

# NEWSLETTER

OF THE ASSOCIATION OF FORMER STAFF MEMBERS



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*We keep passing the ball...  
Who will take it and run?*

—Solum Donas

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## Mark Your Calendars! AFSM Reunion 2006

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*by Jaime Ayalde*

As we announced in our letter of 29 June 2005, the AFSM Board is organizing the Second International Reunion of Former PAHO/WHO Staff Members, open to all retirees, whether or not they are members of AFSM.

The reunion will take place in Buenos Aires, Argentina, from 25 to 28 April 2006. We sent a form with our letter for you to complete and return to AFSM/Washington as soon as possible. If you haven't returned it yet, please do so at your earliest convenience. Although it is very early to give you a breakdown by country of those who plan to attend, we are delighted with the early expressions of interest we have received (up to 22 August): 49 members have already responded, the majority (41) indicating that they plan to attend, many accompanied by another person.

If you know of other retirees who are not members of AFSM but might be interested in participating, we ask that you give them a copy of the announcement, and request them to complete and return the accompanying form to any of the Board members in Washington (c/o PAHO, marked for AFSM). The names of Board members appear on the Back Page of the Newsletter.

Lastly, we invite you to dust off your archive of personal memories to write two or three pages of remembrances of your years working with PAHO. We plan to incorporate them into a publication that will be distributed to members after the reunion.



*Reporters interviewing a 104 year-old woman: "And what do you think is the best thing about being 104?" the reporter asked. Quickly she replied, "No peer pressure."*

## Staff Health Insurance Reimbursement for In-Home Or Institutional Nursing Care

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*by Carlos Daza and Jaime Ayalde*

Since its inception in September 1990, the AFSM Newsletter has regularly included articles related to health and medical issues of interest to our membership, as well as information regarding the WHO Staff Health Insurance coverage and instructions for submitting claims for the reimbursement of expenses.

This subject is monitored by the Committee on Health and Health Insurance\* of the Board of Directors of the AFSM. The committee is responsible for the dissemination of relevant information on health and health-related matters affecting the population and particularly the aging groups having specific needs for comprehensive care of chronic impairments and conditions affecting their well-being and quality of life.

In the last issue of the Newsletter (Volume XVI, No. 1, April 2005, pp. 3-5), we presented the text of "Changes to the Staff Health Insurance Rules" as approved by the Director General of WHO with effect as of 1 January 2005. The revised version has been mailed by the PAHO Health Insurance Office (SHI) to both active staff and retirees. In this issue of the *Newsletter* we have selected rule 210.7, on domiciliary or institutional nursing services, to comment further on the application of the rule, taking into consideration complaints received from our colleagues regarding what they perceive as excessive delays in receiving reimbursements and also comments provided by the Administration regarding noncompliance with existing procedures.

To this end, we are addressing the topic of *geriatric nursing care at home and in institutions* for the long-term care of persons affected with chronic conditions needing spe-

cialized attention and services, particularly in relation to the health insurance regulations and benefits on this matter. To facilitate the understanding of the rules we have added some clarifications or comments in italics.

According to the Staff Health Insurance Rules, under Professional Services, numeral 210.7, the benefits cover "domiciliary or institutional nursing services (provided by persons recognized or authorized to provide such services by the competent authorities) prescribed by the responsible physician or medical specialist when the patient is suffering from:

- (a) an acute condition;
- (b) a chronic disease, including a geriatric condition, approved in advance by the Headquarters Surveillance Committee (*Geneva, Switzerland*) in consultation with the relevant regional surveillance committee (*Washington, DC*), at 80% (*of the cost of the services to a maximum ceiling of US\$ 80 per day, for which amount US\$ 64 would be reimbursed*), regardless of the duration of the condition and upon presentation of a medical report to the relevant staff physician every six months." (*When the cost of room and board, and nursing services are not itemized by the institution providing care, a 50% – 50% cost is assigned to each service.*)

It is worth noting that until 31 December 2004 this benefit had been progressively reduced each six (6) month period from 80% to 60% and then 40%. Now the benefit is continuous at 80% "regardless of the duration of the condition" but definitely subject to the submission of a medical report every six months, which should include the diagnosis of the condition and the specific patient's nursing care needs.

