The first *Walk the Talk* event was held in May 2018 and was a great success. We are encouraging even more of our members to fly the AFSM flag at the 2019 event on Sunday 19 May in Geneva. For more details see page 12. *Photo: WHO*
The 2018 Solidarity Fair. Photos 1 and 2, our two adorable volunteers who agreed to draw the winning tickets. Photo 3, the 2nd prize winner Sylvie Schaller, WHO staff member who was working on the stall next to the AFSM stall. Photo 4, The first prize was won by the daughter of the Director of the DG’s Office, Mariam El-Halabi. A short report can be found on page 12. Photos: Sue Block Tyrrell
A packed Newsletter for you this time, with details about the invitation extended by Dr Tedros to our Association to participate actively in the ongoing work of WHO, including arranging regular meetings with the DG, and a generous offer for two AFSM members to participate in the Global Management Meeting held in Nairobi in December. Despite the short notice we were able to identify two highly qualified candidates to attend. The DG also ensured that places were reserved at the Executive Board for AFSM committee members to attend the sessions. These reports start on page 4.

David Cohen provides guidance on how to look after our brains in the ever-popular *Our Health* series, and there is also a full Readers’ Letters section, so if you would like to share anything with other members, including your views on the article in *The Lancet*, (see page 8), this forum is yours.

The results of the Questionnaire and Survey, sent to you with the October edition of *Quarterly News* (QNT 113), are currently being analysed and will be published in the next issue. So, if you haven’t yet sent us your Questionnaire and Survey, right now is the time to do so.

*Keith Wynn*

**IMPORTANT CONTACTS**

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Resources for retirement: visit the AFSM website, [http://www.who.int/formerstaff/issues/retirement/en/](http://www.who.int/formerstaff/issues/retirement/en/)

Formalities in case of death of former WHO staff member: visit the AFSM website, [http://www.who.int/formerstaff/about/en/](http://www.who.int/formerstaff/about/en/)
The Director-General and our Association – recent developments

From the earliest days of his tenure Dr Tedros has shown particular interest in former staff and our Association. He was present at our General Assembly in October 2017, and said then that we should “arrange to work together, to help each other and remain as a family” (QNT 110). In December 2017, we met with Dr Tedros and he agreed that we should send a letter to all retirees to explore their interest in participating towards WHO objectives (QNT 111). Nearly 80 replies have been received. Later these respondents will be invited to be included in a special list of potential consultants (paid or unpaid), a list that will be proposed to programme managers.

An immediate opportunity offered by the Administration to “recent” retirees was to apply as mentors. As of the end of 2018, 11 retirees had been enrolled in this programme (QNT 114).

Then, on the 23rd November 2018, following his request, Dr Tedros met our newly elected Executive Committee. We informed him of our progress to date and Dr Tedros stated that he wanted to do more to involve former staff. He suggested that the 5-year limit for mentoring be reviewed and it was subsequently agreed to extend it to 7 years.

The DG expressed the hope that former staff could be interviewed on the occasion of WHO's 70th anniversary celebrations and that they would have the opportunity to tell their stories to present staff, and that their experiences and wisdom could be passed on from generation to generation. We are currently discussing how to put this into practice.

The DG informed us that he welcomes articles in our Quarterly News such as “News from WHO” and coverage of specific WHO programmes, as he considers that retirees should not just focus on the past but be kept up to date with current developments.

Among other proposals by the DG, it was decided that the Committee would have places reserved at meetings of the Executive Board and at the World Health Assembly. We will be invited to major events such as the ceremony of laying the foundation stone of the new building now being constructed at WHO HQ. Three regular meetings of members of the Executive Committee with the DG are scheduled for 2019 and it is envisaged that the DG will address our General Assembly on 22nd October.

Former staff are invited to participate in the Walk the Talk event, held every year in Geneva. WHO calls on all countries to encourage their populations to be active every day in order to stay healthy, so WHO staff and retirees should lead by example!

Finally, at this 23rd November meeting, Dr Tedros invited the Committee to nominate two members of the Association to participate in a high-level WHO management meeting in Nairobi from 10th to 12th December.

Despite the short notice we were able to identify two colleagues, Ms. Ann Van Hulle, whom you know well and who led the administrative and finance departments in several regional offices, and Dr Charles Boelen, who has 30 years’ experience at country, regional, and headquarters levels of promoting strategies for the education and utilization of health personnel. Their report of the meeting follows.

The report from Sue Block Tyrrell, Laura Ciaffei and Dev Ray who took up the places reserved for AFSM at the Executive Board is also provided below.

We very much appreciate this new collaboration and will keep you informed.

JP Menu
AFSM’s Participation in the 10th WHO Global Management Meeting

We had the honour to attend the WHO Global Management Meeting which took place in Nairobi, Kenya from 10 to 12 December 2018. This followed an invitation from the Director-General, Dr. Tedros, which he extended to our President, Jean-Paul Menu when the newly-elected Executive Committee met with him recently. In the spirit of one WHO family, the DG welcomed the engagement of two former staff in this important meeting held at a time when WHO embarks on the implementation of the 13th General Programme of Work (GPW) and as the Organization takes the next steps to further prioritize its global transformation. GPW 13 has a triple billion target namely: 1 billion more people with universal health coverage, 1 billion better protected from health emergencies and 1 billion enjoying better health and wellbeing primarily through multi-sectoral policy, advocacy and regulation. Participants included the DG, DDGs and ADGs, RDs, Directors and other senior staff, and WHO country office representatives from all regions. President Uhuru Kenyatta of Kenya officiated at the opening of the meeting.

As a symbol of WHO’s increased focus at the country level, the Global Meeting was held outside of Geneva on this occasion. WHO aims at becoming a more “agile” and results-orientated Organization. In order to maximize its impact, it aims at having “best in class” technical and business systems and processes. Details of reforms in those areas were presented and discussed at the meeting. Another major focus of the meeting was WHO’s engagement in the UN Reform which advocates effective collaboration with the UN development system and partners. WHO is committed to strengthening its country-level leadership position. The meeting benefited from a briefing by the Head of the UN Development System Transition Team and by the UN Deputy Secretary-General (connected via video-conference).

A special session was held to celebrate Ebola Workers who have devoted themselves to working in Ebola affected countries under very challenging conditions.

As WHO celebrates its 70 years of existence this year, it is a timely moment to embark on significant reform which enables it to meet the challenges it continues to face and to respond to the needs of the world in the area of health. As one moves forward, it is always good to look back and reflect and learn from lessons of the past. We believe that our participation as former staff representatives at this meeting highlighted this point. We are convinced that under Dr. Tedros’s leadership, former staff can feel part of the WHO family and of the important changes taking place to enable the Organization to reinforce its position of leader in health within the UN system.

Charles Boelen and Ann Van Hulle-Colbert
A view of the EB

Executive Board – 144th Session. The Board met from 24 January–1 February 2019, under the chairmanship of Ambassador Maria Nazareth Farani Azevêdo, Permanent Representative of Brazil to the United Nations in Geneva. As indicated in the article on recent developments between the Director-General and the AFSM, our Executive Committee was offered two reserved seats for the EB in the gallery amongst the overflow of delegates from Member States. There were certainly plenty of delegates, as almost 100 Member States, which are not currently EB members, were represented, in addition to a large number of non-State actors (formerly termed NGOs). Those who attended EB sessions earlier, e.g. at the turn of the century, will recall that the nature of the EB has changed. At that time, few non EB Member States were represented and seldom took the floor in contrast to the current situation which is like a mini World Health Assembly. Many more Secretariat staff were present in the main room and answers to questions were often provided by programme managers. However, the conduct of the Board was smooth and it went without any hitches.

Deliberations were lengthy, with interventions firstly from EB members, then other Member States and finally the non-State actors, including young representatives from the International Federation of Medical Students Associations who focused their statements on a healthier future for the next generations. Dev, Laura and Sue covered many of the sessions and enjoyed the breaks every two hours when the screens would show different dances each time from around the world, to get the participants out of their seats and moving around to some lively music!

In his report to the Board (document EB144/2) and his statements, the DG mentioned his recent travels, notably to the Democratic Republic of the Congo to celebrate new year with WHO colleagues on the front-line fight against Ebola, and he paid tribute to all staff working in dangerous environments. He referred to the 13th General Programme of Work which took effect on 1 January, with its “triple billion” targets: 1 billion more people benefiting from universal health coverage; 1 billion more people protected from health emergencies; and 1 billion more people enjoying better health and well-being. To deliver that impact, WHO needs USD 14.1 billion over the next 5 years, so it has asked for a 13% increase in its base budget. During the EB, considerable discussion took place on the 13th General Programme of Work, including the need to monitor progress at the country level. There were calls for further assistance to many countries on health information systems.

