



# The magazine of the Association of Former WHO Staff Members (AFSM)

Supporting former staff and helping them to stay in touch and informed



Our "Tour guides" for the AFSM visit to the restoration work going on in the old HQ Main building. From left to right, Yannis Moumene, Olivier Sibut-Pinote, Bruce Thomas Leech, and Mike Huyton. Do not miss our report and photos of this fascinating visit, and the incredible changes being made to the building. (See pages 2 and 13)

## VISIT TO THE MAIN BUILDING CONSTRUCTION SITE





Bruce Thomas Leech was our guide, and despite being extremely busy, very generously did not rush us through the visit, taking time on every floor to explain exactly what was going on at each stage.

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#### **EDITORIAL BOARD**

Keith Wynn, Editor-in-Chief and layout, Sue Block Tyrrell, David Cohen, Catherine d'Arcangues, Barbara Fontaine, Lindsay Martinez, JP Menu, Dev Ray, Rosemary Villars.

The translation of all articles is undertaken by the Editorial Board and Michèle Evans, Edmond Mobio and Anne Yamada.

The opinions expressed in this newsletter are those of the authors and not necessarily those of the Editorial Board.

Please send your contributions for publication in QNT to: Keith Wynn wynn@bluewin.ch

#### ACKNOWLEDGEMENTS

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#### **EDITORIAL**

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We are very pleased to report that the Global Council of AFSMs provided a most welcome result - a commitment from the Regional 2 Directors to recognize the Regional AFSMs, following encouragement from Dr Tedros (*see page 20*).

Quarterly News has covered Regional news over the past six years, 6 often despite difficulties in identifying correspondents to write regular reports. We hope that this has made at least a small contribution to this remarkable outcome.

ISix years ago, there were only two regional AFSMs (PAHO-AMRO and SEAR), an Association for the Philippines (AFSM-Manila), a Representative for UN retirees in Scandinavia, and nothing at all in AFR and EMR.

Maybe the interest and increased visibility provided by this magazine played a role.

We encourage you to look at the digital edition of this issue. It contains much extra material that cannot be included in the printed edition because of length restrictions. If you find the more comprehensive digital edition fulfils your requirements, please consider cancelling

your printed copy with a short message to <u>aoms@who.int</u>.

#### Keith Wynn

#### **IMPORTANT CONTACTS**

AFSM: Office L 71, WHO, CH-1211 Geneva, Switzerland. Tel.: +41 (0) 22 791 3192 or e-mail: aoms@who.int or afsm aoms@who.int. The AFSM office is covered on Wednesdays from 13.30 to 16:00. Alternatively, please leave a message and someone will call you back. Website: https://www.who.int/about/former-staff. Resources for retirement: visit the site, https://www.who.int/about/formerstaff/resources, and on this same page click on the 8<sup>th</sup> item for Formalities concerning the death of a WHO retiree.

Health Insurance (SHI): Tel.: +41 (0) 22 791 18 18; in case of absence please leave a message, someone will call you back, or send an e-mail to: shihq@who.int. The HQ SHI Helpdesk in office L 3 is open, by appointment only, on Tuesdays, 10.00–12.00 and 14.00-16.00.

Pensions (UNJSPF): Contact by e-mail no longer possible, to send an electronic message use the contact form on the Fund's website, <u>https://www.unjspf.org/contact-</u> us/. Visitors: Geneva: Palais des Nations, Client Support Centre, Building H, 1st floor, on Tuesday and Thursday mornings, from 10:00 to 13:00. New York: 4th floor, 1 Dag Hammarskjöld Plaza (DHP), Corner of 48<sup>th</sup> Street and 2<sup>nd</sup> Avenue, New York, Tuesday and Thursday afternoons, from 12:00 to 16:00. Documents for NY by post, address to: United Nations Joint Staff Pension Fund, c/o United Nations, P.O. Box 5036, New York, NY 10163-5036, USA. Documents for NY by courier (DHL, etc.) or registered mail, address to: United Nations Joint Staff Pension Fund, 37th floor, 1 DHP, 885 Second Avenue, New York, NY 10017, USA. Documents for Geneva, address to: UNJSPF, c/o Palais des Nations, CH-1211 Geneva 10, Switzerland. Telephone: Geneva: +41 (0) 22 928 88 00 or New York: +1 212 963 6931. See also the list of Toll-Free and local numbers at https://www.unjspf.org/contact-us/. In the case of non-receipt of the monthly benefit or the death of a beneficiary, visit the website: https://www.unjspf.org/emergency/ for instructions.

Remember to always have your Unique ID number handy when contacting UNJSPF.

#### AFSM

# News from your Association

We would like to remind you that the mandate of the present AFSM Executive Committee will end on the last day of October 2024. You should have received our call for candidatures for the renewal of our Executive Committee. We need new members who are ready to take over and enhance our activities. We urge those members domiciled in the Geneva region or neighbouring France – and who can dedicate some of their time to serving their former colleagues – to come forward as candidates. If you don't meet these requirements, perhaps you can encourage a colleague who does to submit their candidature. You have until the 2<sup>nd</sup> of August to send in your application.

Several users of our guide, Formalities concerning the death of a WHO retiree – A guide for retirees and their survivors to ensure continuity of the UN pension and of the WHO health insurance, pointed out to us that some matters were not very clear. We therefore consulted the Pension Fund and have now clarified some of the instructions. You will find the updated version on our website

https://cdn.who.int/media/docs/default-source/documents/former-staff/survivorsguide.pdf?sfvrsn=dc1caa07\_14

Jennifer Linkins, who was Director of the Human Resources and Talents Division and Focal Point for AFSM at Headquarters, has left WHO to take up an equivalent position at UNESCO. Jen helped us immensely: we are very grateful to her and wish her every success. Jen has become a member of our Association. We welcome Patrick Cronin who takes over as interim Director of the Division and Focal Point for AFSM.

Since the 6<sup>th</sup> of May, it is no longer necessary to have been vaccinated against Covid-19 in order to enter the WHO Headquarters buildings. However, we are reminded that normal sanitation measures must continue to be observed, and vaccination is still recommended for people at high risk.

As you know, our help desk (permanence) is held every Wednesday from 1:30 p.m. to 4 p.m. Given the few visitors expected, our Committee has decided to suspend the help desk during the months of July and August. We remain, of course, at your disposal to respond to your requests received by e-mail to <u>aoms@who.int</u>.

For several months, in collaboration with the relevant services of WHO, we have been studying the possibility of providing electronic access to all past issues of the *Quarterly News* as well as to the Directory of AFSM members which will no longer be printed and distributed. Of course, access will be strictly reserved for AFSM members. More details will follow in the next issue of the *Quarterly News*.

#### AFSM needs your e-mail address

Despite our previous reminders, the Directory still has a significant number of members who have not provided us with their e-mail address. Thanks in advance to those members for sending it to us as soon as possible. (aoms@who.int).

#### Important notice about the next AFSM Directory

Unless we hear from you to the contrary by 1 September, the names, addresses both postal and email, and telephone numbers of all AFSM members will be included in the new Directory.

#### The AFSM Executive Committee and the Editorial Board of the Quarterly News

# Interesting snippets from the 77<sup>th</sup> Board report

Use of the DCE (Digital Certificate of Entitlement) is picking up steam. More than 30,000 DCEs have been processed so far for 2024, representing over 40% of the eligible population.

Nairobi and the regional service centre in Entebbe will soon have kiosks where retirees can go to process their DCE using an iPad or iPhone. This will enable them to submit the DCE if they don't otherwise have an adequate internet connection.

Due to wide fluctuations in the current ratio of Local Currency Track to the US Dollar Track, the Local Track will be suspended in Czechia, Estonia, Haiti, Lithuania, Sierra Leone, Suriname, and Uruguay as of 1 November 2024.

End March 2024, the total Fund value reached US\$ 91.1 billion.

Barbara Fontaine

## **UNIAG – UNITED NATIONS INTER-AGENCY GAMES – 2024**

# The 2024 UN Inter-Agency Games in jeopardy

News has reached us that despite the postponement of the May target date for the Games to October, the Staff Association and Senior Management have been unable to organize WHO's hosting of the 49<sup>th</sup> Inter-Agency Games in 2024.

Little is known of the deliberations which led to this unfortunate outcome, but it would seem that there might have been a lack of awareness of the scale of the event, inexperience in actual involvement in previous Games, and a presumption that the Games could be held in Geneva (which presents major administrative, financial, and even social obstacles). It is regrettably an opportunity missed for WHO to promote health through sports and to foster friendships within the UN family.

Some efforts are being made to explore alternative hosting arrangements, but given the months needed to select a site, identify and book sporting facilities and hotel accommodation, consult with local authorities on multiple issues, such as visa and security arrangements, develop a world-wide network for registration of participants and collection of fees, designate coordinators for the various disciplines, etc., it seems very unlikely that another agency will be able to take over in the time available.

Should the 2024 Games eventually be cancelled, we would need to look forward to the next Games in May 2025 for which UNESCO has already been designated as the host organization.