To better understand the timing in processing the supporting documentation and the respective health claim, we have outlined below some of the issues and steps involved in this process:

The Regional Surveillance Committee (Washington, DC) takes into account informa-

tion related to the patient's Daily Life Activities (DLA) such as his/her capacity to walk across a room, get dressed, take a bath without aid, eat by oneself, lie down and get out of bed, and go to the bathroom. However, its main concern is focused on daily nursing care activities such as blood pressure monitoring, care of or change of catheters, dispensing medicaments, performing simple laboratory tests, monitoring vital functions, providing physical or respiratory therapy, etc.

According to our experience, supporting certificates are often hand-written and barely understandable, thus requiring a certain degree of interpretation of the original language (English, French, Spanish, or Portuguese) and then additional time for a final version in English. Although it is optional, submission of documents already translated from the original language into English can undoubtedly expedite the course of action.

The documentation and claim request received from the countries at the Staff Health Insurance Office (SHI/Washington) is sent to the Regional Surveillance Committee for review, which in turn returns it to SHI for submission to the Headquarters Surveillance Committee in Geneva.

The Regional Staff Health Insurance Committee (Washington) meets once a month and the Headquarters Committee (Geneva) every two months. Therefore, some patience is of the essence on the beneficiary side. The reimbursement claims can be submitted to SHI/Washington on a monthly basis once the nursing services have been provided, but definitely not before. Payments are made or authorized by the office of SHI in Washington since this office is responsible for monitoring the approved period of services.

It is important to note that a retiree who is incapacitated and therefore unable to make decisions and sign documents (for instance, in the case of Alzheimer's disease) should be represented by a relative or other person

with legal power of attorney. The legal representative will submit the documentation related to the insurance claim and will have access to the SHI office through the assigned staff, who will be available to respond to any query and/or consultation.

*\*Members of the AFSM Health and Health Insurance Committee are: Mario Boyer, Carol Collado, Carlos Daza (Coordinator), and Gerald Hanson. This article was prepared by Carlos H. Daza and Jaime Ayalde (member ex officio of the Health Committee).*

## OSTEOPOROSIS

*by Mario Boyer\**

Osteoporosis is a disease that causes bones to become weak, fragile and prone to fracture. The word osteoporosis means "porous bones." As a result of the loss of tissue, the bones, once dense and strong, may lose their ability to withstand stress or even their resistance to normal activity such as bending or twisting the torso. The bones most often at risk for fracture are the hips, spine, and wrists.

The patient may exhibit no signs or symptoms for years as the disease slowly and painlessly develops. The first obvious sign of its onset may be a sudden and unexpected fracture. To keep bones strong, the body is consistently breaking down old bone and replacing it with new bone tissue. As people reach the age of 50, the rate of bone degeneration begins to exceed the rate of bone replacement. This net loss of bone matter leads to a general weakening of the person's bones. Bone thinning is normal with advancing age. However, extreme cases, such as the loss of up to four inches in height or breaking a bone after a jerked movement, are not normal and indicate a need for closer attention.

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*\*AFSM Board member and former PAHO/WHO staff member, most recently with the Division of Health Systems and Services.*

About 10 million people in the United States are affected by osteoporosis. Of these, 80 per cent are women. An additional 18 per cent have low bone density, putting them at risk for the development of osteoporosis. Each year osteoporosis is responsible for approximately 1.5 million fractures. It is estimated that 300,000 of them are hip fractures; 700,000, spinal fractures; 250,000, wrist fractures; and 300,000 fractures in other parts of the body. Millions of other Americans suffer from low bone mass, clinically referred to as osteopenia. This should serve as an early warning: although bone loss has started, the patient can still act to prevent osteoporosis later in life.

Osteoporosis develops for different reasons. In order to choose the correct course of treatment, the physician has to be aware of the origins of the disease so that the appropriate treatment can be provided. The disease has two primary modes of development. The first has an unknown cause; it simply progresses as the only symptom of an unknown etiology, and it can only be treated on a symptom-by-symptom basis. The second mode is as a symptom of an identifiable primary disease or the side effect of a particular medication. Treating the primary cause makes it possible to prevent osteoporosis and future fractures in this second case.

