

NEWSLETTER

OF THE ASSOCIATION OF FORMER STAFF MEMBERS



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DECEMBER 2006



Jenny Eybers, Carlos Daza, Hortensia Saginor and Patricia Peterson at the Fall luncheon

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NEW AFSM BOARD MEMBERS

The 17th AFSM General Meeting took place at PAHO Headquarters in Washington DC on 30 November 2006. The proceedings of the meeting will be reported on in detail in the next Newsletter. However, we would like to advance information on the new composition of the Board (beginning 1 January 2007) as a result of the elections held at the Meeting.

Elections took place for four positions: The terms of office of Mario Boyer, Carlos Daza, and Luzmaria Esparza had come to an end, in addition to which Carol Collado had resigned, as she had accepted a full-time position. Carlos Daza indicated that he was not a candidate for reelection. The following were the successful candidates for the four positions: Eglá Blouin, Mario Boyer, Luzmaria Esparza, and Jorge Litvak. They join continuing Board Members Jaime Ayalde, Jan Barahona, Nancy Berinstein, Germán Mora, and Hortensia Saginor.

Officers: Nancy Berinstein was reelected President for the calendar year 2007; Jorge Litvak will serve as Vice President, Luzmaria Esparza as Treasurer, and Eglá Blouin as Secretary.

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THINGS FOR YOU TO DO NOW!

UN Pension Fund Certificate of Entitlement:

You should by now have received and returned the UN Pension Fund Certificate of Entitlement in order to ensure that your pension will continue. If you have not received the certificate, or if you have misplaced it, you should ask for another form immediately (Tel. 212-963-6931) and mail it to:

The Secretary
United Nations Joint Staff Pension Fund
Room S-635
New York NY 10017, USA

To see if your returned certificate has been received by the Pension Fund in NY:

1. Go to www.unjspf.org on the internet and click on "Welcome."

2. Click on "Beneficiary." At the next screen, under "My Fund" at the left, click on "CE Tracking System."

3. At the next screen, click on "Log in to your Secure Documents Page." If you are a "Registered User," fill in the information:

- Retirement number
- Password or PIN

If you are not a "Registered User":

Complete the "Request for Beneficiary Password" (PIN) by providing your:

- Retirement number
- First name
- Last name
- E-mail address

Click on "Submit Request." Wait for the PIN to arrive by e-mail, and follow the steps listed above for a Registered User.

Payment of AFSM Dues:

Please look at the label on this mailing and note the date in the upper left corner. This indicates the year through which your AFSM dues are currently paid.

If the date is 2004 or earlier, your dues are seriously in arrears and should be paid if you want to remain a member of AFSM and to continue to receive its mailings.

If the date is 2005 or 2006, you are still a member in good standing, but you owe the dues for those years.

In either case, your dues for 2007 are also now due. AFSM has three forms of dues payment:

- \$10.00 annually
- \$50.00 for a ten-year membership
- \$100.00 for a lifetime membership

To maintain your membership through 2007 or beyond, you should:

Pay \$10.00 for each year of unpaid dues, plus \$10.00 for 2007, or

Pay \$50.00 or \$100.00, and your ten-year or lifetime membership will begin at the first unpaid year and continue for ten years or for life.

You are encouraged to opt for a ten-year or lifetime membership, instead of annual membership. This way your membership is assured, and the discounts in dues are considerable!

Address Corrections:

Please let us know if there are any errors in your address as shown on the label on this mailing. Also, we again remind you to send us your e-mail address if you have one, so we can get news to you on a more timely basis.

Language Preference for Your Copy of the Newsletter:

The Newsletter is published in English and Spanish. It is being distributed to members according to their country of residence. Let us know if you would prefer to receive your copy of the Newsletter in Spanish rather than in English, or vice versa.

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**DOES IT PAY TO GROW OLD?
(ANSWER: SOMETIMES)**

There are many discounts available to older citizens if you just know about them. As a regular feature of the Newsletter, ***we would like members to send us information on discounts that they have discovered*** so we can make the information available to others.

