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)

Listening to the guide in Aachen
Photos of the cruise

Our boat, MS Lafayette
Charlemagne (In Aachen)
In Strasbour
Gardens in Mainau (Titisee Lake)
Our group in Mainau
The group chatting in the boat’s lounge
The Rhine Falls (Shafhausen)
Photographying the falls

Photos by Jean-Paul Menu

(other photos in the French version)
EDITORIAL

I can only repeat what I said in the editorial of the previous edition concerning our next elections in October for the renewal of our executive committee. We are strongly counting on new candidates among young retirees to strengthen our group and to bring fresh ideas to our association.

As already announced, our annual reception will be held this year, on a trial basis, on 2 October and not in December as usual. In fact, several members have said that they declined to participate in view of the bad weather conditions and dark evenings in December.

The Staff Health Insurance representatives of retired staff continue to work on the new committees, the Global Oversight Committee and the Global Standing Committee (see articles on pages 5 and 6.)

As you will see, we continue to keep you up-to-date on events in the other regions (see page 11).

We thank those members who write to us. Thanks to them, the journal is more dynamic.

DC
Our health

And that extra shot?

Over time the protection conferred by the vaccines received during childhood wanes. In contact with an unvaccinated child (or adult), whether ill or simply a healthy carrier of infection, an elderly person is likely to be susceptible to diseases such as measles, whooping cough, or even diphtheria, if he or she has not received a booster dose of vaccine, even if correctly vaccinated as a child.

There is a real danger, due to loss of interest in, or for some, even opposition to vaccines. Persistent rumours, some supported by studies carried out by medical doctors, have alleged that the inherent risks associated with vaccines largely outweigh their advantages. These rumours have been taken up by the media very much more than the studies that demonstrated the inaccuracy of the rumours. The informed withdrawal and discrete embarrassed mea culpa of certain media have not dissipated the fears that circulated among the public.

This situation, it seems, began with vaccination against hepatitis B. The disease was spreading particularly among health-care personnel directly exposed to affected patients. Vaccination was therefore very strongly recommended for physicians and other health professionals; sometimes it was even made compulsory. The vaccine was, after a while, accused of causing cases of multiple sclerosis, a neurological disease which attacks the nervous system, in different parts almost as if by chance, causing symptoms that vary according to the capricious distribution of the lesions. The treatment of the disease is difficult and results are poor. Judicial decisions have even awarded generous financial compensation to some patients.

Multiple sclerosis existed long before the introduction of hepatitis B vaccine, and long-term studies carried out in response to the accusations made against the vaccine were able to demonstrate that there was no more multiple sclerosis among vaccinated people than in those not vaccinated: the illness and the preceding vaccination were completely unrelated and the occurrence of the disease in vaccinated persons was coincidental. The number of cases of hepatitis among health professionals (and the general population) has fallen considerably, thereby preventing much suffering and saving many lives.

New epidemics of measles, whooping cough and other childhood diseases have exploded at a time when they were thought to have been practically eradicated, at least in the so-called developed countries. To interrupt the transmission of the responsible viruses or bacteria, 95% of the population must be vaccinated. If this percentage is not reached, the risk of transmission and epidemics persists. It is enough for one case to be imported, and this becomes more and more likely with the increasing movement of people worldwide, for the disease to spread.

In 1998 a British physician, Dr Wakefield, caused a scandal and thereby acquired a degree of celebrity, by claiming that the triple vaccine against measles, mumps and rubella favoured the development of autism. The numerous studies which sought to confirm his claim failed to do so: there is no causal relationship between this vaccination and the appearance of autism. But on this subject the rumour is obstinate and resists the demonstration of the facts, in a reaction that is emotional and unrealistic. Around 50.000 Americans contracted whooping cough in 2012; this serious respiratory illness can result in death, or have serious sequelae, particularly in infants.

In the countries affected by war or religious extremism the situation has become worse: in Pakistan and Afghanistan for example, polio vaccine is accused of causing sterility, or of being manufactured using pork fat. The vaccination teams of the polio vaccination campaigns are afraid of being shot at. As a precaution, the campaign is named Health for all without referring specifically to polio vaccination. Others, quite simply, are against vaccines because vaccines are against nature, thus implying that everything natural is good, and if man-made it is bad…. This disregards the fact that Amanitas phalloides, a deadly poisonous fungus, and the microbes that cause typhoid or tuberculosis, to cite only these, are completely natural.

Since Jenner in Scotland in the 18th century with the smallpox vaccine, Pasteur and the vaccine against rabies, Ramon and the diphtheria vaccine, Sabin and the polio vaccine, and all the other pioneers of immunological stimulation and the struggle against infectious diseases, hundreds of millions of lives have been saved and years of suffering prevented. It is sensible not throw out the baby with the dirty bath water —

And to protect yourself and your entourage, and others, verify with your regular doctor that your vaccinations are up-to-date, bearing in mind that 95% of the population must be immune for the epidemic chain to be rendered impossible.