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#### **OUR HEALTH**

# Anaemia in the elderly

Anaemia is common in the elderly and increases with age. As it is often mild, it is relatively neglected. However, it is important to detect it as quickly as possible and treat it to avoid complications. Its origin is diagnosed in approximately two thirds of cases.

#### A short reminder about haematopoiesis

Haematopoiesis is the phenomena concerning the production, and continuous and regulated replacement of blood cells (white blood cells – leucocytes, red blood cells – erythrocytes, platelets – thrombocytes) which have a limited lifespan. Around 440 billion blood cells are produced daily. This considerable activity is ensured by a small population of bone marrow cells called hematopoietic stem cells, located in the flat bones (sternum, ribs, vertebrae, iliac bones) and in the epiphyses of long bones. The bone marrow is divided into yellow marrow – adipose and poorly evolved – and red marrow, the preferential site of haematopoiesis.

#### Certain elements are involved in haematopoiesis

- Vitamins, notably vitamins B12 and B9.
- Trace elements and minerals: iron, copper, zinc.
- Amino acids.
- Oxygen pressure.

Anaemia is characterized by a drop in the number of red blood cells and therefore haemoglobin (normal value in the blood, between 12 and 16 g/dl in women and between 14 and 18 g/dl in men). The body no longer receives sufficient oxygen, resulting in significant fatigue. Depending on the haemoglobin level, anaemia is classified from mild, moderate to severe.

Anaemia is a potential risk factor for Alzheimer's disease,

so it is imperative to identify and treat it during ageing. This interrelation requires further investigation.

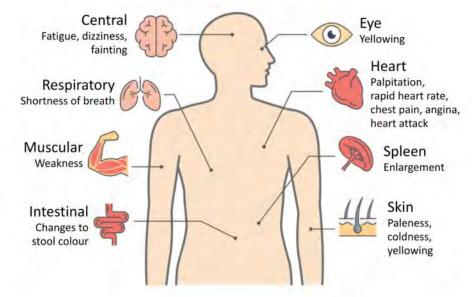
Anaemia can appear suddenly or may be chronic. It is not always easy to know the exact cause. It can be a sign of a deficiency in iron or vitamins B12 and B9, due to an unbalanced diet. Certain medications and chemotherapies can also cause anaemia, as well as chronic inflammatory diseases, digestive bleeding or even kidney failure.

Age is an important risk factor: like all organs, the bone marrow ages, and can cause dysfunctions in the production of white and red blood cells and platelets.

#### What are the symptoms of anaemia?

The signs of anaemia are multiple, but often attributed solely to the age of the patients, which sometimes hinders the diagnosis. The elderly

# Symptoms of Anaemia



person may indeed feel tired and out of breath, but ampoule form. In some extreme cases, an iron also experience dizziness, light-headedness, or even heart pain. Anaemia can also be observed in the skin and whites of the eyes, which are pale, or in the extremities, which tend to be colder than usual. Finally, the risks of falls, memory loss and difficulty concentrating are increased in cases of anaemia in the elderly.

#### How to treat anaemia in the elderly?

Treatment for anaemia will depend on its cause. If it is an iron or vitamin deficiency, a dietary rebalancing and/or the taking of food supplements may be prescribed to restore haemoglobin levels. If the anaemia is due to an iron deficiency, your doctor will prescribe it in tablet or drinkable

infusion may be necessary. For vitamin deficiencies, treatment will consist of taking vitamins orally or by injection.

#### Dr David Cohen

Sources .

#### Revue médicale suisse

https://www.revmed.ch/revue-medicale-suisse/2010/revuemedicale-suisse-270/l-anemie-du-sujet-age-une-pathologiefrequente-a-ne-pas-banaliser

#### American Society of Hematology

https://www.hematology.org/education/patients/anemia/olderadults. etc.

#### TRAGIC DEATH OF A SERVING WHO STAFF MEMBER



A dedicated WHO team member, Engineer Emad Shehab lost his life on Tuesday, 26 March, when his building in Deir-ez-Zor City, Syria was struck during a series of airstrikes across the Governorate.

Emad Shehab, 42, served as a WHO focal point for water, sanitation, and hygiene (WASH) in Deir-ez-Zor since 2022. His contributions to improving WASH conditions in health facilities, particularly his pivotal role in renovating the sewage system at Al Assad Public Hospital, were invaluable. His work on water quality testing in Deir-ez-Zor – located directly along the Euphrates River – was a critical part of outbreak detection and early response, including the cholera outbreak in Syria.

Colleagues remember Emad Shehab as tremendously dedicated to this work spending hours in the field, often under challenging circumstances, and

even occasionally hand-carrying water samples to central laboratories when necessary to ensure timely testing.

He is survived by his wife and two young children living in Damascus.

Our Association offers its deepest condolences.

#### **NEWS FROM WHO**

# Highlights of news from WHO

News from the 77<sup>th</sup> World Health Assembly, 27 May to 1 June 2024, and from the 155<sup>th</sup> Meeting of the Executive Board on 3–4 June will be included in the October edition of the *Quarterly News*, QNT 137.

4 March is World Obesity Day. This year's theme is "Let's Talk About Obesity and...".
 The Global Obesity Coalition consisting of UNICEF, WHO and the World Obesity
 Federation hosted a global youth-led webinar to unlock conversations about how this topic affects the lives of young people around the world and the concrete change young people are demanding.

https://www.worldobesityday.org/

- The first ever "Global Cervical Cancer Elimination Forum: Advancing the Call to Action" was held in Cartagena de Indias, Colombia, in March. On 5 March, major new policy, programmatic and financial commitments, including nearly USD 600 million in new funding were announced to eliminate cervical cancer.
- On 6 March in Yaoundé, Cameroon, Ministers of
   Health from African countries with the highest burden of malaria committed to accelerated action to end deaths from the disease.



 On 8 March, Dr Tedros was awarded an honorary degree by the University of Glasgow. He accepted the award on behalf of his family, WHO colleagues and Dima Alhaj. Dima was killed in Gaza in November, alongside family when the house in which they were seeking shelter was under bombardment (see page 4 of the January issue, QNT 134). She was a graduate of the University of Glasgow, earning her Masters degree in 2019 as part of the Erasmus exchange programme.

- Also on 8 March, WHO released a new manual to support diagnosis of mental, behavioural and neurodevelopmental disorders: "The clinical descriptions and diagnostic requirements for ICD-11 mental, behavioural and neurodevelopmental disorders (ICD-11 CDDR)".
- On 14 March, a major new study released by The Lancet Neurology shows that, in 2021, more than 3 billion people worldwide were living with a neurological condition. WHO contributed to the analysis of the Global Burden of Disease, Injuries, and Risk Factor Study (GBD) 2021 data. Neurological conditions are now the leading cause of ill health and disability worldwide.

https://www.thelancet.com/journals/laneur/articl e/PIIS1474-4422(24)00038-3/fulltext

 Ahead of World Tuberculosis Day on 24 March, the theme of which was "Yes! We can end TB", WHO released Funding a tuberculosis-free future: investment case for TB screening and preventive

treatment. A modelling study developed with the Governments of Brazil, Georgia, Kenya and South Africa highlights the impact to be achieved from expanding TB screening and preventive treatment.



Modest investments could lead to significant health and economic benefits in all four countries, with a return on investment up to USD 39 gained for every dollar invested. https://www.who.int/publications/i/item/97892 40091252

 On 20 March, a high-powered intervention was made by 23 former national Presidents, 22 former Prime Ministers, a former UN Secretary General and 3 Nobel Laureates to press for urgent agreement from international negotiators on a Pandemic Accord, under the Constitution of the World Health Organization, to bolster the world's collective preparedness and response to future pandemics. The joint open letter urged accelerated progress in the negotiations.

## https://gordonandsarahbrown.com/2024/03/pa ndemic-accord-joint-letter/

The Intergovernmental Negotiating Body (INB) https://inb.who.int/ was established over two years ago to take this effort forward and has held 9 meetings. Its outcomes were submitted for consideration at the 77<sup>th</sup> World Health Assembly in May. The signatories of the open letter hope their combined influence will encourage all 194 nations to maintain the courage of their Covid-years conviction and make their own collective ambition of an international pandemic protocol a reality by the May deadline.

- On 24 March, Ms Saima Wazed, Regional Director, SEARO, officially inaugurated the new WHO Bangladesh Country Office.
- On 25 March, WHO and the Inter-Parliamentary Union signed a new five-year Memorandum of Understanding, reaffirming the critical role that parliamentarians can play in enabling good health to foster stable and equitable societies.



 On 27 March, WHO released two new briefs to call for greater attention to violence against women with disabilities and older women. WHO called for better research across countries that will help ensure these women are counted and that their specific needs are understood and addressed.



- Measuring violence against women with disability <u>https://www.who.int/publications/i/item/978</u> <u>9240089563</u> and
- Violence against women 60 years and older <u>https://www.who.int/publications/i/item/978</u> <u>9240090996</u>
- Also on 27 March, WHO launched a new global network for coronaviruses, CoViNet, to facilitate and coordinate global expertise and capacities for early and accurate detection, monitoring and assessment of SARS-CoV-2, MERS-CoV and novel coronaviruses of public health importance. It expands on the WHO Covid-19 reference laboratory network established during the early days of the pandemic.