We start with a couple that some of our members may not know about and may be able to take advantage of:

(Washington DC): Senior Citizen or Disabled Property Owner Tax Relief:

When a property owner is 65 years of age or older, or when he or she is disabled, he or she may file an application immediately for disabled or senior citizen property tax relief. This benefit reduces a qualified property owner's property tax by 50 per cent. The following guidelines apply:

1. The disabled or senior citizen must own 50 per cent or more of the property or cooperative unit;
2. The total adjusted gross income of everyone living in the property or cooperative unit, excluding tenants, must be less than \$100,000 for the prior calendar year;

3. The same requirements for application, occupancy, ownership, principal residence (domicile), number of dwelling units, cooperative housing associations and revocable trusts apply as in the homestead deduction.

DC real property owners should also be advised that the residential property tax rate is being reduced to \$0.88 from \$0.92 for each \$100 of assessed value. The rate reduction will appear on the March 2007 real property tax bill. Also, the homestead deduction (available to owners who live in their property) is increased from \$60,000 to \$63,000 of the home's tax assessment value. Deduction savings will also appear on the March 2007 tax bill. If you live in your home and you have not applied for homestead deduction status, you are encouraged to do so.

(United States): Discount on Car Insurance:

Some auto insurance companies will reduce your premium if you take a driver safety course offered by AARP. Please consult your insurance company or agent for their policy (for example, GEICO gives an 8%-10% reduction on liability each year for three consecutive years; the course must be retaken after three years for the discount to continue).

The course is an eight-hour classroom refresher that can help you learn the effects of aging on driving and how you can adjust your driving. Most classes are taught in two four-hour sessions spanning two days, and the course costs \$10.00. AARP also offers an online course costing \$15.95 for AARP members and \$19.95 for non-members.

You can learn more about this program by viewing the AARP website at www.aarp.org and then clicking on Family, Home, and Legal, followed by Driver Safety. You can order the online program at that location.

You can also find a driver safety course near you on the same website, or you can call 1-888-AARP-NOW (1-888-227-7669). Be prepared to provide your five-digit zip code, and a local volunteer will call back within three to five business days to help you locate the course nearest you.

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TRANSITIONS AT PAHO AND WHO

PAHO:

Resignation of the Deputy Director

Dr. Joxel Garcia has resigned from the post of Deputy Director of PAHO, effective 1 November 2006. Until a new Deputy Director is appointed, the following administrative changes will be in effect:

All issues involving PAHO policy or affecting the Organization's resources will be directed to the Director. All decisions regarding administrative and technical issues for Areas/Units under the Office of the Deputy Director are delegated to Dr. Richard Van West-Charles, IKM. All issues regarding the BPB of Canada, Puerto Rico, and the United States are delegated to Dr. Mariela Licha Salomón, CSU.

Appointment of the Director of Administration (AM)

Mr. Michael A. Boorstein has been appointed the new Director of Administration (AM) of PAHO, effective 18 September 2006.

Mr. Boorstein, a national of the United States of America, grew up in Bethesda MD and received a Bachelor of Arts degree in psychology from Beloit College in Beloit WI. He earned a Master of Business Administration degree, with an emphasis on information systems management, from The George Washington University in Washington DC. At Harvard University in Cambridge MA he conducted research in information technology and diplomacy as a Fellow at the Weatherhead Center for International Affairs. He also participated in the Senior Seminar at the US Department of State's Foreign Service Institute, the most advanced professional development program available to senior foreign policy and national security officers of the US Government.

Mr. Boorstein has over 30 years of international experience as a Foreign Service Officer, serving in various positions at US diplomatic and consular posts in Italy, Zaire, Canada, Russia, Poland, Venezuela, and China. His vast experience overseas has made him proficient in Spanish, French, Italian, Russian, Polish, and Chinese.