Dr Samy Kossovsky

For more information, see on the web: UNICEF: combatting anti vaccinations rumors: case studies; and many other articles
This was the second meeting of this newly created management committee which advises the Director-General on SHI management and operations. The meeting was chaired by the Assistant Director-General, General Management (ADG/GMG) and participants included the Comptroller, a regional Director of Administration and Finance, a regional Director of Programme Management, two staff representatives and a member elected by the former staff members (Ann Van Hulle). At the first meeting, we put forward a request that the alternate member elected by former staff members be permitted to attend future meetings. Recognizing the importance of retired staff in both financial and numerical terms, this request was accepted by the Administration and endorsed by the Director-General. Consequently, the alternate member (Clas Sandström) attended the GOC meeting in an observer capacity. This is a very positive development which enhances the participation of retired staff in high-level management meetings related to SHI. In addition, advisers attending the meeting included two external advisers, a WHO Legal Officer, a WHO Medical Adviser and a representative of Human Resources.

This first of two meetings to be held in 2014 was devoted mainly to financial matters which included a review of the SHI Annual Report for 2013, results of the latest Actuarial Study, and an Asset and Liability Study.

The Annual Report showed that there were 37,235 participants in the SHI Fund in 2013. The ratio of active/retired staff is 1.95. 45% of insured active staff live in high cost areas of the world.

The SHI Fund increased by USD 58.8 million in 2013. The Fund balance at 31 December 2013 was USD 659.8 million. This positive result is mainly due to the increase in the level of contributions and a good investment performance during the year.

While contributions overall exceeded claims in 2013, the reverse situation applied to the retired staff category resulting in a deficit of USD18.1 million for that category. In view of this ongoing deficit, a reserve has been constituted to cover the shortfall each year and reserves are being built up to cover future deficits.

According to the latest actuarial study, the projected deficit (over a 30-year period) amounts to USD1.5 billion, of which 59% is currently unfunded. Based on current projections of income and expenditure, the deficit is expected to be fully funded by the year 2037 (6 years ahead of schedule based on the previous actuarial study).

The report revealed an increase in the number of major medical cases in 2013. Among the challenges which the SHI is facing are the financing of the cost of rapidly evolving treatments and technologies, and the fact of an ageing insured population. In addition, as the SHI is a global insurance scheme, ensuring ease of access to care all over the world represents a challenge.

The GOC also reviewed the report of the working group established at its first meeting to examine strategic options for the SHI. The report which I presented on behalf of the working group was well received. Some of the proposals made were not retained by the GOC while others will be the subject of further study. The working group presented a paper prepared by retired staff representatives on long-term care. The need for an in-depth study with the assistance of an external consultant is recognized in order to examine options for meeting the needs of participants in this connection. In view of other priorities facing the SHI this year, the study cannot be carried out before 2015.

All recommendations arising from the GOC meetings are submitted to the Director-General for acceptance.

Ann Van Hulle-Colbert
Staff Health Insurance (SHI)

Global Standing Committee

This Committee meets as foreseen each month to review cases submitted to it. The representatives of retired staff or their alternates have continued to participate in all the meetings either physically or by videoconference. The teleconference system Webex foreseen for the participation of the regions was not satisfactory so we now use videoconference which is more costly but more effective.

It seems that the number of pending cases has decreased considerably.

Rules of the Staff Health Insurance and Internet Site

By the time this note goes to print, we hope you will have finally received the Staff Health Insurance Rules by post. It is accompanied by a note informing retired staff that the Administration has just created an internet site dedicated to information for retirees. We would remind you of the website: http://extranet.who.int/shi

You can access it by inserting the “log-in” and the password which will be communicated to you in the note from Administration.

The site is still under construction and for the moment will only contain the electronic version of the rules. We will be pleased to communicate to the Administration your comments and suggestions on the site.

Since their election, the representatives of retired staff on the two global committees have consistently asked for the creation of this site. We are therefore pleased to see that at last it has materialized thanks to the efforts of the Staff Health Insurance Administration with the services concerned.  

Human rights for older people

Article published in the BAFUNCS magazine kindly provided by the author Clyde Reynolds who states:

In a recent issue of UNA-UK’s New World, Chris Roles, Director of Age International, discussed the need for a convention on Human Rights for older people. He concluded:

“The UN General Assembly set up an Open-ended Working Group on Ageing for the purpose of strengthening the protection of the rights of older persons. This provides a unique forum for governments and civil society as we collectively seek to address the issues that arise from an ageing global population. The fourth meeting of the Group took place in August and it is clear that all participating member states agree something must be done. There are great divisions within the room, however, as to whether a new convention is the solution or whether we simply need to use what instruments we have more effectively. Given that the process depends on building consensus among member states, each of which has its own national interests in mind, it can be difficult to know how far we are on the path towards a convention. The process though has built greater understanding of the problem, which will, it is to be hoped, result in better policies. Protecting the rights of older people, however, does not mean simply waiting for a final decision on a convention. We must use every mechanism and tool available to build awareness and improve implementation of existing human rights standards while looking to the future. The lives of older people literally depend on it”.