 On 2 April, WHO unveiled S.A.R.A.H. a Smart Al Resource Assistant for Health to help people access health information. Her advanced learning machine enables her to adapt to user questions and interests in realtime, 24 hours a day in 8 languages on multiple health topics, on any device.



• WHO released its **2024 Global Hepatitis Report** at the **World Hepatitis Summit** held in Lisbon, Portugal from 9 to 11 April. The disease is the second leading infectious cause of death globally.

https://www.who.int/publications/i/item/97892 40091672

 On 12 April, in a world first, Nigeria introduced a new 5-in-1 vaccine recommended by WHO against meningitis, and its health workers rolled out an immunization campaign aiming to reach one million people.



- Also on 12 April, WHO prequalified a new oral simplified vaccine for cholera.
- On 18 April, following consultation with public health agencies and experts, WHO released a publication on updated terminology for pathogens that transmit through the air which include those that cause respiratory infections, e.g. Covid-19. Influenza and measles – Global technical consultation report on proposed terminology for pathogens that transmit through the air. The publication is the result of extensive, multi-year collaborative efforts and reflects shared agreement on terminology between WHO, experts and four major public health agencies – the Africa Centres for Disease **Control and Prevention, the Chinese Center for Disease Control and Prevention, the European Centre for Disease Prevention and Control and** the United States Centers for Disease Control and Prevention.

https://www.who.int/publications/m/item/glob al-technical-consultation-report-on-proposedterminology-for-pathogens-that-transmitthrough-the-air • 24–30 April is World Immunization Week. This year, the week celebrated 50 years of the Expanded Programme on Immunization (EPI).



A major new landmark study led by WHO revealed that global immunization efforts have saved an estimated 154 million lives – or the equivalent of 6 lives every minute of every year – over the past 50 years. The vast majority of lives saved – 101 million – were those of infants.

https://www.who.int/news-

room/events/detail/2024/01/01/defaultcalendar/50th-anniversary-of-the-expandedprogramme-on-immunization-(epi)

- On 25 April, three West African countries Benin, Liberia and Sierra Leone – launched a large-scale rollout of malaria vaccine targeting millions of children within their countries. That launch brought to eight the number of countries on the continent to offer malaria vaccine as part of their childhood immunization programmes.
- On 26 April, WHO and the Government of France convened a high-level meeting at the *Institut Pasteur* in Paris to defeat meningitis, to discuss implementation of the global roadmap for "Defeating Meningitis by 2030".
- Also on 26 April, WHO reported on the widespread overuse of antibiotics in patients hospitalized with Covid-19: their excessive use may have exacerbated the "silent" spread of antimicrobial resistance.
- On 7 May, WHO certified Belize, Jamaica, and St Vincent and the Grenadines for having eliminated mother-to-child transmission of HIV and syphilis.

- Also on 7 May, WHO released its **Results Report** At the time of writing, States Parties are meeting 2023 showing progress made during the Programme Budget 2022-2023. https://www.who.int/about/accountability/resu lts/who-results-report-2022-2023
- On 10 May, a new vaccine for dengue received pregualification from WHO – TAK-003 is the second dengue vaccine to be prequalified by WHO.
- On 17 May, WHO released its updated Bacterial Priority Pathogens List (BPPL) 2024 featuring 15 families of antibiotic-resistant bacteria grouped into high and medium categories for prioritization. The list provides guidance on the development of new and necessary treatments to stop the spread of antimicrobial resistance. https://www.who.int/publications/i/item/9789 240093461
- to resolve the few remaining issues in a package of amendments to the International Health Regulations to be put forward to the upcoming World Health Assembly.

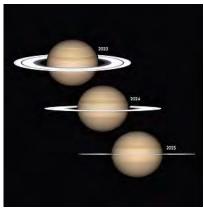
Further information and documentation can be found on the WHO website - www.who.int.

Sue Block Tyrrell

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#### ASTRONOMY

# The skies for July–December 2024



Saturn's rings are enormous, approximately 100,000 km across, but are just a 10-metre-thick collection of ice fragments. As a result they disappear when viewed edge-on. 2023, 2024 and 2025 illustrated.

The rings will open out during the next phase of Saturn's 29-year orbit. Photo: © NASA

For the first part of this season the sky is empty of bright planets. Then in September Saturn puts in an appearance, rising in the east in the early evening and reaching its greatest height above the horizon at midnight. This year it is strangely dim, and the reason becomes clear if you can look at it with even a small telescope.

Its famous rings, which for the past dozen years or so have been well displayed, are currently almost edge-on. Normally they make a significant contribution to the planet's brightness, but this year and during 2025 this is not the case. So, take a look if you can, and watch the rings close up month by month. They will be at their narrowest in 2025.

People often ask if there are any comets due. The difficulty with comets is that bright ones usually arrive in our skies with only weeks of warning. At the time of writing, we are not aware of any comets on their way to the inner solar system that will become easily visible.

So, keep an eye on the Society for Popular Astronomy website, popastro.com, where we will give any news of bright comets if they appear.

#### Article kindly provided by the British Society for Popular Astronomy

All articles in this series refer to the global situation unless stated otherwise. Terms such as midnight refer to midnight local solar time. The solar time for your site may differ from the actual clock time.

#### **READERS' RECIPES**

# Valaisan savoury pie\* (serves 6)

\* A great recipe for using up leftovers and known in the Swiss canton of Valais as "Cholera". The origin of the unusual name for the dish remains unclear. A possible explanation is that during an epidemic of cholera in 1836, people in the region improvised a dish of pastry with whatever filling they had to hand.

#### **Ingredient suggestions**

300 g of puff pastry 200 g of potatoes 350 g of leek 1 apple 100 g raclette cheese, cut into slices A little butter 1 egg yolk

#### Recipe

Boil the potatoes in salted water until almost tender, let them cool before cutting them into slices. Peel the apple. Cut it and the leek into pieces, brown them briefly in a little butter, then leave to cool. Roll out two thirds of the pastry to a thickness of 2 mm and line a greased pie dish with it.



Roll out the remaining pastry quite thinly, to use later as the pie lid. Mix the leek, apple, and potato slices, then place half of the mixture in an even layer into the pastry base and cover with raclette cheese. Spread the rest of the mixture on top.

Fold the edge of the pastry base inwards, brush it with egg yolk and cover with the previously prepared lid. Press the edges well, brush the top of the pie with egg yolk, prick with a fork for decoration. Bake the pie in a preheated oven at 200°C for 35 to 40 minutes. Cut into slices and serve.

A reader's recipe

#### **NEW MEMBERS**

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

#### **New Life Members**

Christine Coze Nicole Grillon Manfred Huber Jennifer Linkins Hua Yin

#### **Conversion to Life members**

Metin Gülmezoglu Tsegereda Tesfalidet Tazaz

# New Annual Members

Marissa Santos

# A tour of the restoration work going on in the old HQ Main building

AFSM members were invited to sign-up for a guided tour of the old Main HQ building (now known as Building A) which is presently an enormous construction site.

The first tour took place on 13 March and present were Sue Block Tyrrell, Barbara Busca, James Cheyne, Philip Jenkins, Helena Mbele-Mbong, Ambi Sundaram, and Keith Wynn. We were greeted in the new cafeteria by Bruce Thomas Leech (*WHO staff member, Unit Head, Infrastructure Services*), Olivier Sibut-Pinote (*WHO staff member, Project Management Officer*), Mike Huyton (*Project Manager, Emch+Berger Group*), and Yannis Moumene (*Quantity Surveyor, Emch+Berger Group*).

After the greetings and introductions, we were quickly escorted from the warm, dry, and clean surroundings of the new building (now known as Building B) to the disused cafeteria – general HQ of the construction teams – where we were invited to choose between heavy rubber boots or heavy rubber slip-ons over our shoes, don hi-visibility vests, and select a hard hat. From there we entered the noisy, dusty, and drafty building site which is the current state of the old Main building.

Bruce explained that throughout the upgrade of the Main building the emphasis has been more on "restoration" rather than "renovation". Since the WHO Main building is a registered historic building the external appearance of the building must remain unchanged. A restoration of a building maintains its original look and style, whereas a renovation involves upgrades and restyling.

#### Work already completed

The first task, before any construction work could begin was the removal of all the asbestos insulation and cladding in the building. This took two years of work by specialist contractors.

Over 5000 tonnes of demolition material have already been removed from the Main building. Intriguing! A fascinating list of *Facts and Figures* for Building A, plus many more photos of the restoration are to be found on page 34, in the digital edition only. All photos were taken by the AFSM members on the tour.

#### Our tour started in the basements



These giant pipes will bring water, pumped from Lake Geneva to WHO, to feed the heat-exchangers.

