriyar
In memoriam

Glorifina "Glo" Biason

Our hearts are heavy.
Our dear Glorifina "Glo" Biason passed away at the age of 77 on January 14, 2016. After a brief and valiant battle with lung cancer, she died blessed in peace and surrounded by family in her home country, the Philippines.

Successful as she was in her personal and professional life, Glo remained humble. A considerate, quiet and unassuming person, she inspired many.

To her children - Gina, Edmund, Lea and Diana - their Mom personified kindness, devotion, honesty, and generosity. These same virtues also earned her affection and respect in WHO.

At the office, Glo was well known as Edward Uhde's most trusted and loyal secretary. That recognition carried a lot of import. It meant Glo had met his high standard for an assistant. That she came close to his workaholic alter ego. That her strong work ethic contributed to their success as a team. (Perhaps, their births in October 1938 in the Year of the Tiger had something to do with this!)

From 1981 when she worked with the BFO's team in WPRO Manila, Glo had held Ed's high esteem. Competent, efficient, and punctual, she advanced her career down the same path that took him to become AFO and DSP. So steady was her high caliber work that Glo became indispensable to Ed. Shortly after he became Director, B & F Div/Comptroller in late 1988, she flew to Geneva to join him. It was during this last decade and most vibrant time together at Headquarters that they reached the zenith of their careers.

In October 1998, Glo retired. With more than 20 years of service and 60 years of colourful experiences with many varied cultures.

Post- WHO gave Glo more to smile about. There was travel overseas and more times bonding with loved ones and lifetime friends. Lydia Manuel, Glo's first-rate sidekick during Ed's tenure in WPRO Manila, has this to say: «We’d meet on a whim sometimes simply to reminisce the good old days at the office, and share laughs over meals and coffee. I always had fun-filled moments with her!" Farewell, Glo. We shall all miss you!

Carm Uhde

Jane Card

At the beginning of December 2015, WHO lost a lovely, eccentric recluse. Jane Card, after a happy life lived exactly as she wished, left us to join her beloved ancestors.

Jane was well known for walking everywhere, with scarf on head (knot on chin), wellies on feet, and usually with a large white lawn hankie (she despised Kleenex) to her nose because of the pollution. She also shunned 'planes, computers, television and radio, preferring trains, 'buses, books and newspapers. Every day she read her newspaper from cover to cover; if you wanted to know about the financial situation in Outer Mongolia or the political crisis in Ecuador, you asked Jane.

She passed on her love of books to her friends. Every Christmas you knew what she would send you. A book! Not any old book, but one of the most beautiful books you have ever owned. Generosity and thoughtfulness were her watchwords.

Jane had a great sense of humour and loved to laugh—especially at herself. In the office (she worked in Family Health for many years) Jane was known to be very intelligent, conscientious and helpful, giving advice, especially to newcomers about the rules and regulations governing life in WHO.

After she left the Organization at the end of the 1990s, Jane returned to her large family home in Strete, Devon, where she stayed until she died. At her funeral the church was packed and full of flowers—he would like that because she loved all nature. Even the dog she had adopted sent her a single, huge red rose. The people from the village were there because they “loved Jane”. Her brother Timothy and his wife and a couple of friends from Geneva were also there because they too “loved Jane”.

Yes, we have all lost a very special friend, a lovely, eccentric recluse—Jane Card, headscarf, wellies an’ all.

Valerie Buxton
Dr Vovor Mawupe was born on 1 February 1930 in Kpalime, Togo and died on 15 November 2015 in France.

After completing his secondary studies, including those at the Hyères lycée in the south of France, he obtained his dental surgeon diploma at the Dental Faculty in Lyon, France. He worked in Bourgoin-Jallieu, then in Conakry, Guinea and carried out his post-university studies in Montreal, Canada.

Recruited by WHO in 1970, he taught at the University of Dakar (dental training), then at the Dental School of Cameroon, until the beginning of 1978, when he left for the Comores as WHO consultant to carry out a study on the training of health personnel. At the beginning of the school year he was posted to Moroni, Comores. As team leader of WHO personnel teaching at the health care sector (later becoming the National School of Health), he was highly active in preparing and setting up the teaching programme of the National School of Health. In 1986 he was transferred to Lilongwe, Malawi where he remained until his retirement in 1990.