This year marks 12 years since the adoption of the Madrid International Plan of Action on Ageing. The theme of 2012’s International Day of Older Persons, “Launch of Madrid plus 10: The growing opportunities and challenges of global ageing”, reflected this and also commemorated 20 years since the adoption of the United Nations Principles for Older Persons. These basic principles – independence, participation, care, self-fulfilment and dignity – both enshrine the human rights of older persons and give us the objectives for which we strive.
Human rights for older people

Over the last decade, there had been progress in the formulation of national plans of action related to ageing, including the emergence of non-contributory pensions in some developing countries. However, discrimination and social exclusion persist. These issues encouraged the Secretary-General to establish the General Assembly Open-ended Working Group on Ageing, which held its fourth session at the end of last summer.

The last seventy years has seen extraordinary successes in reducing poverty; coupled with medical advances, this has enabled people to live longer and to stay healthy longer. Older people can now make far greater contributions to their families, communities and the economy for much longer than they could in the past. At the same time birth rates have decreased in many parts of the world and by 2030, there will be more people over the age of 60 than children under 10.

With increased longevity, however, come new challenges for many: economic hardships, poor social care, increased frailty and vulnerability, isolation and security threats; and, although often held at bay for many years, age-related diseases including dementia; all this combines to engender age discrimination. Soon 20 per cent of the world’s population will be over 60, so we need to ensure that our human rights protection is fit for purpose. The Universal Declaration of Human Rights (UDHR) drafted in 1948 helped establish a legal framework and culture of respect for human rights that has influenced relations between individuals, groups and governments worldwide. There are few who would deny the universality of these principles, yet putting them into practice challenges us continuously. However, there is one area where the wisdom of the drafters of the UDHR fell short. The Declaration does not recognise ageing as a specific area of concern, neither do most more recent human rights treaties. This means that there is no global legal mandate not to discriminate on the basis of age. Of course, the principles should apply to people of all ages, but in practice the specific needs of older people are often overlooked. Worse, the universal protections are often ignored in the case of older people who do not have the necessary power and influence to enforce their rights. Nearly two-thirds of older persons live in developing countries, yet older persons are still largely excluded from the wider global, regional and national development agendas.

The international human rights system has evolved greatly since 1948. UN member states have adopted conventions on the rights of many specific groups, including women, children and people living with disabilities. These have given considerable prominence to the human rights of members of these groups, provided greater clarity on how these rights apply to them, and established global legal standards and frameworks for more effective engagement between people and authorities. The result has been a massive improvement in the lives of millions of people.

Experience suggests that the best method for establishing universal legally binding human rights protection is some form of convention. A Convention is effective if it is ratified by a large number of member states, and only becomes really meaningful when they implement it at the national level. For three essential reasons, achieving this requires the active involvement of civil society and older people themselves. They are:

1) Governments will not make a convention a political priority unless they are convinced it is what their population wants;
2) The content of a convention must be informed by the day-to-day lived realities of older people; and
3) Ensuring a global standard is implemented on a national level requires engagement between civil society and government.

To quote the Secretary-General:

As we commemorate milestones in global development for older persons, let us recommit to the full implementation of the Madrid Plan of Action. In the current fiscal environment, we must be vigilant in ensuring that the provision of social protection, long-term care and access to public health for the elderly is not undermined. On this International Day of Older Persons, I call on governments and communities everywhere to provide more opportunities for their ageing populations.

Clyde Reynolds
News from WHO

Highlights from the 67th World Health Assembly, 19-24 May 2014

The invited speakers: Dr Christine Kaseba-Sata, First Lady of Zambia and WHO Goodwill Ambassador against gender-based violence, deplored the prevalence of violence against women and girls and the extent to which such cases remain hidden and unrecognized; and Ms Melinda Gates, co-Chair of the Bill & Melinda Gates Foundation, highlighted ways to improve the health of mothers and newborn babies, emphasizing the value of linking efforts to improve reproductive, maternal, newborn and child health, which she called the “continuum of care”. Dr Margaret Chan, Director-General, in her opening address to the Assembly, voiced her deep concern about the increase worldwide of childhood obesity, with the increase fastest in low- and middle-income countries.

Under the presidency of Dr Roberto Morales Ojeda, Minister of Public Health of Cuba, more than 20 resolutions were adopted, including on the following issues:

- antimicrobial drug resistance – WHO was requested to develop a draft global action plan for consideration by the Assembly in 2015
- revised provisions on yellow fever vaccination under the International Health Regulations
- mercury – the Secretariat was requested to provide expert advice to help health ministries to implement the Minamata Convention on Mercury, one of the top chemicals or groups of chemicals of major public health concern
- violence, in particular against women and girls – WHO was tasked to develop a global plan of action to strengthen the role of national health systems within a multi-sectoral response to address interpersonal violence
- advancing the quest for solutions for financing and coordinating health research and development for diseases that disproportionately affect developing countries: a pooled fund for voluntary contributions for this purpose will be established in the Special Programme for Research and Training in Tropical Diseases (TDR)
- WHO’s strategy to help countries to improve access to essential medicines was approved
- the importance of universal health coverage and the need to strengthen health systems, including in the post-2015 development agenda
- newborn health – a draft action plan
- prevention, diagnosis and treatment of viral hepatitis
- plans to better incorporate palliative care, expand inclusion of the needs of those affected by autism, improve access to health care for those with disabilities, better integrate the use of traditional medicine and raise awareness of psoriasis
- approval of a global monitoring framework on maternal, infant and young child nutrition

In her closing statement, Dr Chan remarked on the intensity of this Assembly, with a record-breaking number of agenda items, documents and resolutions, and nearly 3,500 registered delegates, a reflection of the growing number of complex health issues.