His most recent assignments with the Department of State have been at its Headquarters in Washington DC. From 1999 to 2001, he was the Director of the Beijing Program Office in the Office of Foreign Building Operations (FBO). In 2001, he was appointed as the Acting Deputy Assistant Secretary for FBO. From 2001 to 2002, he served as the Managing Director of Planning and Development in the Bureau of Overseas Buildings Operations. From 2002 to 2005, he was the Director of the United States Diplomacy Center in the Bureau of Public Affairs.

Mr. Boorstein's office is located in Headquarters, office 1007, and he can be reached by telephone at extension 3412 and by e-mail at directorofadmin@paho.org (Director of Administration).

WHO:

Election of Next Director General

At its meeting on 23 May 2006 the WHO Executive Board agreed on an "accelerated process" for electing a new following the sudden death of Dr. Lee Jong-wook the day before.

On 8 November Dr. Margaret Chan of China was nominated by the WHO Executive Board as Director-General. Her appointment was confirmed on 9 November by a special session of the World Health Assembly; she took office on 4 January 2007.

The Director-General is WHO's chief technical and administrative officer. Dr. Chan was previously WHO Assistant Director-General for Communicable Diseases and Representative of the Director-General for Pandemic Influenza.

In her acceptance speech, Dr. Chan said: "What matters most to me is people, and two specific groups of people in particular. I want us to be judged by the impact we have on the health of the people of Africa, and the health of women. ... Improvements in the health of the people of Africa and the health of women are key indicators of the performance of WHO."

Dr. Chan obtained her medical degree from the University of Western Ontario, Canada and also has a degree in public health from the

National University of Singapore. She joined the Hong Kong Department of Health in 1978 and was appointed as Director of Health in 1994. As Director, she launched new services focusing on prevention of disease and promotion of health. She also introduced new initiatives to improve communicable disease surveillance and response, to enhance training for public health professionals, and to establish better local and international collaboration. She has effectively managed outbreaks of avian influenza and the world's first outbreak of severe acute respiratory syndrome (SARS).

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WHAT ARE WE DOING NOW?

by Gloria Silvestre Khokhar

In the last Newsletter we informed you that the idea behind this new section is to briefly let you know what we are doing, where, and how to contact us in case you are interested in learning more about it or joining in the fun.

We would like YOU to be featured here, so kindly send a note by regular mail or e-mail; or call:

Gloria Silvestre Khokhar.
E-mail: gloriaskho@yahoo.com
Tel: 703-425-9406
9975 Cyrandall Dr
Oakton VA 22124, USA

Features:

In this issue we feature two distinguished Mexican colleagues:

Carlos Gamboa - Carlos worked for PAHO for 28 years. For seven years he was in BIREME, in São Paulo, where he received valuable guidance from Dr. Amador Neghme, Dr. Abraham Horwitz, and Dr. Martin Cummings. In 1978 he was assigned to Headquarters, where he had several assignments in the field of telecommunications and BITNET. He played an important role in PAHO's early projects on the Internet applied to Epidemiology and Global Health. Many of you will remember Carlos as Chief of the PAHO Library and--for those who often came to his office to see the games--the "unofficial Representative of the World Cup of Soccer." He retired from PAHO in 1998.

For the last few years, he has built a "Library of Lectures" in the field of Health Prevention. For those interested in placing a lecture on this site contact: www.pitt.edu/superl/. Carlos and his wife Carmina are happily sharing their life with their children and three grandchildren. You may contact him at: gamboacd@bellsouth.net.