Those who knew Dr Vovor Mawupe will feel deeply saddened by his loss, a conscientious, respectful friend and colleague, always ready to listen to others. He leaves children and grandchildren.

We will always regret his generosity, kindness and modesty. Loyal to friends and acquaintances, he maintained contact with many of them.

He will always be in our hearts and in our minds, and in spite of our pain, we will always cherish his memory.

His wife Assiata Vovor Mawupe and family

Our centenarian Ronnie Peters sadly passed away on 3 March. An obituary will be published in the next QNT.
Patricia Brown passed away on 5 April. We will publish an obituary in the next issue.

Other deaths

Information provided by the Pension Office and taken from AAFI-AFICS’ Bulletin, October-December 2015
Due to the new calculation mode (IPAS), the Pension Fun dis unable for the moment to provide complete lists with the dates of deaths.

CHU Shou-Jen
D’INCA Vincenzo
DESCLOUX Suzy T.
EBLEN Jack E.
ELKINGTON Joyce
FERRERO C.
GIACOMETTI Liana K.
GUTERRIEZ M.R
HAMEL Louise HAN
Chung-Mao
HERNANDEZ Seomara
HOPKINS Ailsa N.
ILABOR Roger A.
JAQUEMET Roger
KARMON M.
KINGSTON Edith
LOKO Antoine
LOUNGADI Jean Pierre
LYDDANE Olga Virginia
LYE Thim Fatt
MAG BANJA Julio J.
MAGBANUA Julio J.
MA YELABASSA Isidore
MBANZOULOU Fidele
MEILLAND Georges G.
MONTESINOS Delia
NIZETIC Branko
QUELENNEC Marie-France
RAHMANI Abolfazl M.
RAMILLANO Ramona
REZNIKOV louri L.
RIBEIRO F.
RODRIGUEZ TORRES Jose
SAIOI Mohamed
SALIH Mei-Med
SWILLEN Lucien J.
VAN DER LAAN Louise
WATTS Eveline Alice
WRIGHT John
**Death of Boutros Boutros-Ghali, UN Secretary General, 1992–1997**

Although it has been said that his term of office as UN-SG was controversial, particularly in Rwanda and Former Yugoslavia, many consider that his main achievement was in leading the peace process in Cambodia, 1992-93.

As WHO Representative there during that period, I remember the time, in early 1993, when a spate of killings by the Khmer Rouge (including UN staff) made the UN administration seriously doubt the feasibility of conducting the “free and fair” elections scheduled for May 1993. Should the UN give up the elections although they were, after all, the main reason for its presence? Must it extend its stay in Cambodia with very uncertain chances of funding? It was then that Boutros-Ghali rushed to Phnom Penh and delivered a forceful speech in front of us all enjoining the UN to carry on as scheduled. I was possibly naïve but I felt - that his speech greatly boosted the morale of the UN staff. The ensuing elections were a reasonable success, leading to the planned withdrawal of the UN transitional administration and to a government democratically elected ... for a while at least.

**JP Menu**

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**Certificates of entitlement**

As you know, these certificates are sent out each year by the Pension Fund to each UN pension holder - former staff member or surviving spouse. They have to be signed and sent back to the Pension Fund in order to continue to receive a pension.

Unfortunately, it can happen that the Fund does not receive the returned certificate and, following several unanswered reminders, payment of the pension is stopped. In December 2015, the Pension Fund sent to associations of former UN staff a long list of people who had not returned their 2014 certificate, warning us that if the certificate was not returned before end January 2016, payment of the pension would be stopped.

The list contained 252 names of former WHO staff!

This was the first time that AFSM’s assistance had been requested. We did our best to find the maximum number of people, searching in our lists for their addresses, telephone numbers or email addresses. Our sister associations in the Regions were also asked to help. We are grateful to Germán Perdomo (AFSM-Washington) and to Jill Conway-Fell (Copenhagen) for the research they carried out. It was fairly easy to contact AFSM members, especially those whose address is up-to-date in our database but it was virtually impossible to track retirees who are not members.