Other key news

- New data released in March show that air pollution is now the world’s largest single environmental health risk.
- On 27 March, the WHO South-East Asian Region – home to 1.8 billion people – was certified free of polio.
- World Health Day (WHD) in April focused on vector-borne diseases with the slogan “Small bite, big threat” and the message on the WHD boarding pass highlighted simple measures for people to protect themselves when travelling.
- “bite, big threat” and the message on the WHD boarding pass highlighted simple measures for people to protect themselves when travelling
News from WHO

- WHO’s first global report on antibiotic resistance, issued end April, documents a serious, worldwide threat to public health.
- On 5 May, on the advice of an emergency committee convened under the International Health Regulations, the Director-General declared the international spread of wild poliovirus since the start of 2014 a public health emergency of international concern.
- The “Global status report on alcohol and health 2014” issued in May, warns that, worldwide, 3.3 million deaths in 2012 were due to harmful use of alcohol.
- People everywhere are living longer, according to the World Health Statistics 2014 report published in May: global averages show that the life expectancy of children born in 2012 is 73 years for a girl and 68 years for a boy.

On World No Tobacco Day on 31 May, WHO called upon all countries to raise taxes on tobacco to help encourage users to stop, to prevent people from becoming addicted, and to discourage new smokers.

Sue Block Tyrrell

Skies for July – September 2014

Probably this is the time of year, in the northern hemisphere anyway, when people look at the skies away from light pollution as they get away to holiday locations. And if they don’t happen to have one of those handy apps for their smartphone or tablet that tells them exactly what they are seeing when they hold it up to the sky, they will wish they knew what they are looking at. So here are a few suggestions.

Roughly in mid sky from either hemisphere is a bright star called Altair, which has a fainter star on either side of it. Look south in the northern hemisphere, and north in the southern. At right angles to the line of the three stars, to its east, is the small but very pretty constellation of Delphinus, the Dolphin. It actually does look a bit like a leaping dolphin! And to the north of Altair is another constellation that looks like what it is supposed to, Sagitta, the Arrow. Like Delphinus, its stars are not bright but it is easy to spot.

There are two bright planets around at the moment, both close together in the sky over in the south-west or west and which are setting not too long after sunset. These are the yellowish Saturn and the more orange Mars. During July they are fairly well spaced in the sky, quite low down from the northern hemisphere but high up in the southern hemisphere. Keep an eye on them as the month progresses, and you will see Mars scooting towards Saturn, getting closer every evening, until by 25 August they are very close together in the sky (though well separated in the Solar System). On 31 August the crescent Moon is nearby. Then Mars draws away and eventually the two are lost in the twilight.

For more details go to http://www.popastro.com/youngstargazers/skyguide/.

Article kindly provided by the British Society for Popular Astronomy
Some time ago, our Association and the Association of Former Staff of WHO/PAHO (Washington) have agreed to exchange articles of common interest in our Quarterly News (QNT) and their Newsletter, thus reaching out to a combined readership of nearly 2000 members.

For instance, representatives of retirees at the Staff Health Insurance Committees are able to issue coordinated messages complementing the information sent by the SHI Administration to all insured retirees.

The January 2014 issue of the Washington Newsletter\(^1\) included several items of interest to the readers of our QN.

- The report of the visit to AFSM Geneva of Nancy Berinstein and her husband in September 2013
- The inauguration of the UN City campus in Copenhagen (written originally by Jill Conway-Fell for QN93)
- The creation of AFSM Manila (written originally by Romulo Murillo for QN93)
- And most interesting for those of us who were familiar with the former building of the Regional office in Copenhagen (at 8 Scherfigsvej), a rather moving article by Nancy which we are reproducing below:

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### A trip down memory lane

In the latest newsletter from Geneva, Jill Conway–Fell has written about EURO’s new home in Copenhagen. It seems that, after many years, the WHO Regional Office for Europe has joined sister UN Agencies and international organizations and moved into UN City. We are told that this new complex is a cutting-edge, environmentally friendly hub for UN agency operations in Copenhagen. Left behind is the EURO building complex at 8 Scherfigsvej, which had been in operation since 1961. 8 Scherfigsvej had a history. It used to be a private home and estate for a wealthy Danish industrialist. In time, the home was opened to and used by the needy. During the winter the home served the elderly in the Copenhagen community. And during the summer it was used as an international student hostel. Students flocked there from countries all over the world. They were attracted by the less than US$1.00 per evening price for a clean bed and full breakfast. Of course, the boys’ and girls’ bedrooms were segregated, but the living room area permitted evenings of great conversation. Bicycles were made available for trips into town. The backyard had a volleyball net and a walkway down to the water.