In his report, the DG referred to the Board’s upcoming discussions on several new initiatives: a draft global action plan on refugees and migrants; a draft global strategy on health, environment and climate change; and a draft global plan of action on climate change in small island developing States. In 2018, WHO had responded to 66 outbreaks and other emergencies in 49 countries – WHO’s events-based surveillance system picks up around 7000 signals of public health threats every month, of which an average of 30 require formal field investigation. Other highlights for this year include a special initiative to expand access to quality and affordable care for mental health in 12 countries, for 100 million people; the re-launch of the Global Health Observatory; the first High-Level Meeting on Universal Health Coverage at the General Assembly in September; the launch of the full version of the Global Action Plan for Healthy Lives and Well-Being for All; the setting up of an expert panel to develop global standards for oversight of human gene editing; and reform of the global internship programme, with a target of receiving 50% of interns from low- and middle-income countries by 2022.

To succeed and deliver the General Programme of Work and the Sustainable Development Goals as part of the UN’s overall efforts, the DG said that WHO must transform and referred to the four necessary shifts: measurable impact; relevance in all countries; normative and technical excellence; and innovation, with a focus on digital health which is the future of health care.

Among the resolutions recommended by the EB, Dr Poonam Khetrapal Singh was reappointed as Regional Director for South-East Asia for a further five years from 1 February 2019; and Dr Takeshi Kasai was appointed as Regional Director for the Western Pacific for five years from 1 February 2019,
Highlights of other news

- **The 2017 WHO Rewards for Excellence** were awarded end 2018 with every participating major office represented. The **Director-General’s Rewards** went to: AFRO – Raul Thomas, Director of General Management for his exceptional leadership; EMRO - the Polio Eradication Team in Afghanistan led by Hemant Shukla for having achieved great progress under difficult circumstances; EURO – the WHO/Europe Vaccine-preventable Diseases and Immunization Team led by Robb Butler for progress towards a region free of vaccine-preventable diseases; HQ – the Expert Networks and Interventions Team led by Gaya Manori Gamhewage for addressing gaps identified during major epidemic crises; SEARO – the Department of Communicable Diseases led by Swarup Kumar Sarkar for its crucial part in many public health achievements; and WPRO – Linette Te, Information Technology Officer for her regional IT vision. The **Director-General’s Rewards for Health Emergency Teams** went to: AFRO – the Health Emergency Team of South Sudan led by Argata Guracha Guyo; EMRO – the Logistics Support to Country Programmes Team led by Sady Elbilbassy; EURO - the WHO/Europe Health Emergency Information and Risk Assessment Team led by Jukka Tapani Pukkila; HQ – the WHO Health Emergency Team (WHE) in the African Region led by Ibrahima-Soce Fall; and WPRO – the WPR WHE IHR Joint Evaluation Coordination and Mission Implementation Team led by Ailan Li and Babatunde Olowokore. The **Director-General’s Reward for HQ** went to Patrick James Lydon, Technical Officer, Expanded Programme on Immunization Plus for successfully leading and building his team from scratch and for its work on supply, technologies and finance.

- **WHO has highlighted ten threats to global health in 2019**: air pollution and climate change; noncommunicable diseases; a global influenza pandemic; fragile and vulnerable settings with weak health services; antimicrobial resistance; Ebola and other high-threat pathogens; weak primary health care; vaccine hesitancy; dengue; and HIV.

- The **Five tips for a healthy diet** were promoted in the new year: eat a variety of food; cut back on salt; limit sugar intake; avoid harmful use of alcohol; and reduce use of unhealthy fats.
A new statue can be found on the ground floor of HQ by the main lifts, of the Hungarian-born obstetrician and surgeon Dr Ignaz Semmelweis, known as one of the forefathers of medical hygiene. His discoveries relating to puerperal fever are recorded in the UNESCO World Heritage List.

The new parking policy at HQ, due to come into effect from 1 February, has been postponed to end March 2019. We will keep you informed. Further information and documentation can be found on the WHO website – www.who.int

Sue Block Tyrrell

WHO IN THE MEDICAL PRESS

Report in The Lancet: WHO powers up in 2019

Our readers will know that The Lancet is among the world’s oldest, most prestigious, and best known general medical journals. They will also know that in the past this journal and its editor-in-chief Dr Richard Horton have been highly critical of WHO, its work, its politics, its structure, and its financing.

We refer our readers to an article recently published in this journal in which Richard Horton, attending WHO’s first Global Burden of Disease Forum in Geneva, reports in fulsome terms how the DG, Dr Tedros, delivered a passionate vision for a greatly strengthened WHO. The article concludes with the question, “Could 2019 be WHO’s year of rebirth?”. An electronic copy of this article may be consulted on the AFSM website at the following link, https://www.who.int/formerstaff/about/Lancet_on_WHO_January_2019.pdf?ua=1

The members of the Quarterly News Editorial Board reacted to the article with mixed views. Some saw this as a welcome change of heart on the part of Horton and The Lancet and felt that we should applaud Dr Tedros for having stimulated a shift in Horton’s opinion of WHO. Others were more circumspect and questioned whether the article simply reflects the view that WHO is not much use as it is and needs to be ‘transformed’ and born again. Readers may wonder whether The Lancet view of WHO is really less negative now than in the past, and whether it is widely shared.

We leave our readers to decide for themselves, and Quarterly News would be delighted to have your reactions.

The Editorial Board

1 Reference: (Lancet, 2019; 393:14, January 5, 2019)

2019 AFSM GENERAL ASSEMBLY AND ANNUAL RECEPTION

SAVE THE DATE

Tuesday 22 October 2019

For your convenience we are organizing the AFM General Assembly and the Annual Reception on the same day, so that travelling to and from WHO will only need to be undertaken once.

Please note this date in your diary, we would be very pleased to welcome you to both the General Assembly, which commences at 13.30 in Salle D, followed by the Annual Reception in the WHO Cafeteria at 17.00.

If you are unable to attend both do please try and get to either the General Assembly, where your views – and your vote on any issues presented – will be welcomed, or to the Annual Reception, where you can relax and enjoy the company of many former friends and colleagues.
How to combat ageing of the brain

Situated in the cranial cavity, the brain contains more than 100 billion cells and is the seat of vegetative and higher cerebral functions (cognitive functions, reception and transmission of messages to different parts of the body). It is the brain that links us to the world around us.

A reminder of the anatomy and functions of the brain

The brain, which consumes 20% of the energy produced by the body, weighs barely 2% of the total body weight (less than 1.5 kg on average). It is immersed in the cerebro-spinal fluid and is structured in two hemispheres – right and left – which are connected to each other. The right brain commands the left side of the body, and the left brain the right side. The right hemisphere is the seat of emotions and senses, the left of reflection and intellectual functions. It is currently believed, however, that the two hemispheres collaborate closely in all functions.

The cerebral cortex (grey matter) is the outer layer of the brain and is separated from the bone of the cranium by the meninges which protect it from trauma and infections. It is made up of 5 lobes: frontal, parietal, temporal, occipital and limbic (in the form of an arc, situated low down and not visible on the diagram).

The cerebellum is situated in the lower part of the brain and is responsible for the coordination of movements and the balance organs situated in the inner ear. The cerebellum is linked to the spinal cord by the brainstem which contains numerous nerve centres that regulate the fundamental involuntary functions – cardiac rhythm, respiration and body temperature.

The hypothalamus is a small cluster of neurons (nerve cells) situated at the base of the brain. It is responsible for a number of functions including sleeping and waking, sexual impulses, thirst and hunger, and plays an important role in emotions, pain and pleasure.

The pituitary gland is a small gland in the form of a pea attached to the hypothalamus. It secretes the hormones that regulate other glands and the control of growth, reproduction and many metabolic functions.

The frontal lobe is situated in the anterior region of the cerebral hemispheres, just behind the forehead. It is responsible for voluntary motor coordination, muscle control, and rhythmic coordinated movement (mastication, swallowing).

The parietal lobe is located in the middle part of the brain. It processes sensory and spatial orientation. The temporal lobe is situated at the side near the temporal bone. It contains centres of hearing, taste and memory. The occipital lobe is located at the back, near the occipital bone of the skull. It contains the centres of vision.