The building is now safe from asbestos contamination, and our visit began in the basement floors (levels 1, 2 and 3). In the windowless lowest level basement are housed the enormous-diameter pipes and equipment carrying hot and cold water to all parts of the building, and the air distribution equipment. The old heating-oil storage tanks and boilers have been removed to make way for environmentally friendly heat-exchangers working on water pumped from the lake. Unfortunately, the *Services Industriels de Genève* which will be providing this service – and the equipment required – are not going to be ready as quickly as the building will be. Temporary boilers have been installed in the grounds.

We then walked up to the second basement level, with its natural light, and visited the areas where the printshop, mailing and distribution services, and joint medical service used to be housed. These areas are being modernised although no decision has yet been

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taken on whether the same services will return here. The Indian Room, just outside the entrance to the EB room, is still there and untouched, having been restored earlier. Regarding the EB room, the external marble cladding was warping and detaching from the underlying structure. Ingeniously, one wall has been clad with new marble to very closely match the existing marble, and the undamaged marble removed from this wall has been used to repair the other three walls.

Onwards and upwards to the first level basement, best remembered by some of us for housing the Bank, the Post Office, Travel Agent, and the Library, and more recently for the coffee shop. The giant painting known as "*Brazil*" (after the nationality of the artist) was just too big to move and



The temporary boilers

remains in place in a specially built structure ensuring protective temperature and humidity. The vast library premises are being modernised and converted to a "Knowledge transfer centre" where just one copy of each book or document will be retained. All other documents will continue to be available electronically.

This basement level will become the main link for staff between buildings A and B, and it is planned to make the transition from one to the other a seamless, visually unified experience. The two buildings will meld into one WHO HQ.

#### Next stop, 7<sup>th</sup> and 8<sup>th</sup> floors

On the 7<sup>th</sup> floor we were treated to a glimpse of how all the office floors will look. The inter-office partitions will now be white; the corridor wall and door will be in glass to allow more natural light into the internal areas.

The windows on the 8<sup>th</sup> floor were configured for a cafeteria, and do not lend themselves to office partitioning. In order to retain the windows without modification it was decided to house the Director-General's suite of offices on this floor.



The task of installing the office partitioning has already begun on the 7<sup>th</sup> floor.



The wide windows of the former cafeteria on the 8<sup>th</sup> floor are unsuitable for office partitioning and cannot be altered.

The original window glass in the Main building was tinted, only perceivable from inside, not externally, and this has now been replaced with clear glass allowing even more light into the interior. Also, to ensure an efficiently heated and ventilated interior the windows can no longer be opened. The whole building interior will now be much better lit and have more consistent air quality from ceiling vents.

One of our group was surprised to notice that the original, below-the-window air conditioning vents have not been removed, although no longer required. The decision was taken to retain the original look of the interior and provide a useful trunking system for cables.



Not a spaghetti factory, just a tiny portion of the 530 Kms of electrical cabling being installed in the Main building.

Since the original restoration plans were drawn up in 2012, an unforeseen technical development has required much additional work. An innovative audio-visual system is being installed throughout the building. This alone will double the amount of cabling needed in the Main building.

Lighting in the offices and the common areas will be provided by floor-standing lights. The new internal lighting in the building conforms to architectural heritage standards.

#### What's next?

When the Main building has been completed, towards the end of this year, work will start on the underground parking in front of the Main building.

Sadly, this will entail removing all soil from above the garages, meaning that the cherry trees brought from Japan and donated by the Japanese Government cannot remain in place. In any case they were originally planted in soil that was too shallow and over the years have not thrived well. With the agreement of the Japanese Government, grafts have been taken and the young trees are now thriving near to the new entrance gate to the WHO campus.

When all work has been completed, the cafeteria and the bridge next to the EB room will then be demolished.

#### An accolade to the team responsible for the restoration

The original plans, timelines, and budgets for constructing first the new building (B) and then restoring the old Main building (A), were established in 2012. The 2012 budget target for this work totalled CHF 250 million for both buildings, A and B, and the target date for completion was December 2024.

The restoration management team are confident that both targets will be met. Very impressive indeed.

Berrel, Berrel Krautler were the architects for Building B and were selected through a competition. Ittenbrechbuhl are the architects for the A building restoration.

All the participants thank the team for a most enjoyable, informative, and interesting tour and wish them continued success with this immense project.

#### James Cheyne and Keith Wynn

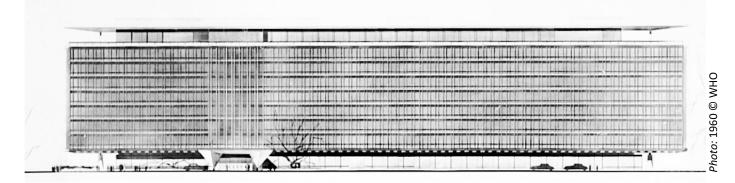
#### **POETRY CORNER**

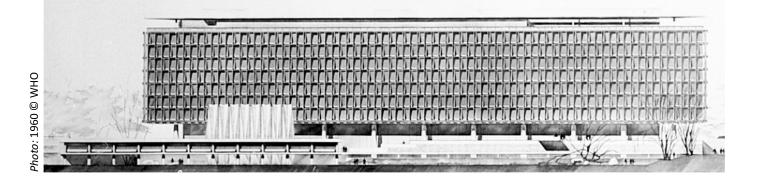
# Some Memories of our WHO Main Building

Proud architectural prize winner in 1960, Designed by famous Swiss architect Jean Tschumi, Six years to build until its inauguration And our staff moved in from the Palais des Nations.

There were offices in modules throughout each floor, Size depended on grade and each had a door, With windows for all, not just the elite, ADsG had private loos attached to their suite!

The DG and DDG on level seven had the best view Of Geneva, the lake, alps, Mont Blanc too, But this panorama used to be for all on level eight In the restaurant for lunch, it was just great! Special events there bring memories before our eyes Of awarding DA Henderson the "low bell" prize For his leadership in smallpox eradication, The jewel in the crown of our Organization. But, sadly, kitchen leaks led to the restaurant's doom And it was moved out in the grounds near the EB room.





Many past appreciated services now spring to mind, E.g. the trolley pushed by Mme Henri, so kind To bring coffee, tea and croissants to our office door, And huissiers to deliver/collect our post on each floor. On the first sous-sol, many services helped us through – With a bank, a post office, and a Naville kiosk too On the rez-de-chausée near the telephonists' room Who received/placed our calls, ere the days of mobiles and Zoom! The Economat was there to meet our supply need, And the Registry staff who classified/filed every deed. A library and a cinema we also recall, And even a special anniversary ball One evening held below the rez-de-chaussée, Good fun with colleagues to dance the night away.

Many memories of our main building from days of yore, But after this three-year restoration, what lies in store?

#### Sue Block Tyrrell

## VISIT TO THE NEW ROAD TUNNEL FROM THE MOTORWAY TO WHO

# The rapid transit route to WHO

As readers may have noticed from the April *Quarterly News*, the new road and tunnel – route des Nations – linking the A9 motorway near to Geneva airport and the area of the UN and its organizations, notably WHO, opened on Monday 25 March 2024. On the previous three days, various celebrations took place and the general public was invited to participate.

On the Friday evening there was a roller disco organized by the *Antigel* festival, and on the Saturday and Sunday, people could join a guided tour of the tunnel or just walk around, look at photos of the project and admire the structure. Many tables were set up in the tunnel where refreshments were served, including a brunch on the Sunday morning. The refreshments included hot tea and coffee, juices, cheese, ham, fried eggs, croissants and jam, etc.

This road and tunnel are right on the doorstep of WHO. When leaving WHO, there are traffic lights at the exit of the campus and those taking this new route just turn right and are almost immediately in the tunnel. There are a couple of exits at the end of it, including a direct entry lane to take the motorway in the direction of Lausanne. When driving into WHO, those using the tunnel take an easy entrance off the motorway. On exiting the tunnel by WHO, there are three sets of traffic lights to cross and then staff and visitors can turn left into the WHO campus.

Taking this new route is so fast compared to using the very busy old road through Grand-Saconnex, and the residents in that village must be delighted. The new section of road and tunnel is 1.2 km long, with 80% of the route underground. It took 76 months and about 60 workers to complete the project.

We were told by one of the guides that the tunnel was built by a special group of tunnel workers who move around Switzerland. There were photos on stands showing the various stages of the tunnel, including a picture of Saint Barbe (Barbara). We were told that statues of her are placed at the start





*Top:* The exit of the tunnel at the WHO end, with three pre-selection lanes. Left for WHO, straight on for the *Palais des Nations*, and right for ILO and the International School.

Above: The entrance to the tunnel at the WHO end. A single lane – where the tents are positioned – leads into the tunnel, affording a glimpse of the Grand-Saconnex Parish Church spire. More photos of the tunnel can be viewed on the next page. *Photos:* Sue Block Tyrrell

of the digging at both ends of the tunnel and when the two digging teams meet in the middle, the statues are taken there. Saint Barbe is believed to provide protection from explosions and fire and is the patron saint of miners, fire fighters and artillerymen.

I enjoyed my walk through the tunnel on Sunday 24 March with many Geneva locals and several interested WHO staff, and especially my snack and hot coffee as it was a chilly day, and even colder in the tunnel!