Teófilo Partida Godínez – Teófilo visited many countries during his 23 years as Technical Officer in the field of control of communicable diseases; specifically, he worked on malaria, dengue and yellow fever projects. He is proud of his contributions to the health of the rural people whom he found suffering from poverty, lack of basic sanitary services, communications, electricity, and even schools. Since retiring from PAHO in 1985 he has been living in Guadalajara, Jalisco, Mexico. Teófilo is an avid reader of newspapers and books. Along with his wife, he keeps active by taking long walks in the country side and enjoys a happy family life with several children and grandchildren. If you are planning a trip to Guadalajara, Mexico, he can be a very valuable person to contact and he will be very happy to see you: Tel. (33) 3647-2408 and e-mail: teofilopage@yahoo.com.mx

SOURCES AND CONTACTS:

Art - National Museum of Women in the Arts
Carmen Anderson
Tel. 1-703-532-7622 and
andersoc@juno.com

Bullfighting

Luis Odria:
Tel. 1-407-886-5016

Guadalajara, Mexico

Teófilo Partida Godínez
Tel. (33) 3647-2408 and
teofilopage@yahoo.com.mx

Health and Healing

Sumedha Khanna
Tel. 1-707-785-2566 and
khannas@mcn.org

Library of Lectures – Carlos Gamboa:

www.pitt.edu/~superl/ and
gamboacd@bellsouth.net

Maternal and Child Health

Elsa M. Moreno
Tel. 54-81-22-69-04 and
emoreno@tucbbs.com.ar

Music – Appreciation, classical, discussion, opera, recordings

Helena Restrepo
Tel. 572-893-1495 and
restrepoh@telecast.com.co

Álvaro Uribe Acevedo
Tel.-571-211-5418 and
auribe@isoft.net

Orphanage and community health, accepting donations –

Samuel Koilpillai
samargaret@sify.com and
cupinter@netzero.net

Wood and Iron Sculpting

Dr. Solum Donas:
solumct@gmail.com

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There is no such thing as old age. The passing of the years do not lead to old age, but to Wisdom. I am NOT old. I will never be old. I will not die of old age. I will live in order to seek Wisdom and Beauty.

(Jose Ma. Paganini, *Confessions*.
Presentation at *Panel on Healthy Aging*.
AFSM Second International Reunion,
Buenos Aires, 24-28 April, 2006)

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CORRESPONDENCE RECEIVED

Sumedha Mona Khanna, Gualala CA

Hi! I have read the latest issue of the AFSM Newsletter and would like to congratulate you and others responsible for putting it together, including the report of the meeting in Buenos Aires. The report was so succinct that, even though I did not attend the meeting, after reading it I felt included. It is a fine job, especially since I am sure much of the meeting was in Spanish. Thank you for keeping us all informed of the new developments.

It was also heartwarming to read about the work so many of my previous colleagues are doing after retiring from PAHO. I enjoyed reading about Nestor Suarez Ojeda, Elsa Moreno and Carmen Anderson. I hope to reconnect with them. I could almost hear Dr. Paganini when I read about his Confessions. He has always been a deep thinker and a philosopher. I agree with so many of his sentiments about Health for All and about aging. Yes, we are all advancing in years but aging is more a state of mind than the physical aspects of our bodies. Unfortunately, in this culture (USA) old age is regarded as negative and so much emphasis is given to diseases and disabilities.

I was very heartened to read about Sam Koilpillai's work in India. I will definitely connect with him and visit him when I go to India next year. It would be great to collaborate with him in his project. I have also been supporting some projects in India aimed at education of girls and women's empowerment through the Global Fund for Women, which is based in San Francisco.

My personal activities in health and healing continue here in this small community of The Sea Ranch and Gualala. I am learning about self-healing approaches that can be applied by anyone. My other interest is working with women over 60. I had started a Circle of Vital Women some years ago which met once a month and shared ideas, information, and experiences and learned some self-care practices in health and healing. Since last year several members of this group have moved on. I have taken a break this year, revitalizing my own knowledge about healing practices. Next year I will start a new Circle on the Third Stage of Life, again for women and men (if they are interested) over 60. There are some incredible resources in this field in Northern California.

I just wanted to convey my sentiments about the work you all are doing and thank you again for keeping us connected and encouraged. Warm regards.