Pathologies

Disorders include cardiovascular problems leading to a stroke, depression, different types of dementia (Alzheimer’s disease and others) epilepsy, Parkinson’s disease, multiple sclerosis, and lateral amyotrophic sclerosis. As life expectancy increases, these diseases are likely to become increasingly important causes of mortality in the world. However, although most of these conditions are still incurable, many avenues of research aimed at prevention and treatment – particularly for
Alzheimer’s and Parkinson’s diseases – are being very actively pursued.

**Brain function during ageing**

To maintain the brain in good working order it must be constantly stimulated. We lose very few neurons during ageing (on average 1% per year after 65). Ageing mainly affects the synapses (connections) between the neurons. These can regenerate in response to stimulation.

Good irrigation of the brain is essential. Cerebral ageing is mainly due to hypertension which causes degeneration of the blood vessels that supply the brain with oxygen and glucose, the brain’s essential nourishment.

As for healthy ageing in general, there are three main factors:

**A balanced diet** rich in antioxidants (fruit, in particular grapes, pomegranates and red fruits) and spices (e.g. turmeric) will help to eliminate toxic waste and will limit the degradation of dopamine and serotonin, two key chemicals which regulate our mood and motivation.

Obesity and over-eating produce toxic waste for the brain. Weight control is therefore very important. Of course, tobacco and alcohol are harmful and should be avoided.

**Physical activity** is essential to maintain good brain function. During physical activity, endorphins are released. These hormones facilitate the transport of oxygen in the blood and activate dopamine and serotonin. Sport also has another advantage: practising over 30 minutes of physical exercise daily creates micro-stress in the tissues of the body, particularly in the brain. This stimulates the production of BDNF (Brain Derived Neurotrophic Factor), a growth factor which in turn stimulates the renewal of neurons. Physical exercise is very good for the memory and people who regularly practice a physical activity have better results in cognitive tests (better concentration, cerebral agility and memory).

**Staying connected** to others is very important. Doing crosswords, playing bridge or chess etc. are useful but not enough. Maintaining, and if possible developing, social contacts, continuing to learn and remaining curious and interested are necessary. Friendly or loving relationships should be maintained: they stimulate oxytocin production, which in turn activates dopamine, the pleasure and good humour hormone.

Work, whether voluntary or paid, assists good ageing of the brain on condition, of course, that it is satisfying. It also enables contact with others. According to a recent study (2), each year of work after 60 years of age reduces by 3% the risk of Alzheimer’s disease. Avoiding stress, arterial hypertension and excess weight are also important factors for its prevention. Avoidance of stress is particularly important because anxiety and depression accelerate ageing.

The study of centenarians shows that their brains are no different from those of others. Genetic factors play a role but life-style factors are at least as important, and in general centenarians have led a healthy, active life, without excess, and have maintained a sense of curiosity about their environment.

**Dr David Cohen**

Sources

1. Professor Sablonnière : The brain - keys to its development and its longevity (editions Odile Jacob);
2. INSERM (National Institute of health and medical research, France) CHU Lille, France;
3. www.frcneurodon.org/anatomy of the brain and nervous system;
4. Mayo clinic : Brain diseases
BE AWARE OF COMPUTER SCAMS AND “PHISHING”

Scams and Schemes

Who among us has not been on the receiving end of false promises of riches from some prince/businessman/lawyer from a faraway land who needed to place his millions in a bank outside his country; congratulations on winning a sweepstake or lottery urging the reader to quickly call a listed number within a specific date; a phone call from an alleged Microsoft technician to remotely repair your computer; a reminder to pay invoices for items you have not ordered; information on how to collect a tax refund; a promise for a fantastic all-expenses paid vacation in a beautiful resort, which does not exist; a distress email message from a friend whose purse was stolen while travelling and urgently in need of cash to pay for hotel; a hard luck story from someone you’ve been communicating with on an internet dating site; or telephone call from a supposed long lost relative who wanted to meet you, and the list goes on and on.

And the one that scared the living daylights out of me – an email message to me with the subject heading containing a password I had used many years ago with a menacing message “I know all about you. Let’s cut to the chase.” Following a few days of fear and anxiety, I finally deleted the message, scared that he would write again. For the past four months that message has haunted me. Who knew my password? How did he get it? What did he want? Why me?

And then, liberation! During a Tuesday morning permanence as I was drafting this article, I mentioned this strange email to an AFSM colleague who was also in the office. Incredibly and much to my relief, he told me he had received a similar message, scared that he would write again. For the past four months that message has haunted me. Who knew my password? How did he get it? What did he want? Why me?

And then, liberation! During a Tuesday morning permanence as I was drafting this article, I mentioned this strange email to an AFSM colleague who was also in the office. Incredibly and much to my relief, he told me he had received a similar email and that it was a well-known scam to extort money. He said that all I had to do was go online and type in “use of old passwords” or any other suspicious heading. I did. And there it was, information about the scam and what to do about it.

If you have been a victim, well, you are one of millions out there from all ages, backgrounds, geographical locations, who have fallen prey to the scam artists – experts in the psychological techniques and exploiters of the gullibility, frailties, susceptibility and vulnerabilities of the human mind, the human being and their emotions. Don’t feel shame or embarrassment. Learn from your experience. Stop it from ever happening again to you or anyone else. Don’t suffer alone; share it with others. You might have to face family and friends who will sanctimoniously remind you of your stupidity with their sullen frowns and slow shaking of the head. What to do if you are scammed? Report it to your local authorities, police or consumer service.

How to prevent these unscrupulous con artists from winning? The first rule is as old as time itself – if it sounds too good to be true, it probably is. Below are additional tips:

- Do not click at all, or click with caution. Do not open a link or an attachment if it is from a stranger.
- Check “Red Flags” such as misspellings, bad grammar that can help warn you of a fraudulent correspondence.
- Never, ever give out bank details over the phone or email. Often you can’t get your money back if you’ve been scammed, especially if you’ve handed over cash.
- Contacted out of the blue by a long lost relative? Be suspicious.
- Your bank, the police or other officials will never come to collect your bank card, ask for your PIN or come to your house.
- Make sure your website is secure if you are buying on line. If you’ve paid for goods or services by credit card you have more protection and if you used a debit card you may be able to ask your bank for a chargeback.
- Pressure to make a decision right away? Say no thank you.
- Computer firms do not make unsolicited calls to fix your computer.
- DON’T SUFFER IN SILENCE. TELL OTHERS ABOUT THE SCAM.

Maria Dwegghah
Walk the Talk: The Health for All Challenge 2019

Readers may recall the article in QNT 112 on the first Walk the Talk event in Geneva in May 2018. The DG is keen to make this an annual event and the second edition will be held on Sunday 19 May in Geneva. It will be a celebration of the importance of health and a recognition of the vital role that the City of Geneva plays as a hub for global health. The event will be open to people of all ages and abilities and set over different distances ranging from 3–8 kilometres. We hope that many of you living near to Geneva will be able to take part this year. For further information and to sign up, please consult the website – https://www.who.int/news-room/events/detail/2019/05/19/default-calendar/walk-the-talk-the-health-for-all-challenge-2019

Such events have already been held elsewhere in the world and anyone interested in holding a similar event should contact WHO at walkthetalk@who.int for more information.

SOLIDARITY FAIR

The 23rd Solidarity Fair was held on 5 December 2018 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. (Photos on page 2)

As usual, many humanitarian associations participated with stalls selling food from around the world, arts and crafts, greeting cards, and we could enjoy the usual bake sale. The AFSM was pleased to organize its traditional tombola, helped by several Executive Committee members – Michèle Bernard Evans, Sue Block Tyrrell, Laura Ciaffei, Barbara Fontaine, Keith Wynn and Anne Yamada. We provided three prizes: two different-sized baskets of Italian confectionery, and a panettone. We raised the amount of CHF 650 – just beating our past record, which has been donated to the Solidarity Fund. The first prize was won by the daughter of the Director of the DG’s Office – Mariam El-Halabi, the second prize was won by a staff member working on the stall next to us – Sylvie Schaller, Assistant to the ADG for Communicable Diseases, and the third prize was won by AFSM member Mary Dillon. We found two delightful “mains innocentes” helping on a neighbouring stall, to draw out the winning tickets.

We are pleased to continue to support this event to demonstrate our solidarity with the staff and the Fund. It also provides an excellent opportunity for us to promote our Association. Several local AFSM members came to the Fair and bought a tombola ticket, some people asked for information on the Association, and one person took the enrolment form and has since joined as a life member.