We would therefore like to take advantage of this article to emphasize the importance of being a member of the AFSM. It can bring you a greater return than the cost of your subscription! Needless to say,

**JPM**

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**Co-options to the Executive Committee**

We are pleased to inform you that the AFSM Executive Committee has co-opted two colleagues: Rosemary Villars, who is already well known to our readers, and Thierry Lambrechts who has recently taken retirement and whose former post was Medical Advisor to our Staff Health Insurance.

We thank them for their availability and their help with the Association's activities. These co-options were carried out in accordance with article 5 of our Statutes.
Quick answers

TEACHER: Why are you late?
STUDENT: Class started before I got her

TEACHER: John, why are you doing your math multiplication on the floor?

JOHN: You told me to do it without using tables.

TEACHER: Glenn, how do you spell 'crocodile?'
TEACHER: No, that's wrong
GLENN: Maybe it is wrong, but you asked me how I spell it.

TEACHER: Donald, what is the chemical formula for water?
DONALD: H I J K L M N O.
TEACHER: What are you talking about?
DONALD: Yesterday you said it's H to O.

TEACHER: Winnie, name one important thing we have today that we didn't have ten years ago.
WINNIE: Me!

TEACHER: Glen, why do you always get so dirty?
GLEN: Well, I'm a lot closer to the ground than you are.

TEACHER: George Washington not only chopped down his father's cherry tree, but also admitted it. Now, Louis, do you know why his father didn't punish him?
LOUIS: Because George still had the axe in his hand.

TEACHER: Now, Simon, tell me frankly, do you say prayers before eating?
SIMON: No sir, I don't have to, my Mum is a good cook.

TEACHER: Clyde, your composition on 'My Dog' is exactly the same as your brother's. Did you copy his?
CLYDE: No, sir. It's the same dog!!

This actually happened to an Englishman in France who was totally drunk. A French policeman stops the Englishman's car and asks if he has been drinking.

With great difficulty, the Englishman admits that he has been drinking all day, that his daughter got married that morning, and that he drank champagne and a few bottles of wine at the reception, and many single malts scotches thereafter. Quite upset, the policeman proceeds to alcohol-test (breath test) the Englishman and verifies that he is indeed totally sloshed. He asks the Englishman if he knows why, under French Law, he is going to be arrested.

The Englishman answers with a bit of humour, "No sir, I do not! But while we're asking questions, do you realize that this is a British car and that my wife is driving . . . . . on the other side?"

Delays in the payment of pensions (see Editorial)

The situation is likely to last: Some of our associations have decided to appeal directly to the UN Secretary General and ask for an interim solution to be found, for example by giving advances on their pension to new retirees and widows/widowers of a deceased member.

We advise future retirees to avoid incurring substantial costs or to borrow money and to think about having a bit of money aside to meet expenses of the first 5 or 6 months.

We advise future retirees to avoid incurring substantial costs or to borrow money and to think about having a bit of money aside to meet expenses of the first 5 or 6 months.
The 43rd UN Inter Agency Games will be held at Malaga, Spain, from Wednesday 11 May to Sunday 16 May 2016 (www.interagencygames.org/iag2016). Following the withdrawal of Kenya as the planned location, the UN World Tourism Organization, based at Madrid, has gallantly agreed to host this year’s Games at short notice.

As usual, the Games will cover a range of disciplines including for the more physical (athletics, badminton, basketball, cricket, football, swimming, table tennis, tennis, volleyball) and the less physical (bridge, chess, darts, golf, pétanque), although final determination of inclusion can depend on the number of registrations for that discipline. Beach Volleyball is this year’s interesting addition. Some 900-1,000 participants are expected from all UN offices and missions around the world.

Malaga is a superb tourist location, with good airline links and numerous attractions for both players and supporters. If time is available, a day trip to the famed Alhambra palace complex at Granada is also to be considered.