Sumedha Mona Khanna

Yva Latortue, Port-au-Prince, Haiti

Dear Friends: In Port-au-Prince, I received a copy of the special edition of our Association Newsletter dated last July, which deals with the reunion held in Argentina just three months before. If the magnificent report of that meeting was written to make all the members who did not honor their invitation regret their decision, you hit them right on the head with a big hammer. BRAVO!

The presentation of the edition is, by itself, quite impressive. The two seemingly young smiling ladies on the cover disregard gracefully the fact that all those concerned are retirees, people who had devoted years, some of them more than forty, of strenuous work to the Organization, engaged in the service of a noble cause--unless it suggests that youth and health are omnipresent in those who accepted to fight for the wellbeing of nations.

The three and a half pages narrating the events, which single out the encounter during its whole duration, is really exciting. My attention rested a moment on a recommendation deemed very popular: that the AFSM Board continue to facilitate such reunions on an annual basis. I happily join my voice to those who sponsor such endeavor, which can but consolidate more and more our association and help it accomplish perfectly its aims.

Anyway, the long list of participants in the reunion, 75 from 17 countries, including two Europeans, is a vibrant testimony of the vitality of our association. I may even add that the planning of this last meeting may serve as a model to be followed. Besides the interesting and instructive discussion of the topics on the Agenda, it allowed the participants to enjoy and harvest booties of information on the natural treasures of Argentina, its rich folklore, the so many amenities of the Argentinean people. ...

My husband has been three times to meetings in Buenos Aires and all he can talk about is, mostly, limited to, besidea la Calle Florida, la Casa Rosada and the two big avenues, one the Avenida 9 de Julio (the largest in the world), where there is an obelisk similar to the Washington Monument in DC, the other Avenida Rivadavia (the longest in the world).

Since he intended to accompany me eventually to the meeting, I shared with him the pleasure of reading the entire newsletter, and of course the regret to have missed all the fun you had.

We definitely will not miss next year's meeting, be it in Mexico or Brazil. With best wishes,

Yva Latortue

Teófilo Partida Godínez, Guadalajara, Mexico

Dear colleagues: With great pleasure I am writing to congratulate you on the success achieved at the meeting in Buenos Aires, Argentina, in April 2006.

I have read with close attention the Special Edition of the July 2006 Newsletter, in which I observed that many current and former PAHO/WHO staff members participated in the meeting, whose different sessions dealt with very important issues. I was very sorry that I could not attend for health reasons; however, I was very pleased to see so many photos of old friends, such as my fellow malaria specialists Antonio Benítez, Jaime Ayalde, Armando Bañuelos, Carlos Bobba Bonatti, Luiz de Souza Borges, Tomás Navía, Hortensia Saginor, Argelio Arriola, and Rafael Miranda Franco, who appear together in a photo. Naturally, time has taken its toll, covering our heads with snow, but with great pride we shall always remember those glorious years when we gave our youth to walking through different countries of the Hemisphere, trying to restore health to every malaria patient that there was in those days. Today, we live from our memories, remembering always so many friends and colleagues who shared their lives with our families, first in one country and later, in another, and so passed the years. Many have already gone before us on that voyage of no return, but they will always live on in our memories. Sooner or later, we too will receive our no return ticket and thus the life cycle will come full circle.

Before closing, I would like to offer my suggestion about the next meeting: since one was already held in South America, it would please me to have it in Mexico, because of its location. And, to close, it only remains for me to

congratulate you again. I hope to see you at the next meeting of Former PAHO/WHO Staff Members. Affectionately,

Teófilo Partida Godínez

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WHAT YOU SHOULD KNOW ABOUT STROKE: PART II

by Mario Boyer

After a stroke, victims often experience substantial recovery, but such improvement is frequently incomplete. Recovery is not “passive,” but rather a process that requires the active participation of the patient and the full involvement of the family.

The terms “rehabilitation” and “recovery” are often used together. Although the two processes are closely connected, there are important distinctions between the two. Recovery is best defined as the actual return of neurological functionality after a stroke. But given the fact that “recovery” as such is frequently an incomplete process, stroke survivors must acquire skills commonly referred to as “compensation,” that is, life skills required to adapt in the case of altered neurological functions. When we speak of rehabilitation, we usually refer to both the processes of recovery and compensation.