#### Sue Block Tyrrell

## More photos of the rapid transit route to WHO







*Top left:* Looking into the tunnel from the entrance after coming off the motorway. WHO straight ahead.

*Top right:* Looking out of the tunnel at the exit towards the motorway.

Middle row left: Poster of the team and their tunnel boring.

*Middle row right:* A detail from the poster of Saint Barbe, the patron saint of miners, fire fighters, artillerymen, and tunnellers.

*Left:* View mid-tunnel, and directly above the tunnel at this point is the Grand-Saconnex Parish Church.

## NEWS FROM FORMER WHO STAFF MEMBERS' ASSOCIATIONS AROUND THE WORLD

# News from around the world

#### 6<sup>th</sup> Global Council of AFSMs

## **Regional Directors commit to recognizing and supporting the AFSMs**

**AFSM-HQ:** At WHO Headquarters on Saturday, 25 May 2024, during the weekend preceding the World Health Assembly, the sixth meeting of the Global Council of AFSMs was held with the physical participation of Regional Associations and AFSM-HQ. All participants described the meeting as historic because it represented the culmination of several years of efforts to gain recognition for the AFSMs.

This was the first Council meeting held partly in person, thanks to the generosity of the Director-General.

To fully understand its importance, we need to go back a few years.

*In October 2017*, Dr Tedros, newly elected Director-General, addressed our General Assembly emphasizing the fact that former staff members are still part of the WHO family and, wishing to encourage and strengthen this collaboration, he voiced the phrase which became our motto: *Once WHO, Always WHO.* 

*In March 2021*, we took the initiative to organize a virtual meeting of Regional Associations of Former WHO Staff Members (AFSMs) and focal points of WHO retirees in Regions where no AFSMs had yet been established. It was a first, and it aroused the enthusiasm of the participants who decided to establish a Global Council of AFSMs.

The objectives of the Global Council are to provide mutual support, share information and promote the AFSMs in Regional Offices and in Country Offices. It is an informal structure that does not require additional resources.

Virtual Council meetings have become biannual. It quickly became apparent that the Regional Associations had little support from Administrations and Regional Directors. This set the priority to have the Associations recognized in a way that would enable them to provide better services to their members.

*In March 2023*, we invited the Director-General to the fourth meeting of the Council, organized from Geneva by our AFSM, again held virtually. Dr Tedros not only reiterated his support in principle but, above all, asked us to provide concrete information on what we would need to fulfil our mission. Our main proposal was, of course, that the Associations be recognized by the Regional Directors and their Administrations. What's more, this recognition should be long-lasting. Dr Tedros agreed to send a letter to this effect to all Regional Directors.

In practice, recognition can take different forms, for example the signing of a Memorandum of Understanding (MoU). This is the option chosen by AFSM Western Pacific Region. Other Associations have already taken steps in this direction, such as in the Region of the Americas.

Also at that March meeting, Dr Tedros invited us to organize the sixth meeting of the Global Council at Headquarters in Spring 2024, immediately before the World Health Assembly. He extended to each Association an invitation to send one representative to Geneva in person. Furthermore – and this decision was most significant – Dr Tedros invited the Regional Directors present in Geneva to join him.

**On the 25 May 2024** we held the 6<sup>th</sup> Global Council of AFSMs, with five representatives from the Regional AFSMs and two from AFSM-Geneva in the room. Hanaa Ghoneim, AFSM-EMR President, was unable to attend in person for health reasons. However, she was present virtually as well as other members of the AFSMs.

We were honoured to see that four Regional Directors responded to the DG's invitation: Dr Matshidiso Moeti, (AFRO), Dr Hans Kluge (EURO), Dr Hanan Balkhy (EMRO) and Dr Saia Ma'u Piukala (WPRO), the last two having taken office recently in February 2024.



The 6<sup>th</sup> Global Council of AFSMs in full session.

From left to right: Dr Hanan Balkhy (RD EMRO), Dr Matshidiso Moeti, (RD AFRO), Jean-Paul Menu (AFSM-HQ), Dr Tedros (Director-General), Dr Hans Kluge (RD EURO), Dr Saia Ma'u Piukala (RD WPRO)

Photo: © WHO Christopher Black

Prior to the meeting, the Regional Directors had received a document presenting the objectives of the AFSM as well as a brief presentation of the situation in each Region.

In his opening speech the Director-General reminded his WHO colleagues that our Associations provide support and advice to former WHO staff members in many countries around the world, particularly in the areas of health insurance and pensions. The support provided to families upon the death of a former staff member is invaluable.

He added that he is pleased that former staff members continue to support our Organization, primarily as mentors, filling short-term vacancies when requested, and assisting our programmes working on the UN Decade of Healthy Ageing. He considers that we are *"senior interns"*.

Above all, and specifically addressing the Regional Directors, he emphasized that AFSMs need greater recognition. In this perspective, he warmly welcomed the Memoranda of Understanding signed at WPRO and being finalized at AMRO/PAHO.

All the Regional Directors present intervened and committed to supporting and working towards the formalization of the Associations.

Dr Piukala is excited to follow in the footsteps of his predecessor Dr Zsuzsanna Jakab, Acting Regional Director WPRO who had signed the Memorandum of Understanding with AFSM-WPR, and continue to promote and support the work of the AFSM. Dr Moeti will soon end her term of office. In less than a year, she will join AFSM and ensure that a Memorandum of Understanding is signed before she leaves. Dr Balkhy looks forward to working with the AFSM and Dr Kluge will explore how the new AFSM-EUR can be institutionalized.

We have therefore completed an essential step in the process of recognition of the AFSMs.



A group photo after the 6<sup>th</sup> Global Council of AFSMs.

#### From left to right:

Dr Saia Ma'u Piukala (RD WPRO), Dr Hanan Balkhy (RD EMRO), Dr Matshidiso Moeti (RD AFRO), Dr Tedros (Director-General) holding the plaque presented by the AFSMs, Hernán Rosenberg (President AFSM-AMRO-PAHO), Linda Milan (President AFSM-WPR), Kalula Kalambay (President AFSM-AFRICA) holding the portrait he had painted of Dr Tedros, M R Kanaga Rajan (President, AFSM-SEAR) holding the sketch of Dr Tedros which he presented to the DG, Sue Block Tyrrell (Co-President AFSM-HQ), Jean-Paul Menu (Co-President AFSM-HQ), Melodie Karlson (Co-President AFSM-EUR in formation), Dr Hans Kluge (RD EURO)

Photo: © WHO Christopher Black

On behalf of the AFSM Global Council, Linda Milan, AFSM-WPR President, presented a plaque of appreciation to Dr Tedros in recognition of his work to include former staff and their Associations in the WHO family. In addition, Kalula Kalambay, AFSM-Africa President and artist, offered a magnificent portrait he had painted of Dr Tedros, and finally Rajan Kanaga, AFSM-SEAR President, presented an excellent sketch of the Director-General. You can admire these works in the photos of the meeting in this issue.

In the second part of the meeting, traditionally devoted to discussions on WHO health insurance, Samantha Bell-Shiers, Head of SHI, presented current initiatives to improve services provided to active and former staff. Ann Van Hulle-Colbert, responsible for health insurance issues within our Executive Committee and an elected retiree representative on the Global Oversight Committee, provided additional details.

Patrick Cronin, Director of Human Resources and Talents a.i. and recently appointed by the Director-General as acting focal point for relations with AFSM-Geneva, participated in the meeting.

The next Global Council meeting will be hosted by AFSM-WPR.

#### Sue Block Tyrrell and Jean-Paul Menu

### AFSM-SEAR: Greetings, as I write this message on World Health Day, 7 April 2024.

In 1948, countries of the world came together and founded WHO to promote health, keep the world safe and serve the vulnerable – so everyone, everywhere can attain the highest level of health and wellbeing. The World Health Organization established World Health Day to draw attention to pressing health issues. This Day is dedicated to the health of people and well-being of the global community.



This year, the World Health Day theme is "*My Health, My Right*". The theme emphasizes the fact that everyone, everywhere should have access to health services, health education and information as well as safe drinking water, clean air, good nutrition, quality housing, and decent working and envrionmental conditions.

All the major world religions stress the importance of maintaining a healthy body and mind, which is also central to the tenets of many schools of traditional medicine and their respective practitioners. Health, as defined by WHO, is a state of complete mental, emotional, and social well-being and not only the absence of sickness or disability. Several countries have included this kind of right to health in their constitutions.

On this day, we are proud and privileged to remember and pay homage to the Organization as our benign benefactor and look back on our own work and contributions as staff members of this great Organization.



While being grateful and privileged to be a part, we wish the Organization and its leaders all the best in their technical endeavours and in tackling global health challenges. We indeed are proud to be "*once WHO, always WHO*" and continue our journey to achieve Health for All.

Many of our colleagues participated in the World Health Day programme organized by WHO/SEARO on 4 April, in New Delhi at the Hyatt Regency Hotel. On this occasion I had the opportunity to meet with Ms Saima Wazed, the new RD, and had a moment to inform her about AFSM and our activities, and seek her support and cooperation.