Sue Block Tyrrell
The Pension Fund has gone through many reviews during the last few years. The Fund operates under Regulations which were first adopted by the UN General Assembly in 1949 and have since been amended by the Assembly a number of times. The Regulations are thus subject to purview by the UN General Assembly. The Administrative Rules and the Rules of Procedure, which are used to conduct business, can be amended by the Pension Board.

To recapitulate, the Pension Board consists of 33 members in a tripartite fashion – one-third from the General Assembly or the Governing Bodies, one-third appointed by the Secretary-General or the Directors-General of the Organizations and one-third elected by the participants. Twelve members are from the UN while 21 members are from other Organizations. The retirees are represented through Observers who have been named by the Federation of Associations of Former International Civil Servants (FAFICS). The Pension Board works on the principle of consensus and hence votes are seldom taken.

The recent past has seen some differences of views among the participants – the representatives of participants from the UN (especially CCISUA or Coordinating Committee of International Staff Unions and Associations of the UN System) have been unhappy with the previous Chief Executive (CEO) of the Fund – Sergio Arvizu – while the other participants have not agreed with this view. This has led to some conflictual situations and some issues have been aired in public. The Pension Board and representatives of FAFICS have, on the whole, supported Mr Arvizu. Such a difference of viewpoints led the UNGA to ask the OIOS (Office of Internal Oversight Services) to undertake a review of the governance structure of the Pension Board. While the administration of pension benefits has been under the responsibility of the CEO, the investments of the Fund are under the control of the SG who appoints a Special Representative to oversee the investments with the help of an Investments Committee of external members.

Whatever the merits of Mr Arvizu were, he tried to consolidate some power including oversight of the investments and the control of the legal disputes between staff and the Pension Fund. At the time of Mr Ban Ki Moon, the previous SG, the Special Representative in charge of investments was not considered very effective and has been replaced by Sudhir Rajkumar. Due perhaps to the attacks on him, and possibly his perception of a lack of strong support from the current SG – Mr Gutteres – Mr Arvizu has been on sick leave for about one year until he resigned at the end of 2018. Currently Janice Dunn Lee, a retired Deputy DG of IAEA, has been appointed as Acting CEO pending the search for a permanent replacement 1. The Deputy CEO – Tom Dooley – has also retired and thus there is a vacuum at the top management level of the Fund secretariat.

It is important to keep in mind the recent events in the Pension Fund history and the rapidly evolving change of personalities in order to assess the UNGA resolution.

The OIOS report was somewhat critical of the structure and procedures of the Fund to which many members of the Pension Board took exception. For instance, the report called into question the number of UN representatives on the Board in view of the overwhelming majority of the UN personnel – including large peace-keeping operations. However, it is unlikely that the many Specialized Organizations will cede control to the UN in the Board. Also, the report had called in question the role of FAFICS in naming the retiree representatives as Observers since they currently represent around one-third of retirees and their “undue” weight since decisions are taken by consensus and hence differences between members and Observers are blurred.

FAFICS has counteracted by quoting Rules of Procedure and that it is a Non-State Actor situated in Switzerland. Further, the fact that the OIOS did not consult with many of the bodies before preparing the report has not been taken kindly.

Based on the report of the Pension Board, and the OIOS, the UNGA has adopted the resolution cited

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above. The full text of the resolution can be found on the UN website at
scroll down and click on A/RES/73/274 to download a PDF or Word file. Some of the provisions of
the resolution are:

- It noted that a working group has been
  established by the Board which will look into,
  inter alia, the composition and size of the
  Board; modalities to directly elect retiree
  representatives; the need for the Assets and
  Liability Monitoring (ALM) Committee.
  Obviously, it did not consider the resources
  needed to directly elect retiree
  representatives from around 80,000 retirees
  many of whom do not have electronic
  communication;
- The Board feels strongly that the ALM
  Committee is needed since there is no other
  mechanism to compare the assets in the light
  of the liabilities;
- The Board has accepted the comments on
  transparency and the need for performance
  monitoring of the senior management of the
  Fund secretariat;
- The Assembly separated the role of the CEO
  of the Fund from the role of the Secretary of
  the Pension Board, which will consume
  unnecessary resources;
- It requested a review of the delays in awarding
  initial pensions and an independent
  assessment of the Integrated Pension
  Administrative System (IPAS);
- Noted the functioning of the Office of the
  Investment Management under the Secretary
  General who is the fiduciary of the assets of
  the Fund.

The tripartite Working Group structure endorsed by
the GA does not explicitly mention the role of
retirees but does not exclude them either. FAFICS is
represented in the Working Group.

The final lesson for FAFICS is to monitor the
developments carefully and act independently as
the retirees’ representatives and not be open to
charges of collusion with the CEO of the Fund.
Moreover, it is paramount that FAFICS maintain
good relations with participants’ representatives.
The resolution has not altered any current working
modality of the Fund but the future is not that
certain. However, as the governance structure of the
Fund has little impact on the viability and sustain-
ability of the Fund, retirees ought to feel reassured.

Dev Ray

SHI: IMPORTANT INFORMATION

The Staff Health Insurance Rules for 2019 have
been sent to all participants, active staff and
retired former staff. The Rules were accompanied
by an information note highlighting the changes
introduced since 2018. To avoid any disagreeable
surprises when submitting your claims please study
the Rules carefully before undertaking medical
care.

The Annual SHI Newsletter dated February 2019
was also sent, either by email or by mail to those
retirees who have not yet provided their email
address to SHI. A recent survey showed that a
significant proportion of participants do not read it.
This is very unwise because the Newsletter
contains very useful information, for example:
- How to pay less for medicaments for
  residents in the Geneva area
- Lists of hospitals in many countries that have
  signed agreements with SHI

- The importance of vaccinations for yourself
  and the youngest members of your family
- Guidelines on submitting reimbursement
  claims online (SHI Online)
- And a message from your elected
  representatives on the SHI Management
  Committees

Under the heading News from around the World in
this issue of Quarterly News you will read that
retirees living in Cairo have benefited from an
information session organized by the SHI team to
provide a better understanding of the Staff Health
Insurance. We have also been informed that the
office of the WHO Representative in Bangkok also
organizes similar sessions for retired former staff
living in Thailand. We can only hope that such
initiatives will take place in more countries.

JP Menu
READERS’ LETTERS

A cautionary tale about taxes in France

In March 2014 I received from the Association of Former WHO Staff Members an information circular stating that all WHO retirees, as well as all current staff members, living in France needed to inform the French tax authority about all the accounts they possessed in non-French banks. This was quite a surprise for me. Had this always been the case or had a law concerning foreign bank accounts recently been enacted?

When I left the UK to become a WHO staff member in 1987 and took up residence in France, nobody in the WHO Personnel Department told me I should mention to the French tax office that I had a non-interest account with a British bank (NatWest). When I opened a Swiss account to receive my salary, nobody in the UBS (or the SBS as it was then) advised me that I should declare my new non-interest account to the French authorities. So, when the tax declaration form arrived each year in May, I simply attached the evidence that my salary came from WHO. I am now told that ignorance of a French law is no excuse for transgression; meaning that I should be aware of every one of the thousands of French laws otherwise I could be guilty of fraudulent/criminal behaviour!

In March 2014, before the deadline for informing the French tax office, I declared the existence of my foreign bank accounts. That was that, I thought, since there was no response from the tax office for 18 months. Then I received a menacing letter from the Direction Nationale des Verifications de Situations Fiscales threatening severe penalties for tax evasion and telling me to submit a “dossier” containing all relevant information. But what information? No precise details had been given. I eventually collected a slim dossier of what I deemed might be relevant (name and number of bank accounts, date of opening, etc.). It was a further 12 months before I received a reply telling me the dossier was incomplete and attaching, belatedly, a document that detailed all that needed to be included in the dossier. Two more rounds followed, where my submitted dossier became thicker and the replies requested yet more details. The final outcome came 4 years after the start of the investigation. I discovered that the penalty for simply possessing a foreign bank account amounted to 1500 EUR per year of non-declaration! However, in view of my complete cooperation with the tax office, they would kindly reduce this figure to a mere 600 EUR. Fortunately, in its investigation the tax office can go back no further than 10 years (only 8 years in the case of British accounts), otherwise the penalties would become astronomical. As it was, the total sum demanded was equivalent to 3 years of normal tax payments. Furthermore it was to be paid within 30 days; otherwise the sum would increase severely.

I should mention that friends in the same situation as me (retired WHO staff living in France) who, after having received the warning letter from the AFSM, similarly declared in 2014 possession of non-French bank accounts, have not had their accounts investigated as I have. Was I just the victim of a random check?