Your writer was fortunate enough to spend part of her summer at the hostel in the summer of ’61. It was so lovely that a planned three-day visit expanded to ten days before I reluctantly continued my tour of the continent. Before departing, however, I learned that the doors would soon be closing and the home would be taken over by some unnamed international organization. Imagine my delight, many years later, to return to 8 Scherfigsvej and stroll through former bedrooms which were now used as EURO office space! So now, on to UN City – but it will never have the memories of the old EURO building at 8 Scherfigsvej! It was on the same trip in 1961 that I visited Geneva and was particularly drawn to the United Nations building. I stood to have my photo taken in its courtyard. On my recent trip to Geneva I learned that, for security reasons, it is no longer possible for casual visitors to enter the building.

Nevertheless, I think back to my visit to the hostel in Copenhagen and to the United Nations building in Geneva and wonder if it were really my college education and experience that brought me to my position at PAHO/WHO.

**Nancy Berinstein**

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Again in the Americas, our friend Antonio Pio, who is also President of AFICS-Argentina occasionally inserts in his Association Newsletter articles from the our QNT, particularly on health matters.
India – a short trip in February 2014

We had the chance to visit India this February – as part of our regular visits. We spent twelve days in Kolkata (previously Calcutta) and then took further trips to Pondicherry, Hubli, Mumbai, Baroda and Delhi. The ostensible reason to go to Pondicherry was that we had heard of this former French colony often but were never able to visit it. The trip necessitates a three hour taxi ride from Chennai airport along a good national highway. The first discordant note was the garbage strewn along the highway and in Pondicherry itself. With the growth of the Indian economy, we are always hopeful that the garbage problem will be solved but it is a futile hope. The amount of plastic bottles and bags strewn around is overwhelming. One wonders if there should not be a national law against the use of plastic bottles and bags.

Pondicherry was somewhat disappointing. It has two distinctive quarters. The Tamil quarter has narrow streets, honking cars and auto rickshaws, and open drains with lots of garbage. The French quarter, on the other hand, is cleaner, has wider streets and some handsome residences – some of which are falling into decay. The promenade on the sea, in the French quarter, has the shoreline covered by big boulders and lots of plastic garbage thrown on them. The restaurants in the French quarter take pride in French cooking which is only partly authentic. The majority of Tamil houses, in one of which we stayed, are constructed around a central courtyard but our room, being on a street on the ground floor, was shuttered up into a dark area.

One of the famous places near Pondicherry is Auroville, where an Indian sage Sri Aurobindo lived and where his disciple, a French lady later known as the Mother, established a colony or Ashram. Although Auroville has about 2000 residents with around 40 nationalities, the actual area is out of bounds except for a view of the spherical temple called MatriMandir or Temple of the Mother. It is covered with golden spheres but one cannot approach it without advance passes. I found the atmosphere to be too directive rather than participatory but probably this is needed to keep a sense of privacy for the residents.

Our foray to Hubli – about 400 km south-east of Mumbai – and later Baroda was to visit two remaining UNESCO designated archaeological sites of India we had not visited before. The first near Hubli is Pattadakal where two Hindu dynasties had constructed temples in the 9th to 11th centuries. Although the temples were remarkable, the upkeep leaves a lot to be desired – lack of explanatory notes, guides or even elementary preservation measures. The same was true near Baroda – in a place called Champaner – which has temples but also mosques dating from 12th to 14th centuries before the advent of the Mughals. We found archaeological sites open to local populations who use the rooms for their own purposes. The mosques were significant in their use of early Indo-Islamic architecture where the central roofs were supported by a series of twenty or thirty columns which were identical to those of Hindu temples.

I shall end with an anecdotal observation of difference of cultures among the three big cities of India. If one is crossing the road in Calcutta, the cars do not slow down, in Mumbai they tend to slow down and in Delhi, they speed up as if to gun one down. Delhi, being the capital, is marked by a culture of ostentation, wealth and young people who all speak with an American accent and, when accosted, often splutter “do you know who my father is” – i.e. influence and wealth through political patronage.

Dev Ray
The 2014 BAFUNCS Annual Reunion took place in Edinburgh, a particularly pleasant City which attracted about 100 participants.

The programme started as usual on Friday afternoon with registration and tea, but was complemented by a very interesting visit to the Scottish Parliament which is located about a stone's throw away from the hotel. The guided tour informed us of the rather controversial circumstances of its construction and the excessive cost of the building. But although ultra modern, it seemed quite a pleasant place of work. The visit was followed by a reception and welcome address by Ms Fiona Hyslop, the Scottish Cabinet Secretary for External Affairs. The informal Friday evening dinner saw the WHO retirees grouped around the traditional WHO table which made for a very pleasant reunion of ex colleagues.

On Saturday morning we were addressed by Magnus Linklater, an eminent Scottish journalist, originating from Orkney, who among many other things wrote extensively for The Times and was editor of The Scotsman before retiring and becoming a freelance writer. Mr Linklater very ably explained to us the present Scottish political situation in which the overwhelming majority obtained by the SNP over Labour in the 2011 elections had led to the imminent referendum on Scottish independence on 18 September. The economy is the biggest issue on the table between the two sides that will decide whether the 300 year union between England and Scotland will be dissolved. There are fears that an independent Scotland will retreat into a diminished state with a sliding economy, but the costs of getting out are difficult to calculate.