M.R. Kanaga Rajan (President, AFSM-SEAR)



**WHO Retirees' Representatives in Scandinavia (AFSM-EUR):** In April and May, AFSM-EUR endeavoured to locate those former staff members residing in the WHO European Region who had not submitted the 2023 certificate of entitlement (CE) to the Pension Fund, a situation that could result in the cessation of their pension benefits.

We succeeded in locating half of EURO's missing CEs by the deadline, but regrettably not everyone on the list could be found. The main issues include UNJSPF not having up-to-date contact data or the former staff member not having email or Internet (to access the UNJSPF Member Self Service platform).

More than 70 former staff members participated in a Seminar on the Taxation of UN Pensions in Denmark at UN City in Copenhagen on 14 May. The seminar, hosted by AFSM-EUR with support from the Staff Association of the WHO European Region, featured a presentation by Erik Blas, a WHO retiree who has closely followed several cases between individual retirees from different UN agencies and the Danish Tax Authorities over the past decade. This is a hot topic in Denmark as five cases involving UN pensions are on appeal and over 50 cases are on hold or currently pending in Danish courts.

AFSM-EUR plans to participate more actively in the UN's Decade on Healthy Ageing, possibly through a joint video project with Yongjie Yon, Technical Officer, Ageing and Health, Division of Country Health Policies and Systems, WHO Regional Office for Europe. Approximately 5,000 USD of financial support is needed to implement the project.

Three AFSM-EUR representatives participated in the 6<sup>th</sup> Meeting of the Global Council of AFSMs in Geneva on 25 May. After the Director-General's address, the Regional Directors, who were invited to participate for the first time ever, had the opportunity to share their own take on the role of AFSMs and the added value of including former staff in the WHO family.

The AFSM-EUR volunteer administration team will circulate draft Statutes for consideration and comment by former EURO staff members in June. An electronic ballot to adopt the Statutes and to constitute a Coordinating Committee is expected to take place in August or September 2024.

#### Melodie Karlson, Sharon Miller and Jenny Madsen



**AFSM-PAHO/AMRO** has made a point of recruiting members living outside the Washington area. Although most former staff worked there, we have offices in 28 countries of the Americas, and many members choose to retire to one of them. We even have members residing in Europe (not in PAHO's bailiwick).

Like other associations ours was started mainly to deal with PAHO HQ (Washington, USA), so, for example, voting required physical presence.

To make the Association more inclusive we have taken several measures:

- All Board meetings are on zoom, allowing for Board members to reside anywhere.
- In Colombia we have a chapter, meaning a full organization with officers and the like. A second country is forming one now. While this is a preferred arrangement, many countries don't have enough members to merit such a configuration (or are widely geographically dispersed, such as in Bolivia, Brazil or Mexico).
- Therefore we have appointed Focal Points in most countries. These act as intermediaries between AFSM and local members, as well as with the WR.
- Focal points participate in all non-confidential meetings of the Board, and we hold one or two zoom meetings a year just on country issues.
- We survey members to assess needs.
- While in the process of signing an MoU with the PAHO/AMRO administration, we have agreed on several arrangements such as,
  - Briefing conferences with WR's and their staff to raise questions from our members.
  - Establishing a point person in the WR's staff to deal with former staff issues, including preparing a roster of members in the country.
- To do the above we had to review our by-laws, allowing for virtual participation in the Board and electronic voting, among other reforms.

Response has been very positive so far, however we will continue to strive to find other ways to include as many members as possible in our activities.

We hope that this approach may be of interest to other Regions.

Hernán Rosenberg (President AFSM-AMRO/PAHO)

**AFSM-Africa:** *AFRO Retired but Not Tired:* On the occasion of the 6<sup>th</sup> Global Council meeting (*see the full account on page 20*) this was our presentation. The movement for the establishment of the AFSM began in March 2014 with the creation of a platform integrating former staff members and their surviving spouses. In March 2020, a WhatsApp platform was established, incorporating known retirees, with Kalula Kalambay and other retired staff as promoters. In October 2020, the Executive Committee was constituted, with eight members and five advisors. The first General Assembly, constitutive, was held on 29 May 2021, with 128 participants representing 41 of the 46 countries of the African Region. The Regional Director, Dr Matshidiso Moeti, attended as a guest speaker.

Today, there are 191 participants on the WhatsApp platform, but only 67 of them have paid a membership fee, primarily due to difficulties with money transfers to the bank in Brazzaville used by the AFSM. They reside in at least 41 out of the 46 countries of the African Region, and include members living abroad such as in Switzerland, Belgium, France, Canada, USA etc. There is a clear need to recruit members prior to their retirement.

Activities include providing regular assistance to retirees through information sharing and various support related to their pensions, and AFSM-AFRICA organizes regular technical meetings on various topics such as AI. The celebration of social events, anniversaries, and commemorations of members' passing remains the most popular activity. There are also special topics, such as the publication of a collective book with the participation of retirees and their families – this collective book is a significant contribution to both the younger generation and the institution.

Key issues :

- Enhancing communication through the more effective utilization of technology and active participation in pre-retirement training.
- Expanding outreach to retirees at the country level (both professional and G staff) and offering necessary support regarding pension and SHI-related matters.
- Strengthening the relationship with the Regional Office to expedite the institutionalization process as per the Director-General's recommendation to Regional Directors for a bottom-up approach. This involves signing a Memorandum of Understanding between the Regional Director and the AFSM-AFRICA President.



Kalula Kalambay (President AFSM-AFRICA) Custodia Mandlhate (Vice-president AFSM-AFRICA) Solange Kouo Epa (Secretary AFSM-AFRICA)

On the occasion of the 6<sup>th</sup> Global Council of AFSMs, Kalula Kalambay presented Dr Tedros with a portrait he had painted of the DG, to the evident delight of Dr Tedros and the artist.

Photo: © WHO Christopher Black

**AFSM-WPR: Making the vision a reality.** The WHO Western Pacific Regional Office officially recognized AFSM-WPR with the signing of the MoU on 9 October 2023. However, recognition of AFSM-WPR did not just end there. On the contrary, the signed MoU became a living document that guided both WPRO and AFSM-WPR through a series of concerted and coordinated efforts that put in place an arrangement – a mechanism – to institutionalize our partnership with WPRO, thus *making the vision a reality*.

*Flashback to May 2023:* On the sidelines of the 76<sup>th</sup> World Health Assembly, some AFSM Council officials were fortunate to be granted an unscheduled meeting with Dr Tedros, the DG. In that meeting the DG thanked retirees, reiterated his support to former staff and said he "will be happy when we institutionalize this (AFSM)".

**Dateline May 2024:** The first face to face meeting of the AFSM Global Council was held in Geneva upon the DG's generous invitation. It was, probably, a once in a lifetime opportunity for the AFSMs to physically meet with the DG and the Regional Directors (AFRO, EMRO, EURO, and WPRO). The Meeting, a demonstration of the DG's continuing support in promoting the institutionalization of AFSMs, was also

an occasion to present updates and share experiences. WPRO RD, Dr Saia Ma'u Piukala shared developments in the Region that led to AFSM-WPR being the first and so far, the only Regional AFSM to be recognized officially and institutionalized. He informed of WPRO support to AFSM in its work such as provision of office space at the DAF's Office, the use of WPRO meeting rooms, IT support, printing and mailing facilities, and access to the WPRO Library and the newly opened Gym. Also, during that momentous occasion, AFSM-WPR was honoured to be chosen to present to the DG – on behalf of the Council – a Plaque of Appreciation for *"Bringing former staff back home as part of the WHO family"*.

An Information Pack\*, with documents on the AFSM-WPR journey to institutionalization, was provided to the DG and the Council Members for their reference. These include:

- Information Circular on AFSM-WPR (IC/12/23) with the MoU attached, issued to all WPR staff on 22 November 2023, briefly introducing AFSM, what it does; describing actions taken by DG and WPRO; and, designation of senior management as WPRO focal points: the Director, Administration and Finance (DAF) and the Regional Human Resources Manager (RHRM).
- **DAF's Memorandum** sent in January 2024 to all Country Offices requesting designation of Country Focal Points to liaise with AFSM-WPR.
- *WHO accounts created for AFSM President and Secretary* on 14 March 2024 that provide access to the WHO intranet.
- Information Circular on AFSM-WPR Country Office Focal Points (IC/7/24) issued on 15 May 2024 to inform all WPR staff of AFSM focal points in country offices and their Terms of Reference. The generic mailbox afsmwpro@who.int has been assigned to facilitate communication with AFSM/WPR both at Regional and Country Office levels, especially in addressing queries and concerns of retirees in the Region.

Indeed, AFSM-WPR has become WHO Family... institutionalized, as Dr Tedros said in May 2023, it would make him happy, because "*Once WHO, Always WHO*."

#### Linda Milan President AFSM-WPR

\* The Information Pack can be viewed at <a href="https://bit.ly/3xfcCwY">https://bit.ly/3xfcCwY</a>





On behalf of the AFSM Global Council members, Linda Milan presented a plaque of appreciation to Dr Tedros in recognition of his efforts to include former staff and their associations in the WHO family.