The morals of this tale are that if you are living in France:

1. being secretive about possessing non-French accounts (whether or not they earn interest) is a risky business; in the eyes of the authorities ignorance of a French law is no excuse
2. making a clean breast of past financial information also carries a significant risk and can incur hefty fines
3. perhaps, after all, paying a tax expert to check your financial situation is a worthwhile move in order to keep on the right side of the law, to avoid unpleasant surprises, and to sleep well at night.

Philip Jenkins

1 AFSM Info AOMS, January 2014, Distribution: France no. 1, Obligation to report on foreign accounts held by residents in France. A conference on the above subject was organized on 12 December 2013 at the ILO by the Association des Fonctionnaires Internationaux Français (AFIF) with the support of the ILO Staff Association and in the presence of a representative of the Permanent Mission of France to the UN, Geneva.
A reader’s plea for more contributions from members

Referring to the recent questionnaire requesting our comments on the Quarterly News, here are my views, being among those who perhaps feel more contribution on their part could be forthcoming.

I would like to see input from a wider membership of our Association of Former WHO staff. The vast majority of authors at the moment reappear in every issue. Surely we readers have interesting tales to tell, of our travels, books we have enjoyed, films which have impressed, theatre and operas which have enchanted, funny interludes which have made us laugh. It is interesting to read about the Executive Board and the World Health Assembly, all very serious stuff, but a more personal and lighthearted slant could perhaps be introduced, relevant to the readers of the QNT.

We, as retired staff, are placed, whether we like it or not, in boxes labelled, “old”, “very old” or even “very, very old”. I think such age categories tend to slip off the chart after the age of 75, classified as “very, very old”. So perhaps more articles could be sent to the Editor on members’ experiences concerning pension, health insurance, long-term care, availability of home-care facilities, retirement homes, both positive and negative, and if possible, with a touch of humour.

On a personal note, I am now in the “very, very old” category. I recall when my older brother reached the ripe old age of 75; I called him, as usual on his birthday, and asked him how it feel to reach three-score years and ten + 5 (“living on borrowed time” as my mother often said after reaching 70). And he chuckled, as is his wont, and said “I don’t feel any different from when I was 20. The thing is, though, there’s this little old man stalking me everywhere”. Which is how those of us lucky enough to enjoy good physical and mental health feel. Still young on the inside, pity that the outside disagrees.

And talking of feeling young, I would highly recommend the film “Mary Poppins Returns” – it’s an uplifting, positive, funny, poignant, beautiful, and very clever film. A tonic for all.

Never lose sight of the child within – and let it out as often as possible.

Wendy Gray

Discovering cancer

In 2014 I developed herpes zoster, an agonising illness, from which I have not recovered; there is still considerable pain in my left side and in the left side of my back. I was treated by an anaesthetist who ran a pain clinic. At the time, she warned me that there was a risk of developing cancer as my immune system had been affected, advising me to have an annual check-up.

At an allergy and lung clinic in September last year, I was advised to have a lung scan as there were respiratory problems; I was informed that my lungs were fine, but there was a small tumour in my right breast. I then had a further examination at a private clinic where the computer indicated two small tumours. It came as a shock as I had always examined myself on a regular basis; in fact, the chief oncologist at the hospital could not feel the tumours either.

Following this diagnosis, I was operated for breast cancer at the end of October 2018, including the surprise removal of all lymph nodes, a third of which contained cancer cells, I was offered chemotherapy. I use the term “surprise”, because the chief oncologist did not believe there was cancer in the lymph nodes as the two tumours in the lower half of my right breast were so small.

An oncologist asked me whether or not I intended to go ahead with chemotherapy treatment, showing me two surveys on his PC, one Danish and one British which were almost the same, the latter called ‘Predict’. He pointed out that a woman of my age, seventy-four, could dispense with chemotherapy if I agreed to five weeks (Monday to Friday) of radiation therapy and to take an anti-hormonal tablet called ‘Letrozol’ (2.5mg) for five years. The risk of developing cancer again within a period of five years was 5%, within a period of 10 years, 25%.
I gave it a lot of thought, concluding that, in five years I would be almost eighty years of age, and that none of us can live for ever. I decided, therefore, to avoid chemotherapy, which had caused me considerable anxiety as I had read all brochures available at hospitals describing side effects, some of which could affect the rest of my life.

Prior to receiving a bi-annual injection (infusion) to ensure that osteoporosis is kept at bay by increasing bone density, I had an entire body scan to check for any trace of cancer which fortunately was not the case.

So far, I have had 14 radiation therapy sessions, not yet feeling tired, although it is to be expected in the long run. The last treatment will be on 6 February, followed by a visit to a skin specialist in oncology on 19 February.

The treatment I have received here in Denmark has been timely and altogether excellent. Breast cancer is a diagnosis where there is considerable success.

Joining a local cancer group has helped a great deal, learning from others who are suffering from various forms of cancer. I hope those who read this article will be on their guard ensuring regular self-examination, and that those who have to undergo an operation and ensuing treatment will realise that it is wonderful how much has been achieved in the field of cancer.

Jill Conway-Fell

ASTRONOMY

The sky for April – June 2019

The only two bright planets at the moment are Mars, following the Sun down in the west just after sunset, and Jupiter rising in the opposite part of the sky in the late evening, and higher up in the southern hemisphere. Jupiter reaches opposition on 19 June, which means that it is highest in the sky at midnight (1 am in the northern hemisphere).

It is a good time for identifying some constellations. Leo is a great constellation to get to know, as it is one of the few that actually looks like the thing it represents – a crouching lion. Find it quite high in the evening during April, and sinking down to the west during May and June. A phone sky app will help if you have one.

One of Leo’s most recognisable features is a backwards question mark of stars with the bright star Regulus at its base. In country areas this was referred to as the Sickle, something that our ancestors were more familiar with than question marks. This also represents the mane of the proud lion, facing west, and you can pick out the rest of its body from there, easiest in the northern hemisphere where it is the right way up. This strong resemblance makes it one of the oldest recognised constellations, possibly dating back many thousands of years.

For more help look on the Society for Popular Astronomy’s website, www.popastro.com and click on Get Started, where we have a step-by-step guide to get you stargazing!

Article kindly provided by the British Society for Popular Astronomy

NEW MEMBERS

We have pleasure in welcoming the following members into the AFSM family

New Life Members
Wendy Bonny
Thomas Cherian

Philippe Duclos
Matthieu Kwame
Guênaël Rodier

New Annual Members
Marthe Jaquet
Gillian Mayers
NEWS FROM FORMER WHO STAFF MEMBERS’ GROUPS AROUND THE WORLD

News from around the world

AFSM-PAHO/AMRO: The December 2018 edition of the Newsletter leads with a report of the “AFSM Eighth International Meeting”, held on a cruise ship departing from Miami, with stops in Key West, USA, and Cozumel, Mexico from November 5 to 9 last year. A novel idea.

This is followed with a report of “The twenty-ninth Annual General Meeting of the Association” which was held at PAHO Headquarters on 13 December 2018.

Of direct interest to our readers, and complementing the recent article by David Cohen in our own Quarterly Newsletter on Balance and Walking (QNT 112) is the article by Martha Peláez and Gloria A. Coe – “I want to ‘Rock’ but not ‘Roll’: How to Stay Active and Prevent Falls”. Offering practical advice, and detailing a variety of exercise programmes and activities designed to help improve balance. Ending with a list of recommended actions issued by the US National Institutes of Health, especially aimed at preventing falls and fractures in the over 65’s.

An informative article “Noncommunicable Diseases: The Effort Continues” written by George Alleyne, the former Regional Director of PAHO/AMRO WHO. The author states “The data for the Americas shows the extent of the NCD problem. Of the 6.5 million deaths in 2017, 5.2 million were caused by NCDs. While the age adjusted mortality rate per hundred thousand population in 2017 was 6.5 for communicable diseases, it was 424.7 for the NCDs” and concludes “For my part, I am pleased at the increased global interest. But I confess to some impatience and disappointment that we have not seen more progress. There is so much to be done!”

The Newsletters can be accessed online in English at https://www.afsmpaho.com/newsletters and Spanish at https://www.afsmpaho.com/newsletters-spanish

Keith Wynn

WHO Retirees’ Representative in Scandinavia: The English-Speaking Union (ESU) in Denmark invited H.E. Dominic Schroeder, British Ambassador to Denmark, to give a talk on possible consequences of the Brexit withdrawal agreement. Members of the ESU and the British Club, including former WHO staff members, listened attentively to Mr. Schroeder, whose humorous and pleasant manner was appreciated.