The primary goal of rehabilitation is to help survivors of a stroke become as independent as possible. It also aims to help survivors relearn skills that are lost when there has been partial damage to the brain. In addition, it teaches survivors new ways of performing tasks to circumvent or compensate for residual disabilities.

As the NIH has highlighted, there is strong consensus among experts that the most important element in any rehabilitation program is carefully directed, well-focused, repetitive practice - the same type of rote practice used in the learning of new skills in non-impaired situations.

Rehabilitation therapy begins in the acute-care facility, after the patient’s medical condition has been stabilized, usually within 24 to 48 hours after the stroke. The first steps involve promoting independent movements, because many

patients are paralyzed or seriously weakened. Patients are prompted to change positions frequently while lying in bed and to engage in both passive and active range-of-motion exercises to strengthen their stroke-impaired limbs. Passive range exercises are those in which the physical therapist actively helps the patient to move a limb repeatedly, whereas active exercises are performed by the patient without the help of the health professional.

The patient progresses from sitting up to standing, learning to bear his own weight and to walk without assistance. A physical therapist helps patients to perform more complex and demanding tasks. Taking the first steps in carrying out the basic activities of daily life represents the first stage in a stroke survivor’s return to functional independence.

Because of the short duration of most acute hospitalizations after stroke, rehabilitation efforts in this phase of care usually are limited in scope and duration. A freestanding rehabilitation hospital unit located within an acute-care hospital generally provides the most comprehensive and intensive rehabilitation services post-stroke. Skilled nursing facilities provide a highly variable level of services. In addition to short-term rehabilitation services, skilled nursing facilities usually provide long-term residential care for individuals who are unable to return to the community.

A large number of stroke survivors will require home care services to help them adjust to their return to daily life. These agencies might be affiliated with hospitals or operate as independent, private businesses. The foundational part of this service is the visiting nurse.

The types and degrees of disability that follow a stroke depend upon which part of the brain is damaged. According to the National Institutes Health (US Department of Health and Human Services), strokes result in five kinds of disabilities:

1. paralysis or problems controlling movement
2. sensory disturbances (including pain)
3. problems using or understanding language
4. problems with thinking and memory
5. emotional disturbances

Given the broad range of disabilities associated with strokes, victims clearly require the attention of a variety of different specialists in order to ensure more complete recovery.

According to the NIH, physicians have the primary responsibility for managing and coordinating the long-term care of stroke survivors, including recommendations concerning which rehabilitation programs will be best for individual needs. The rehabilitation nurse helps patients to reintegrate into their daily life, aiding in the relearning process and reacquisition of basic skills. The physical therapist treats disabilities related to motor and sensory impairments. The occupational and recreational therapists are concerned with improving motor abilities and skills needed to perform self-directed activities, such as home gardening, arts and crafts. Speech-language pathologists help stroke survivors with aphasia relearn how to use language or alternative forms of communication. They also help people improve their ability to swallow. Finally, vocational therapists help patients with residual disabilities, identify vocational strengths and educate individuals about their rights and protections.

Senelick and Dougherty suggest that there are certain elements that an adequate rehabilitation hospital should offer its patients:

- Evaluation and complete analysis of patient's medical rehabilitation
- Physical therapies focused on strength, endurance, and mobility
- A concentration on activities of daily living
- Cognitive rehabilitation that compensates and retrains for memory loss and deficits in judgment, and attention
- Speech and language therapies
- Evaluation and treatment
- Sexuality counseling
- Behavior-management programs
- Involvement with the family and counseling for family members
- Social skills groups and leisure activities
- Community reentry
- Access to vocational retraining
- A case manager assigned to each patient
- Accessible and engaged physicians

ADDITIONAL RESOURCES / INFORMATION:

Brain

PO Box 5801
Bethesda MD.20824
800-352-9424
www.ninds.nih.gov

American Heart Association/ American Stroke Association

7272 Greenville Ave
Dallas TX 75231-4596
800-AHA-USA1 (800-242-8721)
www.amhrt.org

National Stroke Association

9707 East Easter Ln
Englewood CO 80112-3747
303-649-9299
800-STROKES (800-787-6537)
www.stroke.org

National Rehabilitation Information Center

1010 Wayne Ave
Suite 800
Silver Spring MD 20910-5633
301-562-2400
800-346-2742
www.naric.com

National Aphasia Association

29 John St.
Suite 1103
New York NY 10038
212-267-2814
800-922-4NAA (800-922-4622)
www.aphasia.org

American Speech-Language-Hearing Association

10801 Rockville Pike
Rockville MD 20852-3279
301-897-5700
800-638-8255
www.asha.org

Massachusetts General Hospital Department of Neurology

demOnmac.mgh.harvard.edu

Medline Plus Health Information

www.nlm.nih.gov/medlineplus

Washington University in St. Louis Internet Stroke Center

www.strokecenter.org

Stroke Clubs International

805 12th St
Galveston TX 77550
409-762-1022

REFERENCES:

Stein, J. *Stroke and the Family*. Cambridge: Harvard University Press, 2004.

Senelick, J. and Karla Dougherty. *Living with Stroke: A Guide for Families*. Birmingham: Health South Press, 2001.

“Know Stroke: Know the Signs. Act in Time.” US Department of Health and Human Services, 2004.

“Brain Basics: Preventing Stroke.” US Department of Health and Human Services.

Setting New Directions for Stroke Care: Proceedings of a National Symposium on Rapid Identification and Treatment of Acute Stroke. US Department of Health and Human Services, 1997.

“Avoiding Heart Attacks and Strokes: Don’t be a Victim. Protect Yourself.” France: WHO, 2005.

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IN MEMORIAM

| | |
|--------------------|------------------|
| Seymour Barnes | 15 August 2006 |
| Augusto Vallenias | 3 November 2006 |
| Rosa Madureira | 5 November 2006 |
| Gerard Etienne | 6 November 2006 |
| Claire Harley | 30 November 2006 |
| José Antonio Solís | 19 December 2006 |
| Merlin Brubaker | 21 December 2006 |

The Newsletter staff encourages any member who wishes to share a personal remembrance of a colleague to send their written piece to one of the members of the Editorial Committee listed on The Back Page. The remembrance should not be longer than 450 words and should preferably be accompanied by a photo. The Editorial Committee reserves the right to edit and/or shorten the material.

REMEMBERING COLLEAGUES

Rodrigo Donoso (1923-2006)

*by Jaime Ayalde**

I met Rod before I joined PAHO. It was in Bogotá, 47 years ago, and we became good friends. In the late sixties our paths crossed again in Rio de Janeiro, Brazil, where I was sent by PAHO as project leader of the malaria program. Rod was a recognized expert in the field of transportation, and the program had a

sizeable fleet that included airplanes, river boats and multiple ground vehicles. Rio was still the capital of the country and consequently the seat of all main national government and international offices, including PAHO’s.

Our team was fully integrated with our national counterparts; the field work was hard, but during the weekends we would enjoy the golf course at Itanhangá. Our threesome included Rod, Raúl Vera and me. Golf was complemented with games of volleyball on the beautiful beaches south of Rio and included family members of all ages. These games were coordinated by Yecid Aliaga, brother-in-law of our colleague Hans Bruch. At Carnival time a new leader appeared to organize the celebration--Rafael Miranda Franco--who managed to mix the Caribbean beat with the samba rhythm. Of course, on Mondays it was back to work.

Rodrigo graduated from the Sparta School of Aeronautics in Oklahoma as an aeronautical engineer. He went there speaking not a word of English and passed all his exams with flying colors, no pun intended. He then specialized in transportation, and his work took him all over the world, including India, for the Willys Company. From there he went to UNICEF as a Transportation Officer.