The BAFUNCS General Assembly dealt very quickly with the business side of the meeting after coffee break and the floor was given to Michael Askwith to announce that next year’s General Assembly would be held in Hollingbourne, Kent, from 15 to 17 May 2015. Michael also mentioned the UN Careers Records Project (UNCRP) which invites all BAFUNCS members (and other British Nationals with a UN career) to contribute to the project with articles, papers and other documentation that helps to preserve the wider UN memory. (Contact: askwith_michael@yahoo.co.uk)

The Saturday afternoon was devoted to three delightful excursions which took participants either to the Palace of Holyrood House, the Royal Yacht Britannia, or a guided tour around the old city of Edinburgh. This was followed by the official dinner where participants were welcomed by bagpipes and which was followed by a real Scottish Ceilidh.

On Sunday morning we were addressed by Professor David Purdie, of the Royal College of Physicians, Edinburgh and the present Dean of St, Andrews College, Edinburgh, who spoke on the “Scottish Enlightenment and called his presentation “A tale of three cities”, but instead of choosing Edinburgh, Glasgow and Aberdeen, for the benefit of the international background of his listeners, Athens, Florence and Edinburgh were chosen to illustrate the common factors in each which allowed an enlightenment to occur. A summary of Professor Purdie’s talk may be found on www.thinkscotland.org/think culture. This presentation was easily the highlight of the weekend.

It deserves mention that both our very distinguished speakers professed to be voting "no" on September 18.
In memoriam

Mary Carter

Readers may remember the article in QNT92 in July 2013 on “contacts, catching up and above, all courage”. The courage aspect paid tribute to Mary Carter, the wife of Dr Ian Carter, epidemiologist at WHO headquarters who had volunteered the story of her leg amputation to the newsletter hoping to inspire others suffering from a serious health handicap. Unfortunately, Mary had a stroke on 17 January and passed away on 19 March in Malta. She was in her eighties and still travelling, making the most of life. Mary was a wonderful lady who will be sorely missed. We extend our deepest sympathy to her husband Ian and to her children and grand-children.

Sue Block Tyrrell

Rudolph Slooff 1934-2014

Rudi Slooff passed away on 20 March 2014, three months short of his 80th birthday. He was Director of the Division of Vector Biology and Control from 1987 to 1990 (when the Division was disestablished by the then DG Dr Hiroshi Nakajima) and continued as epidemiologist in the Division of Environmental Health under Dr Wilfried Kreisel until his retirement in 1994, and as a consultant to EHE until 1998.

A medical entomologist (Leiden, the Netherlands) by training and a public health biologist at heart, his first assignment with WHO was in the 1960s as Coordinator of an inter-regional vector control programme based at the Regional Office for the Western Pacific in Manila. His career then took him back to his native Netherlands, where he worked for the Royal Tropical Institute in Amsterdam, and for the Municipal Health Services of Rotterdam. He succeeded Dr Norman Gratz as Director VBC in 1987 at a time when WHO’s efforts in vector control were on the decline. He actively promoted strengthening and institutionalization of training for medical entomologists, and intersectoral approaches to environmental management for vector control. As a Director, his aim was to create opportunities for his staff so they could maximize their professional outputs. Following VBC’s demise, he re-shifted his focus to issues of climate change and human health, which he had already initiated with a joint EHE/VBC workshop on the subject in 1989, well ahead of its time.

After his WHO period he joined the programme of the UN International Decade for Natural Disaster Reduction (IDNDR), focusing on public health aspects. In 2002 he left the Geneva area, and he and his wife Veronica settled in Cours de Pile on the Dordogne River near Bergerac, France, where he enjoyed country life and gardening, and where he passed away on 20 March. He leaves behind three children from his first marriage.

Priscilla Farre, retired staff from WPRO passed away in the evening of March 29 2014. She was 87 years old.

After working with the Philippine Commission, the War Damage Commission and the International Refugee Organization, Priscilla joined the WHO Western Pacific Regional Office in 1953 as a secretary in the office of the Regional Director and from there rose from the ranks until she was appointed Administrative Officer.

She retired in 1986. She worked with three RDs: Dr I.C. Fang, Dr Francisco Dy and Dr Hiroshi Nakajima.

Her younger colleagues remember her as a caring, generous and loving friend.

Lou Rodriguez
Our first day was spent in Amsterdam and our guide warned us to be careful crossing roads and cycle tracks as there are an unbelievable number of cyclists! The morning visit in the town was partly on foot in order to appreciate the lovely architecture from the 17th and 18th centuries, and we went to the famous flower market and the Gassan diamond factory, where some members of the group profited from the exquisite jewellery. The afternoon was spent exploring the well-preserved historic centre of Haarlem and then on to see some of the tulip fields. This year many tulips have bloomed early due to the mild winter. The ship left Holland with night cruising towards Xanten passing by Nijmegen and Arnhem, and arrived in Aix La Chapelle (Aachen), on the 3rd day, for an afternoon guided tour of the old town. This year the town is celebrating the death, 1200 years ago, of Charlemagne. We visited the Treasury of Aachen Cathedral which has an amazing number of beautiful artifacts such as The Bust of Charlemagne, the Cross of Lothair and the Reliquary of Charlemagne.