He has had numerous meetings with the Danish Foreign Ministry, having sorted out the question of residence for British ex-pats. He emphasized the fact that all those who are legally registered, and who do not have a criminal record, will be allowed to stay, with or without a deal. The Danes have been very open and correct.

The extension of Article 50 (Treaty of Lisbon) amendments, which the Speaker of the House chooses, was explained clearly; the Commons may favour various courses of action. He went on to say that Parliament can legally revoke the Article.

Some British Citizens in Denmark have sought dual nationality, which is a very difficult and long-winded process, that can take up to two years before it is granted. Applicants have to take various tests, and nowadays they have to attend classes of 40 hours of written Danish. What the Ambassador pointed out was that, regardless of whether or not people decide to apply for dual nationality, the rules concerning residence will apply; i.e. it is not necessary to apply, although that was not stated.

The British and Danish people share many common values, which are acknowledged and enjoyed; any threats to our societies are protected by all that we have in common.

Jill Conway-Fell
AFSM-SEAR: The latest edition of *Aesculapian* (Volume XX, No. 2) has recently been published. Leading with a report of the 71st session of the SEA Regional Committee held in September and attended by members of AFSM SEAR as Observers.

The Editorial provides details of the proposed agenda of the AFSM SEAR General Body Meeting scheduled to be held on 17 November 2018.

The *General Information for AFSM-SEAR members* page gives short reports on: Pensionable Remuneration; upcoming National Days in the region; Five foods that help slow the ageing process; International Day of Older Persons; International Day of Non-Violence held on 2 October, and *Aesculapian* reminds readers that this is also the date of the birth of Mahatma Gandhi who championed peace. The key report in this section details the recent visit to India of Mr. Raghu Rao, UNJSPF Senior Client Services Officer, who is responsible for pension matters of retirees in the Asian region. He held a discussion meeting with UN pensioners on Saturday, 13 October 2018, in UNDP Conference Hall, New Delhi.

The continued support of the Administration is gratefully acknowledged.

R. L. Rai

AFSM-Manila: Sana ang kapaskuhang ito at darating na bagong taon ay magbigay ng lubos na pagibig, kasiyahan, kaligayahan, pagasa at katahimikan sa ating lahat na mga retirado. This end of year message to WHO retirees in Filipino translates as: Hopefully this holiday season and the coming new year will bring lots of love, pleasure, happiness, hope, and peace to all of us retired folks.

Some timely health updates and some good news for WHO retirees in the Philippines: The "*Expanded Senior Citizens Act of 2010*” and the "*Act Expanding the benefits and privileges of persons with disability (PWD)*” grants a 20% discount and VAT exemption on prescription medicines and on medical and dental services including diagnostic and laboratory fees exclusively for Senior Citizens.

The "*Tax Reform for Acceleration and Inclusion*” granting VAT exemption on the purchase of prescription medicines for diabetes, hypertension and high cholesterol, has been extended to patients under 60 years of age to address the country's problem on non-communicable diseases.

The "*Republic Act No. 10645 of 2014*”, providing for the mandatory *Philhealth* coverage for all Senior Citizens (age 60+ years old) to be exempt from insurance premium contributions.

The "*Universal Health Care (UHC) Act*” presently with the President for signature, which will provide that all Filipinos shall be automatically given coverage by the Philippine Health Insurance Corporation (*Philhealth*) and be entitled to preventive, promotive, curative, rehabilitative and palliative health services.

The *Philippine Statistics Authority* (PSA) announced that the average inflation (CPI) rate for the year 2018 was 5.2%, therefore retirees in the Philippines might hope for a 5.2% COLA on pension benefits being paid on dual track system effective 1 April 2019.

Romy Murillo

AFSM-Eastern Mediterranean: SHI Briefing in EMRO. Recently all Cairo retirees were delighted to receive an invitation, issued by the EMRO Staff Association, to attend the SHI Briefing Session scheduled on 29 January 2019, in the presence of a team consisting of the Head of the Staff Health Insurance, and the Medical Adviser, the Regional Staff Health Insurance Officer, the Regional Staff Physician, and a representative from WR’s Office in Egypt.

A very informative, detailed briefing was provided to the staff and retirees on access to treatment in Egypt and the latest SHI Rules (effective 1 January 2019). This team has visited some 20 health-care providers, mostly in Cairo and Alexandria, and has been successful in signing special agreements with a large group of medical institutions, compiling a list to include the best hospitals, clinics, pharmacies, opticians and rehabilitation centres, in order to provide better quality of care and access to treatment at
negotiated rates. An initiative to broaden the outreach of the staff health insurance and improve the recognition of valid SHI cards by seeking a comprehensive range of health care providers willing to work with WHO in Egypt.

Access to treatment as outpatient or inpatient include the following:

- Admission to facilities without need to make prepayments or deposits.
- High quality of service
- Attentive and customized service, with appropriate follow-up care
- Special discounts on medical services and medications

The efforts and patience of the Team is greatly appreciated, and they have done a remarkable job, it will have a positive impact on the SHI fund and on the percentage of our SHI contribution. A similar briefing is being scheduled for retirees in Alexandria.

*Sonia Miskjian*

**AFSM-Africa: AFRO Retired but not tired. Key principles for an enjoyable retirement.** Retirement is a fascinating time in one’s life; it could be challenging as well if adequate actions are not taken in time. Opting for an early retirement or waiting for the due date depends on personal circumstances and readiness levels. For more than six years and after an earlier separation, I am making my journey through my retirement without hurdles. It is well documented that the earlier the retirement age, the better your retiree life. Many colleagues report that the transition from an active life to retirement has been very difficult and even heart-breaking; many lost most of their friends in a short period of time; others found themselves disoriented or idle, not knowing how and when to start, and some swung from one initiative/project to another.

Having a realistic retirement plan is a key prerequisite to avoid surprises and be equipped to address emerging issues. Of course, in the retirement “pipeline” one should have more answers than questions about where to settle, what to do to keep one active, how to start building a new network even though it is not always easy to make new friends. No stone should be left unturned to make it happen.

Timing is key: a retirement plan should be developed at least five years ahead of time and its implementation started at least three years prior to the separation date.

The following components or rather areas of work:

- **Settlement:** your residence should meet most of your needs and those of your relatives; so, your home could be new, meaning a new house, town, city or even a new country.
- **Health:** Easy access to reliable healthcare facilities is essential and physical activity should be routine
- **Children:** attending to our children (who could well be adults!) during our retirement is a kind of grace. Many have missed us a lot while we followed our careers.
- **Interactions with relatives and neighbours:** in most communities in the North or in the South, a retiree is perceived and believed to be a wise man or woman. A single word from you is treasured.
- **Remain connected:** update your contact list (phone numbers, email addresses, social media accounts) and be proactive in making the initial calls and sending out some short messages. Make your voice heard, share your thoughts through relevant online fora.
- **Keep yourself busy by doing what you excel in such as painting, writing to share your life experience, giving back to communities through mentoring, coaching, public speaking. Sitting on a Board of Directors could also be psychologically rewarding.

*Matthieu Kamwa*

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Matthieu Kamwa retired from WHO in 2012, he was Programme Manager, Polio Eradication in Africa. From April 2017 to March 2018, he was asked to serve as WHO Representative a.i. in Tanzania. Presently Senior Global Health Consultant, Adjunct Professor, Faculty of Health, York University, Toronto. Director on the Board of the Canadian Coalition for Global Health Research.
Recent deaths\textsuperscript{1} of former WHO staff members as reported to AFSM

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\textsuperscript{1} The present notification of deaths was gratefully received from UNJSPF and covers Q4 2018. We have endeavoured to ensure that deaths already published have not been repeated in this list, however we apologize in advance if there are omissions or repeat entries. The editorial policy is to publish, once only, the names on the list of death notices we receive, and this regardless of whether an obituary has already been published; appears in the current issue; or will appear in a future issue.

Joan Cachia, born in 1939, died 7 November 2018 in Malta

It is with great sadness that we recently learnt of the passing away of Joan Cachia, aged 79, she died from complications relating to Parkinson’s disease, which had overshadowed the last years of her life.

Joan was born and grew up in Malta. On completing her formal educational training she started her working life as a relief teacher in a state school. Joan left Malta in 1970 to work with the Council of Europe in Strasbourg where she stayed for 12 years; her last posting being that of secretary to the President of the Parliamentary Assembly. Following a short break she joined WHO Geneva working in the areas of tropical diseases research and control, retiring in 1999 to Malta where she had close family.