In April 1959 he married Jackie and five months later was transferred to PAHO. He was posted to Bogotá, Colombia, as Transportation Officer with the Malaria Program, from where he traveled extensively throughout South America. In 1964 he was stationed in Rio de Janeiro and continued in the same capacity until 1971, when he was transferred to INCAP (Instituto de Nutrición de Centro America y Panamá) in Guatemala as Administrative Officer. While in Guatemala he experienced the 1976 earthquake, fortunately with no personal bad effects.

In 1976 he was transferred to BIREME (Biblioteca Regional de Medicina) as its first Chief of Administration. He applied his vast experience in PAHO to BIREME, which at that time was receiving important national and international grants to consolidate the Latin America and Caribbean Health Information Network. Beyond his work, he was the friend who always shared his optimism, honesty and

patience to face the daily challenges. He retired from PAHO in 1983 and returned with his wife and children to his home country of Chile. There he was able to relax and enjoy travel before suffering a lingering illness. He died at the age of 83 on 28 June 2006.

Our condolences go out to his widow, Jackie, and to David, Guillermo, Elizabeth, and grandchildren.

**With information contributed by Jackie Donoso, and Carlos Gamboa*

Augusto Vallenas Pantigozo (1928-2006)

by Primo Arambulo



Augusto Vallenas Pantigozo was born on 27 October 1927 in Cuzco, Peru. He received the degree of *Bachiller* in Veterinary Medicine and his Veterinarian's diploma from the Universidad Nacional Mayor de San Marco in Lima, Peru and a Master of Science degree (MSc) and doctorate (PhD) from Cornell University in Ithaca, New York, USA, and pursued special studies at the University of Pennsylvania, Philadelphia (1963), and the University of Glasgow, Scotland (1964).

The main national posts that he held included those of Professor at the Universidad Nacional Mayor de San Marcos (1952-1975); Physiology Coordinator, Master's programs in Biochemistry and Physiology of the Academic Upgrading Program at the Universidad Nacional Mayor de San Marcos; and University Director of the Academic Services, Central Registry, and Research Offices of the Universidad Nacional Mayor de San Marcos in Lima, Peru.

Augusto joined the Pan American Health Organization in 1978 as Manager of the Regional Program for Assistants in Animal Health in Georgetown, Guyana, and was the driving force behind the training of human resources for animal health and veterinary public health in the English-speaking Caribbean. He was later posted to Barbados (1983-1988) as PAHO/WHO Adviser in veterinary public health for the English- and Dutch-speaking Caribbean, and afterwards served in Guatemala as the PAHO/WHO Intercountry Consultant in veterinary public health for Central America and Panama.

He was a visiting professor at the following universities: San Carlos, in Guatemala; Gabriel René Moreno, in Santa Cruz, Bolivia; and Maracaibo, in Venezuela.

After retiring from PAHO, Augusto continued his professional work and was one of the founders of the School of Veterinary Medicine at the Universidad Cayetano Heredia in Lima, Peru. In recent years, he divided his time between Lima and Bethesda MD, USA. He was an active member of the Association of Former PAHO/WHO Staff Members.

Augusto died in Lima on 3 November 2006, leaving his wife, Luisa Ochoa de Vallenas, and three children: Jorge, Fernando and Edmundo; daughters-in-law, and grandchildren. Condolences can be sent to Mrs. Luisa Vallenas at Avenida Primavera 431, San Borja, Lima 41, Peru.



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The AFSM Board and committee coordinators would like to know about the needs of its members. We might not be able to solve all your problems, but we have resources that could be utilized. We might either help in some way or refer you to the right source.

We would also like to have your input to the *Newsletter*, either in the form of articles for publication, or in comments on the content. What kinds of articles do you like? Are there some that should be eliminated? Are we missing something that should be included?

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Note: The term of each member of the Board expires in December of the year in parenthesis.

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