The registration deadline was Friday, 8 April, to be submitted through our WHO UNIAG Coordinator, Arnaud Devilliers, at devilliers@unicc.org. It’s now too late, but maybe you could try. Please note that this is a package registration, including both the sporting competition, hotel accommodation and board, and the various gala events. Participants will nevertheless need to organize their own travel.

Skies for May – July 2016

The biggest astronomical event of this quarter is not actually in the night sky, but in the day. It is a transit of the planet Mercury across the Sun, which takes place on Monday, 9 May. There are 14 such transits this century, but the next one will not be until 2019 and the one after that is in 2032. Although Mercury is in line with the Sun every 16 weeks or so, most of the time it passes above or below the Sun because its orbit is tilted compared with that of Earth. Mercury is quite a small planet, only 40% bigger than the Moon. It will be quite small as seen against the Sun’s disc, so you will need a telescope to view it.

However, there is a big problem with looking at the Sun, because it is so bright. You need to cut down its light by 100,000 times to make it viewable without risk of blindness. This means covering the front lens of the telescope with approved solar film, such as Baader AstroSolar, which is sold in A4 sheets. Never cover just the eyepiece – it will burn up in seconds.

Mercury will appear as a tiny black dot moving slowly across the face of the Sun between about 11.13 GMT and 18.40 GMT. The only parts of the world where it will not be visible are the Far East and Australia.

For more information about the event, visit the Society for Popular Astronomy website at www.popastro.com.

Article kindly provided by the British Society for Popular Astronomy

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

Life Members
Pamela Baillie; Michèle Bernard Evans; Meena Nathan Cherian; Guy-Marie Masse;
Diana de Peic

Annual Members
Evelyn Jiguet;
Indonesian reflections

In January 2016, my husband and I travelled around Indonesia for 14 days. Lucky us! Indonesia has it all: mega cities, stunning temples, charming people, impressive nature and totally yummy food.

All towns/cities we visited, particularly Jakarta, are huge surface wise. None, except Jakarta, have high rises, either because houses should not be higher than temples, or for practical reasons - earthquakes. And there's enough space. Most have tile roofs - not much corrugated iron around, happy to say!

Bali tops our list. We had rented a car and driver for easy access, as time was short. In case you wonder, prices are very reasonable. Our first stop was the Uluwatu Temple, on the south west side of the island. The temple is built on a rocky outcrop, overhanging the sea, with surf roaring on both sides. Very restful, despite the many visitors. The climb up to the top of the temple is well worth the effort. Stunning views on both sides.

But we did not only go there to enjoy the views, lovely as they are. We went there more particularly to see the Kecak and Fire dance which is totally mesmerizing. Male voices (40-50), repeating over and over again the same words “ka ka, ka ka ka”, provide the background music/sound to a one hour Bali dance performed in an amphitheater overlooking the sea and the setting sun. Dramatic setting. Of course it was very hot as well – to be expected - but a sun hat and lots of water kept us relatively cool.

En route we drank Luwak coffee, made from droppings of civet cats (who eat the coffee bean). Droppings are washed and processed, providing for a delicious cup of coffee. We of course also went shopping for Batik shirts in Denpasar, Bali’s capital. There’s plenty of choice. A feast for the eye.

We were lucky to have lunch overlooking some of Bali’s famous rice fields. Very peaceful and inspiring. The many colours of green are a joy to the eye.

Driving around Bali we saw many roosters on the road side, in bamboo cages. We wondered why. Guess you already know the answer. Because of the cock fights which is big business in Bali. Legally prohibited. But going on nevertheless. Fighting cocks are even imported from Peru, at huge cost. Why? Because they apparently fight while “flying”.

The Borobudur Temple (3 hours’ drive from Semarang in Central Java) is stunningly beautiful. It's like a fata morgana standing tall and proud in the middle of very green fields. The temple is wrapped around a small hill. So very solid. It was constructed between 750 and 850. As a Buddhist temple. And thereafter almost immediately forgotten due to change of political power and rise of Islam. Totally overgrown by the surrounding jungle, it lay forgotten until Sir Raffles (UK) arrived on the scene in the mid-19th century. He got interested in local stories of a huge temple hidden in the jungle. The Dutch did a mega tree cleaning job in the early 20th century. UNESCO recently restored parts of it at the cost of USD 25 million!