Joan will be remembered by her colleagues for her competency and efficiency, her big smile, and her gift of friendship. She was a great "raconteuse", making simple events that happened to her seem incredibly comic! She was an avid cultural follower and, until sadly she lost her mobility, could be relied upon to always know, wherever she lived, what plays, concerts, art exhibits were on.

She will be sorely missed by her family and friends.

Dev Ray
David Payne, died 21 October 2018 in Wales

With great sadness we report the passing from pneumonia of Dr David Payne, retired WHO Malaria Scientist, following a tenaciously fought battle against Parkinson’s, with the dedicated support of Theresa, his beloved wife.

In 1958 the WHO global malaria eradication programme suffered a shortage of laboratory field staff. Crash training was done by Professor Geigy but five qualified staff were also recruited from the UK to boost programme implementation. David was one of the five.

His first assignment was British Somalia where he met, and married, Theresa. Later he would relate that following the wedding he and his new wife promptly joined a group of migratory nomads and ‘disappeared into the Somali bush’. Journalistic license or not, this was typical of what some field staff did in those days of ‘the Golden-Age of Malaria Eradication.’

Fast-forward to 1975: the global malaria situation, already serious, is worsening. The Golden Age is a distant memory to just a few. *Falciparum* resistance to standard malaria drugs was high and increasing. Something had to be done; or soon it seemed, no drug would work.

During his long service David’s dedication as a field worker and teacher par excellence was well known, highly respected and reflected his full range of methods and capabilities; and he was now where he was able to fully utilize them in WHO, Geneva.

Working with Walter Wernsdorfer in Geneva and colleagues throughout the malaria world, he established an *in-vitro*-micro-drug sensitivity test kit and technique that enabled monitoring malaria drug resistance situation in given programmes.

David was rightly proud of his 34 years of service with WHO and the 45 countries where he had worked acquiring and disseminating his wide experience in each and every facet of malaria, malaria control, diagnosis and training.

This is his lasting legacy.

*John Storey*

Jean-Claude Laterste, born in 1937, died 4 November 2018 in Switzerland

Jean-Claude Laterste was born in Bayonne, France, and passed away in the Clinique Joli-Mont in Geneva. His early life was spent in Paris until he moved to Brazzaville with his parents in 1954. He continued his studies by correspondence courses and completed his military service in the Congo, after which he had various jobs. He joined AFRO in 1959, initially in Finance, before quickly switching to Budget. In 1965, he met and married Dorothea, and in 1967, he was transferred to Budget in Headquarters, where he remained until his retirement in 1997. Jean-Claude will be remembered by many for his gentle helpfulness, as well as his efficiency, generosity and mischievous sense of fun. He was an inveterate whistler, but his colleagues were never actually able to identify which tunes he was whistling!

In his youth, Jean-Claude participated in, and excelled at, many sports – water-skiing, swimming, handball, cycling, rugby and table tennis – but his latter years were spent taking long walks by the sea and in the forest.

Jean-Claude is survived by Dorothea, their daughter Katrine and three grandchildren.

*Richard Saynor*
C. P. Ramachandran, born in 1936, died 12 January 2019 in Malaysia

Of all the professional activities Dr C. P. Ramachandran undertook, none gave him greater fulfilment than his 18 years of work at WHO (1979–1996) and the roles he could later play in programmes stimulated by that work.

Born in Malaysia, educated there and in Madras, London, Liverpool and New Orleans, CP returned to the Institute of Medical Research (Kuala Lumpur) first as a Research Fellow and then in 1967 as Chief of Filariasis Research and Control. He pursued academic research at Universiti Pulau Pinang (now University Sains Malaysia) until called in 1979 to join WHO’s Special Programme for Research and Training in Tropical Diseases (TDR) – initially leading the Research Strengthening Group (TDR/RSG) and later becoming Chief of Filariasis Research and Control for both TDR and WHO’s Control of Tropical Diseases Department (CTD).

Here was the platform that ensured CP’s 2-part professional legacy! First, always a dedicated educator, CP aggressively strengthened the research institutions targeting ‘TDR diseases’ and supported training for young scientists, who today have become the leaders responsible for current and future excellence of health research in the tropics and elsewhere. Second, CP so effectively guided research in the filarial diseases that not only were drug regimens discovered to prevent and treat these diseases, but epidemiologic strategies were formulated to target even their elimination. A subsequent WHO Resolution and unprecedented support from pharmaceutical and other donors led both to today’s highly successful Global Programme to Eliminate Lymphatic Filariasis and to similar programmes targeting other Neglected Tropical Diseases (NTDs). This is, indeed, an extraordinary legacy CP has left!

For his family (wife Githa, daughter Sunita, son Sunil) CP felt the greatest pride and love. He also dedicated himself to the many students he mentored, academic institutions he led, scientific societies he chaired and even his social club in Kuala Lumpur. His generosity of spirit, sensitivity to the needs of others, role as provocateur, wit and good humour – all will be treasured by his loving friends and colleagues.

Eric Ottesen

Stanislaw Tarkowski, born in 1935, died 21 January 2019

It is with great sadness that we bid farewell to Prof. Stanislaw Tarkowski, more than 20 years after his retirement from WHO.

Stan joined the WHO European Regional Office in 1981 as a Scientist in the strong programme on environmental health. Succeeding Ian Waddington as Director of the Department on Environment and Health in 1988, it fell upon him to play a central role in the preparation and follow up to the landmark First Ministerial Conference on Environment and Health in Frankfurt, Germany in 1989.

This conference was held barely one month after the fall of the Berlin wall and created a huge momentum with the adoption of the European Charter on Environment and Health and the launch of a Ministerial Process on Environment and Health which is still very vibrant. Also the Second Ministerial Conference, this time in Helsinki in 1994, was organized under Stan’s leadership. This Process has helped make Europe healthier and safer by providing a sustained Regional platform for bringing together health and environment sectors at country and international levels to better protect health. Importantly, the Process has led to
political commitments and actions and has secured the active involvement of many stakeholders.

After his retirement in 1995, Stan continued his distinguished professional career as head of the Department of Environmental Health Hazards of the Institute of Occupational Medicine in Lodz, Poland until 2003. In 2004-2013, he was a Professor at the Public Health School of the same Institute and a head of the WHO Collaborating Center. From 2000-2010, he was the president of the Polish Public Health Society, and in the period 2009-2010 President of the European Public Health Association.

As a member of the Collegium Ramazzini, an elite association of scientists in the field of health and environmental protection, he will be remembered as a great professional, but above all an outstanding person and a wonderful colleague.

Michal Krzyzanowski and Wilfried Kreisel

**Zbigniew Pawlowski, born 29 July 1926 in Poland, died 27 January 2019 in Poland**

Dr Pawlowski graduated in 1951 from the Medical Academy in Poznan and ten years later received a PhD in parasitic diseases from the same institute. In 1977 he was appointed Professor of Medical Sciences and in 2009 awarded a Doctorate Honoris Causa from the University of Warsaw for his contribution to the development of medical parasitology in Poland.

He was the author of over 700 scientific publications, a member of several international scientific bodies, as well as editor of professional journals, and continued to be fully involved in scientific projects until the end of his life.

A course at the Institute of Tropical Medicine and Hygiene in Liverpool in 1964 directed Dr Pawlowski’s professional interest towards tropical diseases. By the mid-seventies, WHO was seeking to scale up its efforts to control parasitic diseases, a development that led to his being hired as Senior Medical Officer in the Parasitic Diseases Programme in 1979. When he left in 1986, the Intestinal Parasitic Infections section was firmly established and guidelines on the prevention and control of parasitic infections implemented in many countries. Dr Pawlowski had many talents, but the most significant was undoubtedly his capacity to mobilize people around a project and to deliver change.

Upon his return to Poland, Dr Pawlowski grew concerned with the lack of training in tropical medicine. In 1992 he established the foundation Redemptoris Missio, aimed at promoting international health. From modest beginnings, offering a few courses for medical students, the Foundation has grown to a full-scale non-governmental organisation providing assistance to medical facilities in 23 countries.

In recent years, Dr Pawlowski pursued his interest in family history alongside his medical activities. This led to the publication of an extensive autobiography in Polish “My 90 years on few hundred pages” (2017) in which he fondly recalls his many friends and collaborators from his WHO years.

Dr Zbigniew Pawlowski is survived by his spouse, Eugenia, son Jan, three grand-children and daughter Magdalena.