**Above:** pictured with Dr Tedros and Melodie Karlson (Co-President AFSM-EUR in formation).

**Left:** Seen here with Dr Saia Ma'u Piukala (RD WPRO) and Dr Tedros holding the plaque and the sketch from AFSM-SEAR.

Photos: © WHO Christopher Black

#### **IN MEMORIAM**

## Recent deaths<sup>1</sup> of former WHO staff members as reported to AFSM

Abrahams	Charles A	04.11.2023	Kouela	Moise	30.08.2023
Aitio	Antero T	30.08.2023	Marchese	Maria Cristina	Not known
Assaf	Mahmoud	Not known	Martinez	Mary	09.02.2024
Bejarano	Julio	03.01.2024	Melloni	Marguerite M	20.01.2024
Belz	Lloyd Howard	10.02.2024	Montoya Aguilar	Carlos	24.12.2023
Bennitz	David	08.01.2024	Ndissani	Dominique	06.04.2023
Bezenzette	Ν	03.03.2024	Nkinda	Siegfried	23.01.2024
Bondet	Jean A	15.02.2024	Nour El Din	Ramadan Mohamed	25.01.2024
Burford	Liliana	22.12.2023	O'Brien	Margaret Mary J	25.12.2023
Carnelley	Gwendoline	09.01.2024	Prabhakar	Parimi	24.12.2023
Charrier	Marie-Helene	29.01.2024	Qhobela	Qhobela M.	25.12.2023
Cornet	Francoise Marie	13.01.2024	Rollo	Marie Yvonne	18.12.2023
Dunand	Jacqueline B	23.12.2023	Ruff	Beryl	07.12.2023
Dweggah	Maria V	15.01.2024	Shearley	Adelaide E	08.01.2021
El Bindari-Hammad	Aleya	15.11.2023	Shrestha	Iswar Man	31.12.2023
Etienne	Carissa Faustina	01.12.2023	Sirima	Binssi Mamadou	19.07.2019
Fernando	W W George Bernard	31.12.2023	Soga	Garba	16.12.2023
Gezen	Emin	05.01.2024	Soliman	Lily	11.02.2024
Gontcharov	Nikolai	09.01.2024	Somny	Jean-Marie	19.12.2023
Gravesen	Suzanne M	03.01.2024	Theakston	Frank E	18.12.2023
Gueye	Daouda	19.12.2023	Vacherot	Marie	21.01.2024
Hudgins	Hugh D	21.02.2024	Vessereau	Alain H	24.01.2024
Jack	Abdoulie Dodou	02.01.2024	Vete	Stephen	03.02.2024
Jimenez	Wilburg	04.01.2024	Vincent	Therese J C	07.02.2024
Kennedy	Richard L	23.02.2024	Wheeler	Mark	07.03.2021
			Younossi	Rouhollah	13.02.2024

The deaths were also announced of the survivors of former staff members: Ba Borail, Khadega Abubakr; Belsey, Ann; Bogel, Maria Anna Adelheid; De Aizenberg, Regina Alen; El Geneidy, Moshera; Ellis, Paula Ann; Glorioso, Pasquale; Hanouz, Nabiha; Houel, Nicole; Jaboulin, Nicole; Jensen, Claus Padkjaer; Kischanchand, Nitin; Marsono, Sukarmi; Pedro, Aucy; Sarna, Jogindra; Souko, Tenin; Tawil, Anita; Viladegut, Rosa; Walter, Liduvina.

<sup>&</sup>lt;sup>1</sup> The present notification of deaths was gratefully received from UNJSPF and covers Q1 2024. 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.

# John Lloyd, born 7 May 1945 in Jerusalem, died 17 April 2024 in Meyrin, Switzerland



In 1963 John enrolled and studied at the Architectural Association School of Architecture in London.

During the long summer breaks John would assist his father, who was the Professor of Archaeology at the University of London, by driving a Land Rover full of tools to excavate an

archaeological site in eastern Turkey – an early introduction to working in low-income communities.

Following graduation in 1968, John accepted a post at a leading hospital architectural design company where he worked on many hospital projects, some in developing countries. Frustrated at designing high-tech hospitals in countries that had few other health facilities, he and a colleague negotiated a six-month sabbatical to study health services development in Tanzania, politically left, and in Kenya, politically right. John became focused on how he might contribute to improving access to health services in low-income countries. Soon after, John was recruited by WHO Geneva in the newly- founded Expanded Programme on Immunization (EPI) as a consultant to develop logistics systems for vaccine deliveries. (See also QNT 125, October 2021, page 28: Why did WHO recruit two architects to develop the vaccine cold chain?)

He initiated a rapid and effective programme of

work to develop the equipment and management structures for many innovative projects. This included developing the Vaccine Vial Monitor (https://en.wikipedia.org/wiki/Vaccine\_vial\_monit or), effective vaccine carriers, and cold boxes. He engaged the UK Consumers' Association Laboratories to test all equipment used in the cold chain for performance at 23°C and 43°C ambient temperatures, and standardized drop-tests. The UNICEF Supply Division agreed to only procure prequalified equipment.

In many countries electricity supplies were erratic, so John persuaded Electrolux Sweden to develop the Icelined Refrigerator, able to maintain 2°C to 8°C on just 8 hours of electricity each day. The first solar-energy vaccine refrigerator was promoted by John; although not successful three years later another manufacturer marketed a tropicalized solar-energy refrigerator for vaccines. They are still widely used today.

John's journey from hospital architectural design to healthcare development in low-income countries is a testament to his unwavering determination and compassion. His work has transformed the lives of many and serves as a shining example of what can be achieved when one is driven by a noble cause. This was just the beginning.

John leaves a wife, Ann, and two daughters, Cressida, and Zoë.

## James Cheyne

A tribute and a more detailed account by Michel Zaffran of John's wide-ranging achievements can be found on the next page.

John's life was a life dedicated to public health.

If there is someone who has touched every vaccinated person in the world, without exception, with the approaches, technologies, and operations that he mentored or led and was militant about, it is John Lloyd.

Of course, unless you deal with vaccine logistics, you may not know that John's contributions to the field are enormous and extraordinary. *Umit Kartoglu* 

# John Lloyd

John Lloyd was the architect of the vaccine cold chain. Back in 1976, he convinced Dr Ko Keja, who
was then in charge of the nascent WHO efforts to expand immunization beyond smallpox, that the
Expanded Programme on Immunization (EPI) would be facing serious challenges if no attention was
paid to the quality of the vaccines. Dr Keja reluctantly gave him a six- month contract to write a white
paper. John then went on to collaborate with Ghana to design the first country vaccine cold chain.
John stayed at WHO for the next 25 years.

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- In collaboration with the National Bacteriological Laboratory in Stockholm, John helped develop the first high-performance, "five-day" cold box for vaccines a design that many manufacturers continue to exploit to this day.
- John convinced Electrolux (now Dometic) to design and manufacture the first multi-energy vaccine refrigerators operating on gas, kerosene, or electricity.
- He then convinced them to design the first ice-lined refrigerators that needed only eight hours of electricity per day to keep the vaccines safe a successful design that was then copied and reproduced by a number of companies around the world.
- John collaborated with NASA to field test the first solar-powered refrigerators in the vaccine cold chain.
- John created the system of equipment standards then known as "Product Information Sheets" which has served as a reference to WHO programme managers and United Nations Children's Fund (UNICEF) field staff for over 20 years.
- John pioneered the concept of injection safety. First, he introduced plastic sterilizable syringes and steam sterilizers into the EPI after intense negotiations with a manufacturer of pressure cookers. He then pioneered the introduction of auto-disposable syringes and safety boxes into the WHO Product Information Sheets (and recruited Peter Evans from UNICEF to lead that effort).
- John strongly resisted PATH's attempts to launch the first vaccine vial monitor (VVM) when he found it matched the characteristics of measles vaccine and not oral polio vaccine (being the most heat-sensitive of the EPI vaccines). At his insistence, PATH delayed the launch until a VVM was created that matched oral polio vaccine. VVMs are now required on nearly all UNICEF-procured vaccines.
- John established TechNet.
- John was instrumental in launching the Kick Polio Out of Africa campaign. He designed the "*Kick Polio Out of Africa*" logo with his daughter, polio vaccine "day carriers," and a "stool-specimen collection kit". He also wrote a popular regional polio eradication song sung by Koffi Olimode of the Democratic Republic of Congo.
- John designed the Immunization Services Support (ISS) performance-based reward scheme of the GAVI Alliance (US\$20 share per additional child vaccinated). The GAVI Alliance also called upon John to help design country application forms. Not only did he design the first application forms, but he also proposed the ISS concept.
- John pioneered the use of data quality audits for country data supplied to GAVI.

During all these years, John also contributed a few other not-so-small things such as introducing the first portable computers into WHO, driving WHO's move to more modern computer software, recruiting me into WHO, and introducing WHO to electronic mail.