Climbing Borobudur is spiritual as well as physical. It’s 120 by 120 meters and some 38 meters high. There are good steps leading from the world of suffering/greed to Nirvana. But rather than getting there in one go, which would be too easy, one is supposed to walk each of the 9 tiers - which we did - 6 square ones and 3 circular ones. Doing so enables one to contemplate and appreciate the very fine stone carvings and the views. It's also easier on legs and lungs!!

A light breeze picks up closer to Nirvana! Highly needed for dripping pilgrims! On the last 3 tiers, there are a series of Stupas - each with a Buddha figure inside. The top stupa was supposed to have an unfinished Buddha figure inside - as perfection is the Lord’s. The lower levels are square. The top levels are circular, signifying the never ending road to Nirvana. The top is lower now, because of an earthquake...

I was enthralled by the beautiful friezes, speaking of expert craftsmanship, and by the serene Buddha sculptures, remnants of the devotion and skills of people long gone. Wonder whether they could anticipate visitors from all creeds coming to visit 1200 years later?

Mount Bromo, a live volcano, is awe inspiring. Mt Bromo is surrounded by the Sea of Sand (ashes) which looks like nothing I have ever seen before. It’s huge, more like a lunar landscape (I imagine) or a scene in a Sci-Fi film. Nature at its best and worst. At the foot of Mt Bromo is a Hindu Temple which is also a place of pilgrimage. Mt Bromo was spitting ashes the day we went there (10 January) so we
Indonesian reflections (Continued)
could not cross the Sea of Sand for safety and health reasons. We would have crossed on horseback - doing so on foot would be very demanding, hot and dusty. 

Lombok is totally different from Bali, with green rice fields everywhere along the road side. In Bali they are hard to find, particularly in the touristy south. Lombok is also known for its pearls. So, what did we do? We went shopping, of course! I say no more. We had a great seafood luncheon afterwards. 

The Komodo Dragons are awe inspiring. We had an excellent guided tour (only way to see the dragons – to prevent tourists being devoured by hungry dragons-including guide and 2 park rangers. We were part of a pre-arranged group. The tour took about one hour. Dragons are hard to spot under the foliage. They are also very agile, carnivore and cannibal, even eating their own off spring. That's why the young ones live in trees, to stay safely away from the adults (both mom and dad). 

We saw plenty of dragons (6) and 2 kiddies (lucky us), who came running down a tree (not to eat us, but to get some exercise I guess). One (bigger) dragon was pretty alert, ready to jump/attack. The park rangers were alert as well - very reassuring. One can come quite close to photograph the dragons, but should stay with the group at all times – to avoid mishaps. Indeed, one park ranger walks in front of the group and one at the back, to ensure safety at all times. It was truly a glimpse of paradise, with claws and sharp teeth this time. The setting is lovely. Blue sea, green trees, fine white sand. It's a truly unique setting because of its unique wild life. 

Last but not least, Jakarta. Not really a town for tourists. We took a taxi to Fatahilla Square and had a cool drink at the Café Batavia. Fatahilla Square is large (huge) and very hot, as there are hardly any trees, which is a real pity. The square is surrounded by old colonial buildings, Dutch style. Colourful bikes are for rent, including sunhats!

Tanja Sleeuwenhoek

Borobudur Temple

Tenganan, Bali

A Komodo Dragon

M' Bromo
The Fondazione Giorgio Cini, in collaboration with the Israel Antiquities Authority and the Shelby White and Leon Levy Lod Mosaic Center, hosted the exhibition “A menagerie of wonders” from 8 October 2015 to 10 January 2016, on the island of San Giorgio Maggiore. It is the only Italian element of the touring exhibition, made possible thanks to the support of the Patricia and Phillip Frost Art Museum, Florida.