Alina Pawlowska (daughter)
EXHIBITION

Caesar and the Rhône. Ancient masterpieces of Arles

Musée d’art et d’histoire, Geneva
8 February 2019 – 26 May 2019

This exhibition presents a selection of masterpieces on loan from the Musée départemental Arles antique (MDAA). It testifies to the bonds uniting Geneva and Arles, known as the Gallic Rome. The major link between them is the Rhône, the mighty river which flows out of Geneva and through Arles as it nears the end of its long journey to the sea. The proximity of Arles to the Mediterranean made it an important trading hub, shipping commodities by river and sea.

Excavations in recent years have unearthed a vast quantity of objects used by the inhabitants of Arles. Some 431 items, many of great artistry, others more mundane and used in daily life, are presently exhibited in the Musée d’art et d’histoire, Geneva. Julius Caesar is a very important figure in the history of Rome, and at the Forum near the Capitol, can be seen the ruins of the Senate where he was killed. He is still very familiar to students of Latin, who follow the conquest of the regions of Gaul by translating his work "De Bello Gallico" (The Conquest of Gaul).

The name of Caesar in the title of this exhibition underlines his role in the Roman conquest of the region, where he came to fight the Helvetii, who were trying to settle near Bordeaux. He and his troops invaded Geneva in 58 BC, when he quickly destroyed the bridge over the Rhône to prevent the escape of the Helvetii. This also gave him the pretext to invade Gaul. In 46 BC he founded the Roman colony of Arles for the veterans of the Sixth legion of Tiberius Claudius Nero; the ensuing development of Arles was peaceful and prosperous.

The exhibition is divided into five themed sections. At the entrance, the visitor is greeted by a bronze statue representing "The captive", a prisoner captured by the Romans. His raised head shows a rare defiance.

The statue was found in the muddy waters of the Rhône at Arles. The river sediments had protected the statue and careful excavation retrieved it practically intact. It is displayed next to a magnificent colossal "Head of a goddess with tiara" which was also found in the Rhône, at Geneva, in 1884. Its resplendent marble could well be from Carrara.

The first section displays objects recovered from the Rhône and from Saintes-Maries-de-la-Mer, including the model of a Gallo-Roman flat-bottomed barge (Arles Rhône 3) of a type used for the trading of goods by river. It was discovered in 2008 in the Rhône and is displayed next to magnificent amphoras, so well preserved that we can still read the labels detailing the contents. Most striking is their pure white colour.

The second section includes perfectly proportioned statues of Apollo and Hercules. Some most unusual objects are on display here, including small pipettes, for use by customers to sample wine before purchase. A label shows the name of one white wine: Albanum, a wine that is still produced in Albano, a village near Rome. Here too is a beautiful wooden and metal chest whose function has yet to be determined.

Section three presents the “Romanised” city with all of the elements that characterize the coming of the Romans: statues and decorations which adorned theatres and public meeting places. The most striking being the large statue of the Venus of Arles which embellished the stage wall of the theatre. Carved in marble and standing over two metres tall, it is on loan from the Louvre Museum. It was discovered in 1651 and donated to King Louis XIV to display at Versailles. This Venus has inspired many poems by writers far and wide. It is thought to be a Roman copy of a Greek original from Praxiteles.
In the fourth section are portraits of influential men which provide an opportunity for visitors to ponder the value of the dissemination of ideas brought here by the Romans. In this room the highlight of the exhibition, “The Bust of Julius Caesar” can be admired. It is believed that this bust came to light in Arles in 2007. The attribution of the bust as being that of Caesar is based on comparison of his profile with that on the coins which he first had struck in 44 BC. A technological installation makes this comparison possible for the visitor.

In section five can be seen the routes of four journeys of people living in Geneva during Roman times. Tragic destinies as witnessed by the inscriptions on restored funerary steles discovered in the courtyard of the Musée d’art et d’histoire in Geneva.

Finally, to emphasize the legacy of the Romans in Geneva, a map created on the museum floor indicates the sites in the city where remains of its Roman past have been discovered. Much less visible than in Arles, they remain buried under our feet.

Laura Ciaffei

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**AFSM: COMMITTEE FUNCTIONS FOR THE BIENNium**

**Composition of the Bureau and main functions of the AFSM Executive Committee 2018-2020**

*President*: Jean-Paul Menu  
*Vice-Presidents*: Sue Block Tyrrell and Dev Ray  
*Administrator*: Michèle Bernard Evans  
*Treasurer*: Anne Yamada  
*Assistant Treasurer*: Keith Wynn  
*Quarterly News*: Keith Wynn, Editor-in-Chief (see also page 3)  
*Pensions*: Dev Ray and Barbara Fontaine  
*Health insurance*: Jean Paul Menu and Ann Van Hulle-Colbert (also representing retirees at the SHI Committees); Pascale Gilbert-Miguet. You can also write to shi.retreps@who.int.  
*Relations with Plateforme, organisation genevoise de seniors*: David Cohen and Pia Soto Cannata Mei.  

*List of Members, subscriptions and website*: Anne Yamada, Keith Wynn and Pia Soto Cannata Mei.  
*Social assistance to members*: Sue Block Tyrrell, Anne Yamada, Maria Dweggah and Pia Soto Cannata Mei.  
*AFSM trips*: David Cohen, Laura Ciaffei and Charles Hager (external consultant).  
*Relations with the Centre local d’information et de coordination (CLIC) of Gex*: Michèle Bernard Evans.  
*Relations with the Association coordination médico-sociale personnes âgées (ACOMESPA) at Saint-Julien-en-Genevois*: Pascale Gilbert-Miguet.

Your requests by letter, email or by phone, addressed to our office (for contact details, see page 3) will be transferred and dealt with by the persons concerned even if you have not specifically mentioned them by name.
Dr Thomas Barns celebrated his 100th birthday on 6 February 2019

My work at WHO sometimes allows me to have some special encounters.

For several years now, I have met Dr Thomas Barns, a member of our retiree community in Thailand, mainly for administrative reasons linked to his pension. This year is rather special as Dr Barns celebrated his 100th birthday on 6 February. I could not miss the opportunity of visiting him and his wife Teresa (Granny) who celebrated her 99th birthday on 17 February. Accompanied by two of my Thai colleagues, Tom and Manao, we presented him with a bouquet of flowers offered by the Association of Former WHO Staff Members as well as a certificate of a donation made in his honour to the Dulabhatorn Foundation, (http://www.dulabhatornfoundation.com/) founded by Dr Brian Doberstyn, a WHO retiree who passed away in 2017.

Dr Barns was trained in gynaecology and obstetrics. He worked for WHO from 1971 to 1978 in the Regional Office in New Delhi and in the WHO Office in Sri Lanka. He also worked as a consultant for the Government of Bangladesh. Before joining WHO, he was a professor at the Christian Medical College in Vellore, India. He enjoys telling me about his training of future nurses, in Hindi which he had to learn locally. He has also met and worked with Mother Teresa in Delhi.

Dr Barns says he is very happy and grateful for the life that he has lived. His eyes sparkle when he talks of his career, his adventures, his encounters, and the card which he received from Queen Elizabeth on the occasion of his 100th birthday. He makes me smile when he asks me to try to contact his secretary in Delhi. When I ask him how old he must be, he simply responds “A few years older than me …!”

I hope he can continue to enjoy life and to bring joy and laughter to those who surround him. I am thinking particularly of his dear wife, Teresa, who has been bedridden since she suffered a stroke last year.

I cannot finish this article without revealing a little secret of longevity and good health which we learned from one of his carers and which is surely of interest to us all. Dr Barns remains very active intellectually: each day he listens to audio books and watches educational videos on YouTube. And he enjoys a wee dram of whisky or rum each day! A wise man indeed ….

Isabelle Walhin
Administrative Officer
WHO Thailand

Isabelle Walhin, Kanpirom Wiboonpanich (Manao) and Ritthi Noinumnon (Tom) visited Dr Thomas Barns on his birthday. Tom was busy taking this photo.

Former WHO staff living in Thailand, including Dr Barns, were invited to WHO by Isabelle Walhin for a meeting of retirees on 26 February.
The redevelopment of the WHO site continues apace. Photos: Sue Block Tyrrell

Below, we bid farewell to the dilapidated V-Building, now razed to the ground in order to make way for a spur road (some of it tunelled) from the motorway directly to the campuses of the International Organizations...

and in this photo, we welcome the new Building B, or at least can appreciate the scale of the foundations and the basement areas, which are now very rapidly taking shape.