I am personally grateful to John for everything I have learned through him and for his mentorship over the years. It has been a great privilege and honour to work with him for over 12 years at WHO and then in his capacity at PATH. John was instrumental in the design of project Optimize and its operations. *Michel Zaffran* 

### WALK THE TALK – GENEVA 2024

# Walk the Talk: The Health For All Challenge, 26 May 2024

This year's event was held on a dry, bright Sunday morning and was planned to provide a healthy start to the 77<sup>th</sup> World Health Assembly, just about to get under way.

By the time your scribe and his wife Mary arrived – a full hour before the Walk was due to start at 09.45 – the *Place des Nations* was already filling up fast. There were many stands to visit, some providing healthy fruits and drinks, others holding exercise and dance routines to join, and on stage was more entertainment, including a very enthusiastic drum group using improvised drums of various recycled containers.

More than 8 000 people took part, very many more thousands of participants than in previous years. The Walk has become a must-do event in Geneva.

For the official opening Dr Tedros took to the stage and welcomed all of the participants, including the special guests behind him, due to compete in the masterclass of athletes,

• Swiss Paralympic wheelchair racer, world champion Marcel Hug, training to compete in this year's Paris Paralympics.

- Olympic champion David Rudisha, two-time Olympic gold medallist at 800 metres and the world-record holder at that distance.
- Pau Gasol, who played in the National Basketball Association as a power forward and was a six-time NBA All-Star.

And no less important was the number of AFSM members present and ready to participate this year. Signed up as Team AFSM were some more of the committee members, Sue Block Tyrrell and Michèle Evans, plus the representatives of Regional AFSMs, Kalula and Vicky Mujinga Kalambay AFSM-AFRICA, Hernán Rosenberg AFSM-AMRO-PAHO, Melodie Karlson AFSM-EUR, M R Kanaga Rajan AFSM-SEAR, Linda and Dr Gem Milan AFSM-WPR, in Geneva for the Global Council Meeting held the day before. We met briefly beneath the Broken Chair, before we became separated by the crowds, and we all completed the 4.2km circuit.

Another highly successful event for WHO, and a most enjoyable one for the participants. Why not join us next year!

#### Keith Wynn



Dr Tedros welcoming all of the participants and introducing the guests and masterclass competitors. Shortly after this photo was taken, we were off.

Not rapidly at first, but moving steadily, as the many thousands of participants set off together.

Within a few hundred yards the pace quickened as we all found our pace for the walk.

Photo: © WHO / Edouard Hanotte

More photos of the event can be found on page 38 in the digital edition.



Left to Right: Sue Block Tyrrell, Melodie Karlson, Hernán Rosenberg, Vicky Mujinga and Kalula Kalambay



Left to Right: Vicky Mujinga and Kalula Kalambay, M R Kanaga Rajan, Hernán Rosenberg, Sue Block Tyrrell, Mary Wynn



Linda Milan in the foreground, closely followed by dragons



Shortly after the start, giving an idea of the sheer number of participants and the near impossibility of staying in a group



"Don't look back!" Well, if you did, this is the view of the thousands of participants behind you

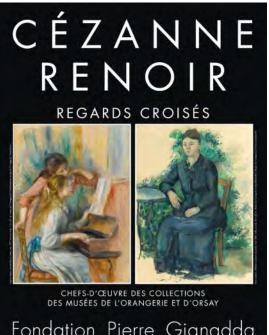
## **ART EXHIBITION IN MARTIGNY, SWITZERLAND**

# Cézanne – Renoir: Regards Croisés

## Masterpieces from the Orangerie and Orsay Museums

## Fondation Pierre Gianadda, Martigny, Suisse

From 12 July to 19 November 2024, every day from 9:00 a.m. to 6:00 p.m.



Pierre-Auguste Renoir (1841-1919) and Paul Cézanne (1839-1906): trajectories of two great masters of painting. And here they are united to bring the Foundation's walls to life with works that compare, confront, emancipate and finally become tutelaries of the future avant-gardes of the 20<sup>th</sup> century.

This is the challenge that the Orangerie and Orsay museums in Paris are demonstrating this summer with some 60 paintings.

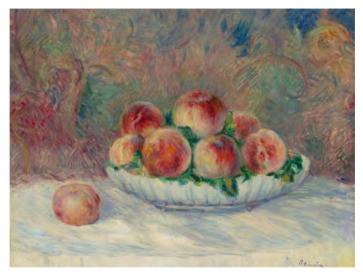
Fondation Pierre Gianadda - 19 novembre 2024 Martigny Suisse us les jours de 9 h à 18

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Paul Cézanne. Straw-Trimmed Vase, Sugar Bowl and Apples Oil on canvas, between 1890 and 1894, 68.5 x 77.8 cms Orangerie Museum, Paris ©RMN-Grand Palais (Musée del'Orangerie) / Hervé Lewandowski



Auguste Renoir. Peaches. Oil on canvas, 1881, 59 x 67 cms Orangerie Museum, Paris ©RMN-Grand Palais (Musée del'Orangerie) / Hervé Lewandowski

## VISIT TO THE MAIN BUILDING CONSTRUCTION SITE

# Some *Facts and Figures* and more photos of the restoration work in the old HQ Main building

## Personnel:

There are currently around 150 personnel physically working on site, but there are probably at least twice that number engaged off-site, working part of their time on tasks related to the project.

## **Demolition:**

5,090 tonnes	
1,150 tonnes	
530 tonnes	
70 tonnes	
3,340 tonnes	
13 tonnes per day	

## **Technical installations:**

Cabling installed:	530,000 metres
Ventilation ducts:	42,000 metres
Sprinkler pipework:	17,900 metres
Hot- and cold-water pipework:	123,000 metres

## **Finishes:**

Doors (excluding office doors)	1,100
Glazing:	9,600 m <sup>2</sup>
Flooring:	26,600 m <sup>2</sup>
Ceiling:	22,500 m <sup>2</sup>
Elevators:	11 units



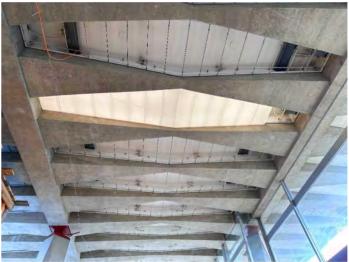
The intrepid AFSM explorers, all togged up and ready to go.



Basement level 3: These smaller bore pipes will then take the hot and cold water to all floors.



Basement level 1: This is the "Brazil" painting in its protective casing, with full temperature and humidity control.



Basement level 1: The plastic lighting panels in the ceiling have become brittle and discoloured with age. Identical replacement panels have been manufactured and are currently being installed.



Basement level 3: From the heat exchangers on the other side of the wall, hot and cold water is distributed from here.



Basement level 2: Partially restored at present and being used as a storage area, pending a decision on future usage.



Another view of a small portion of the 530,000 metres of cabling being installed throughout the building.

A non-electrician's nightmare!



7<sup>th</sup> floor: A small idea of the complexity of the restoration that will soon be hidden behind the ceiling panels. The main lifts are in the background.



7<sup>th</sup> floor: In line with the B building, small meeting rooms are being installed, and like the offices, they will have glass fronts and doors to increase the amount of natural light in the corridors.



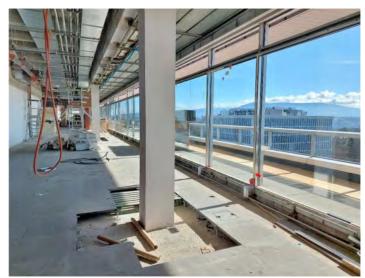
7<sup>th</sup> floor: illustrating the floor framework of the office partitioning being fixed in place.



7<sup>th</sup> floor: Before the office partitioning is installed.



 $7^{\rm th}$  floor: With some of the office partitioning partially installed.



8<sup>th</sup> floor: Which will become the DG's suite of offices. The former cafeteria terrace is visible outside the window.



A view from the 7<sup>th</sup> floor looking towards the International Organization for Migration (IOM) building. The road where the blue bus is parked in this photo is now open and is the access road to the rapid transit tunnel, approximately 100 metres to the right.



Cuttings from the cherry trees removed from the front of the Main building have been grafted onto healthy root stock and are now thriving near to the entrance to the WHO campus.



A welcome rest and refreshments after clambering around the building site of the main building. From left to right, Helena Mbele-Mbong, James Cheyne, Keith Wynn, Philip Jenkins, Ambi Sundaram, and Bruce Thomas Leech

All photos were taken by the AFSM members on the tour.

# WALK THE TALK – GENEVA 2024

# Walk the Talk. More photos from the event



The number of participants in the 2024 was just incredible, this is only a partial view! *Photo: WHO / Pierre Albouy* 



Basketball champion Pau Gasol towers over the DG and everyone else *Photo:* © *WHO / Pierre Albouy* 



The drummers led the event for some of the way *Photo:* © *WHO / Edouard Hanotte* 



Just one of the many opportunities to prepare for the walk *Photo:* © *WHO / Edouard Hanotte* 



Did someone say let's go for a walk? I'm in! Photo: © WHO / Edouard Hanotte



The DG ready for the start *Photo:* © *WHO / Pierre Albouy* 



And yet another selfie with Dr Tedros in it... Photo: © WHO / Pierre Albouy