“A menagerie of wonders” was an exhibition that provided a unique opportunity to admire an ancient Roman mosaic of superb iconographic quality and in an excellent state of conservation. The mosaic was uncovered in 1996 in the Israeli town of Lod which, according to an ancient legend, was the birthplace of St George. Dating from the 3rd century AD, the mosaic is also particularly interesting because it is so well preserved. One of the finest and largest mosaic floors ever found in Israel, this archaeological gem consists of panels with detailed images of mammals, birds, fish, various plants, and ancient ships. The mosaic consists of cubic stone tesserae of various colours: blue, red, yellow, brown, white, and several shades of grey and black.

Immediately after its discovery, the mosaic was reburied to protect it from the elements which threatened its state of conservation. In 2010 the Lod mosaic set off on an international tour and was displayed in major world-renowned museums, including the Metropolitan Museum of Art in New York, the Louvre in Paris, the Altes Museum in Berlin, Waddesdon Manor, Buckinghamshire in the United Kingdom, and the Hermitage in St Petersburg.

Before returning to Israel the mosaic was shown at the Fondazione Cini on the island of San Giorgio Maggiore. It was the only Italian element of the touring exhibition, made possible thanks to the support of the Patricia and Phillip Frost Art Museum, Florida, where the tour terminated.

On the occasion of the exhibition, the Fondazione Cini Institute of Art History has broadened reflections on the theme by conceiving and producing a photographic exhibition and two videos. Selected from the Fondazione Cini’s vast photo library, the images depicted floor mosaics in some of the most important archaeological sites in Italy: Aquileia, Rome, Palestrina and Pompei. The first video was a fascinating journey showing images documenting the extraordinary wealth of Italian archaeological heritage, with specific focus on the northern Adriatic area; it was intended to suggest a travel itinerary to encourage visitors to explore further the themes of the exhibition. The second video supplied a wider-ranging survey, extending the area of comparison with the Lod mosaic to the Mediterranean basin, in an attempt to identify stylistic models, thematic affinities and iconographic similarities, but also compositional differences and technical divergences.

Once again back home in Israel, the mosaic will be exhibited in the new museum in the Lod Mosaic Archaeological Center, due to open in 2017.

Laura Ciaffi
Growing old gracefully

Growing old gracefully means ageing without a sigh,
Without remorse or regret, don’t just watch time go by,
Keep looking forward, fear behind you, turn the page,
As happiness can be found at any age.

Growing old gracefully means treating your body well,
Healthy on the inside, with a smart outer shell,
Never give up when faced with an effort, just take a deep breath,
Because age has nothing at all to do with death.

Growing old gracefully means giving a gentle push
To those who are feeling so lost in the bush,
Who no longer believe that life has still much to offer,
But rely on others for comfort and succour.

Growing old gracefully means staying positive, don’t shed a tear
For all those many fond memories of yesteryear,
Be resolute and proud of your head of greying hair,
Because, to be happy, there is still time to spare.

Growing old gracefully also means ageing with love,
Knowing how to give freely, with no returns from above,
Because, wherever you are, at the break of the day,
There is someone to greet and help on their way.

Growing old gracefully means keeping hope in your sight,
Being content with yourself as you retire each night,
And when the point of no-return appears, stakes its claim,
Tell yourself, it’s just “au revoir”, till we meet again.

Transmitted by Tamas Fulop
Translated from French by Sue Block Tyrrell

Dr Fitzroy Gregory Joseph has just published the third volume of his poems, entitled «The third period» dedicated to the fall. Dorrance Publishing Co, Pittsburgh, USA

“Dr Fitzroy wants us to see nature’s manifestation in its unarguable beauty, yet harsh nakedness, unapologetic, untouched by human arrogance and glibness of tongue. Trees are part of the universe to be taken seriously as living entities alongside us. Note their persistence and sustainability in spite of human callousness and frequent myopia. In the midst of all, the majesty of the stalwart trees and the incandescence from the ray of exotic leafy colours on the threshold of the demise (winter) reflect a hope of spring rejuvenation, a resurrection. If only human beings can see the parallel in our lives and conclude with appreciative respect for trees on this planet”

The publisher.