The ship continued navigating past Düsseldorf and arrived in Cologne early on the 4th day, where we had a guided walking tour in the morning through some small streets giving an insight into the remains of the Roman colony and the medieval town of churches. The famous Cologne Dome is a Gothic church and construction was started in 1248 and was only completed in 1880. We rejoined the ship at Königswinter and continued cruising to Coblenz where we had an evening tour of the town.

The following morning the ship continued along the part considered the most beautiful and romantic part of the Rhine, with its many lovely castles and small towns as well as the famous Lorelei rock. There are many legends concerning this statue of a mythical half girl/half mermaid and the most famous is that the sailors, fascinated by her enchanting beauty, forgot to navigate their boats around the dangerous rocks and currents at this part of the Rhine and many fell to their death when their boats capsized.

We had a guided tour in Mayence (Mainz) during the afternoon including a visit to the Gutenberg Museum in which there are two original copies of the oldest printed version of the Bible. We rejoined the ship at Worms. On the 6th day we arrived at Strasbourg with its Franco-German culture and historic city centre and capital of the Alsace region, with the official seat of the European Parliament, as well as the Council of Europe, with its European court of Human Rights. It is a delightful city and we had a tour by bus as well as on foot and visited famous La Petite France. We drove down an avenue where each plane (platane) tree has a stork’s nest on the top! The guide told us that the most of the storks in Strasbourg remain all the year round as, by keeping them in captivity for three years, they lose their migrating instinct. The afternoon was spent cruising in the wine region of Breisach and that evening we had our “Gala Dinner”, and just to make mouths water, the chef really excelled with soupe d’homard, foie gras, filet de caille and omelette norvégienne!

From Breisach, the 7th day of our cruise, we left for a full day’s excursion to the Black Forest, which was famous in the past for gold and jewellery as well as clock making. Our first stop was an open air museum in Gutach where we saw some very well preserved farmhouses dating back to the 16th century, one had been inhabited by Catholics until 1933 and another, a few metres away, by Protestants until 1965. The farm equipment including a mill, built in 1612, for grinding grain which is still operational. After having lunch at the museum we drove up in the hills through some lovely villages, with beautifully decorated wooden houses and many of which have large cuckoo clocks, until we arrived at the Titisee, a well-known lake situated in a pine forest, and there we had a 30-minute boat trip. The ship arrived early on the 8th day in Switzerland and docked in Basel,
Cruise (Cont’d)

and we left at 8.00 am for a full-day trip and the first stop was the Rhine Falls at Schaffhausen. These magnificent waterfalls, the largest in Europe, were formed in the last ice age. Due to the water level of the Rhine being rather low at this time of the cruise, there were more rocks apparent than usual but that didn’t distract from this spectacular sight.

We left the Rhine Falls and continued our trip back into Germany to Lake Constance and our destination of the Island of Mainau for lunch and the afternoon. This floral paradise was transformed by Count Lennart Bernadotte in 1932, who had a passion for horticulture, and the 45 hectares of land have an amazing diversity of trees, flowers and shrubs, as well as a baroque 13th century castle, a palm house and a large butterfly house. Some members of the Bernadotte family still reside on the island. Thanks to some lovely sunny weather, we were able to admire all aspects of the island.

On 2 May, the 9th and last day of our cruise, we all left the ship at 9.00 am to return to our various homes by minibus, train or plane, after having spent a very memorable holiday on the Rhine.

Bunty Muller

New AFSM members

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

New Life Members:
Alain BRUN, Julia GEER, Maria Nieves CASTILLO, Nicola HAMPELÉ, Edmond MOBIO, Evariste MUTABARUKA.

Conversions to Life Members:
Maria Carmen CELAYA, Bernard GRAB, Julia MIRAILLET, Michael NATHAN, Deidra LEE ROBERTS, Thomas TOPPING,

New Annual Members:
Hélène-Christine BERNARD, Anne LEYH.
A new member does not want her name to be published in QNT.

Save the date: Our annual reception will take place this year on a trial basis on 2 October at 17:00 and not in December as usual.
Open letter to WHO Retirees

Upon retirement from WHO after an eventful career spanning about three decades, I have been trying to spread a message that to remain healthy, one has to follow a healthy lifestyle, which includes a positive attitude to life, rational introspection, good eating habits and allowing the body to adjust to minor ailments with as little medication as possible.

With this objective in mind, I have brought out a book “Portraits of Healthy Life Styles” with support of HelpAge India (a secular, non-profit organization aiming to protect the rights of India’s elderly). It contains narration of experiences of five elderly persons in the age group 75-90 years drawn from different strata of society on how they not only kept themselves in good health but also in high morale despite adverse situations faced by them in their long innings.

Those interested in reading the book may write to me on email: varmask37@gmail.com and I shall be happy to forward a copy via internet.

Accompanying the booklet is also a DVD: “H-T (Head-to-Toe) Exercises”, which also has been uploaded on www.YouTube.com. The DVD can be reached via the link: http://youtube/5TmgVL1Fhik. This contains a collection of exercises by which anyone can exercise all the organs of the body from head to toe in 15-20 minutes. Alternatively, upon opening YouTube website, one can type in the “search” column my full name: “Shiv Kumar Varma” and the DVD shall appear on the screen.

I wish to draw attention of readers to the Foreword and Message (pages vii–x) of the book, containing useful observations and suggestions made by Prof. Ranjit Roy Chaudhury, Adviser, Department of Health & Family Welfare, Government of NCT of Delhi, and Mr M.M. Sabharwal, President Emeritus, HelpAge India. My note on pages xi – xiv summarizes the salient conclusions from the experiences of the five elderly gentlemen.

These observations become all the more significant in the light of world’s largest study on Life Expectancy of 187 countries brought out by British medical journal, LANCET. It shows that globally, life expectancy of males has increased by 11.1 years and of females by 12.1 years. While an average Indian male can expect to live now up to 63 years and female up to 67 years, but, as statistics show, they may spend nearly a decade of their later life in poor health. Advantage of longer life expectancy (if people are not living in good health) is debatable. It therefore becomes imperative that all of us should seriously cherish our health: if it is good, we should endeavor to preserve it; if unstable, we should try to improve it; and if in ill-health, we should urgently seek expert’s help to avoid further deterioration, and, after treatment, return to normal health sooner.

I am hopeful my small effort, especially the “H-T Exercises” (which I have myself been practicing for more than a decade), will provide some assistance in this direction.

I shall look forward to receiving feedback from the readers so that I can be guided by their comments/suggestions in my future endeavor in this area.

Warm greetings,

Shiv Kumar Varma
Email: varmask37@gmail.com
Readers’ Corner

Happy countries

Happy countries. An eye catching title for an erudite study taking years to complete and costing a bomb, no doubt. But what is a happy country? One presumes the report is referring to countries offering its citizens all mod cons, a certain amount of law and order and a place where human life is valued come what may. But were suicide statistics taken into account? Or immigration from the aforesaid graded happy countries to those further down the scale where material necessities comes second to love for nature, Kindness, Generosity and above all, Humour.

This is not to to demean the advance of mod cons, but are the Happy countries overflowing with happy people? I think not. When privileged to live and work in Geneva, a grade 3 happy country, my need for a helping hand, a friendly smile or a useful tip was invariably satisfied by one from, dare I say it, an unhappy country! Everything has its price and stress is undoubtedly the primary contentment-blocker of our industrial age. The more advanced material advantages become, the more vicious, the influence of ‘Big Business’ on our mentality, orienting our value system to one of MBN (More Better Now!). The involvemerit and struggle to survive in an atmosphere of MBN has a tendency to strangle our natural KGH (Kindness Generosity Humour) the elements that define us as human beings. Goodness becomes another matter for state control.

When the King of Bhutan declared his kingdom, (among the poorest on the planet) to be the highest in PIH (Pure inner happiness) he wasn't just keeping his end up in the international arena. He had a point. A point which has sent westerners in droves to the east in search of PIH. It’s nice to have a flushing lavatory of course, a great place for quiet and meditation, but the washing machines, dishwashers and motor cars that give us more time to relax, all too often serve to offer us more time to have more not be more. The urge for Pure Inner Happiness clicks in only when we realise that we are missing out on something valuable - ourselves?

Dear editor of NEWS. I enjoyed Laura Ciaffei's article on the UN's report on happiness so much, that I thought to add a few comments. If you are short of articles for the space available in NEWS, it might be interesting to open a forum and hear how happiness is perceived and achieved by your readers.

Sincerely,

Susan Montgomery (smontgomery@live.co.uk)

On the lighter side

A lady decided to give herself a big treat for her 70th birthday by staying overnight in a really nice hotel. When she checked out the next morning, the desk clerk handed her a bill for $250.00. She asked to know why the charge was so high.

"I agree it's a nice hotel, but the rooms aren't worth $250.00 for just an overnight stay! I didn't even have breakfast."

The clerk told her that $250.00 is the 'standard rate', and breakfast had been included had she wanted it.

She insisted on speaking to the Manager.

The Manager appeared and, forewarned by the desk clerk, pointed out:

"This hotel has an Olympic-sized pool and a huge conference centre which are available for use."

"But I didn't use them, she said."

"Well, they are here, and you could have", explained the Manager.

He went on to say that she could also have seen one of the in-hotel shows for which they were so famous.

"We have the best entertainers from the world over performing here," the Manager said.

"But I didn't go to any of those shows," she said. "Well, we have them, and you could have," the Manager replied. No matter what amenity the Manager mentioned, she replied, "But I didn't use it!" and the Manager countered with his standard response.

After several minutes' discussion, and with the Manager still unmoved, she decided to pay, wrote a check and gave it to him.
The Manager was surprised when he looked at the check. "But madam, this check is for $50.00."
"That's correct. I charged you $200.00 for sleeping with me," she replied.
"But I didn't!" exclaimed the very surprised Manager.
"Well, too bad, I was here, and you could have."

Don't mess with Senior Citizens!

Pension adjustments

We have received from the UN Joint Staff Pension Fund the list of countries in which pensions were adjusted as of April 2014. Those countries have experienced an increase of at least 2% of the Consumer Price Index (CPI). There has been no change in the countries not listed below.

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