Risk factors for osteoporosis and fracturing may be modified by individual circumstances or decisions that the patient can take to modify this risk. These factors may include:

- **Gender considerations:** Women are at greater risk of the disease than men;
- **Age:** Aging increases the risk of osteoporosis;
- **Menopause;**
- **Ethnicity:** Women of Caucasian and Asian origin are at greater risk;
- **Body size:** Small-framed women are more at risk;
- **Family history;**

- **Child-bearing:** Pregnancy builds strong bones in women by raising their levels and increasing their weight;
- **Medications:** Long-term use of corticosteroids, anticonvulsants, thyroid medicine, diuretics, gonadotropin-releasing hormone, and blood thinners may accelerate bone loss and increase the risk of the disease;
- **Medical conditions:** Endocrine disorders such as hypogonadism, hyperparathyroidism, Cushing syndrome, and type 1 diabetes; gastrointestinal diseases, rheumatoid arthritis, lupus, and amenorrhea;
- **Surgical procedures,** such as organ transplants and gastric surgery;
- **Nutritional deficiencies,** especially calcium and vitamin D;
- **Inactive life style or over-exercising;**
- **Prolonged bed rest;**
- **Alcoholism, smoking, or excessive caffeine or carbonated beverage intake.**

As some of the first signs of the disease are without symptoms, it is necessary to run specific tests in order to achieve an early diagnosis of the disease. A bone density test called DEXA-scan (dual-energy x-ray absorptiometry) helps assess a patient's risk level for bone fractures. This test adequately assesses the risks of low bone mass or even osteoporosis.

Preventive measures for osteoporosis include a good and adequate nutritional diet with sufficient calcium and vitamin D, proteins, phosphorous, and sodium; an active lifestyle and regular exercise; monitoring prescribed medications that are considered high-risk for side effects; and preventing falls and fractures.

Additionally, medication can be prescribed to people at risk of osteoporosis. Most of these medications are called antiresorptives. The term refers to the action of greatly reducing or curbing the breakdown of bone tissue. Newer drugs called anabolic agents mimic the operation of the parathyroid hormone to build new bones and increase bone mass. The

term "anabolic" describes a process that helps increase the formation of new tissue.

To find additional information on osteoporosis, you may contact the following organizations via the Internet or e-mail:

- National Osteoporosis Foundation, [www.nof.org](http://www.nof.org)
- US National Institutes of Health Osteoporosis and Related Bone Diseases, National Resource Center, [www.osteoporosis.org](http://www.osteoporosis.org)
- US National Library of Medicine. Medline Plus, [www.nlm.nih.gov](http://www.nlm.nih.gov)
- Mayo Clinic Health Information, [www.MayoClinic.com](http://www.MayoClinic.com)
- The US National Institute on Aging has information on health and aging, including a booklet and video about exercise for older people and several helpful "age pages." For more information, contact the Information Center by e-mail at [niaic@jbs1.com](mailto:niaic@jbs1.com).

## References

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## PAHO NEWS IN BRIEF

- The 136<sup>th</sup> Meeting of the PAHO Executive Committee was held in June in Buenos Aires, Argentina, home country of the PAHO Director, Dr. Mirta Roses. Documents and conclusions (E, S, F, and P) can be accessed on the PAHO Intranet ([intranet.paho.org](http://intranet.paho.org) + password) and Internet ([www.paho.org](http://www.paho.org)).

- The 46<sup>th</sup> Meeting of the PAHO Directing Council will be held in Washington, DC, in September. Documents are currently being posted, as they become available, on the PAHO Intranet and Internet.

- Ambassador Eric Boswell, Director of Administration, has submitted his resignation, effective 1 September 2005. Ms. Dianne Arnold has been designated to serve in an acting capacity.

- The PAHO Executive Committee, at its June meeting, requested the Director (Resolution CE136.R8) "To disestablish the Pan American Center for Food Protection and Zoonoses (INPPAZ), created by Resolution CD35.R21 of 1991."

- The PAHO Executive Committee, in spite of an extra meeting held in July, failed to agree on and make a recommendation to the Directing Council (Washington DC, September 2005) on the Organization's budget for 2006-2007.

- A P-4 post has been created for an ombudsman at Headquarters, and a temporary appointment has been made.

- Dr. Stephen Corber, Area Manager for Disease Prevention and Control, has submitted his resignation.

- The Abraham Horwitz Award for Leadership in Inter-American Health, 2005, will be awarded to Dr. Ricardo Uauy, of Chile

- The Manuel Velasco-Suarez Award in Bioethics, 2005, will be awarded to Dr. Patricia Sorokin, of Argentina.

- The PAHO Award for Administration, 2005, will be awarded to Dr. Francisco Rojas Ochoa, of Cuba.

- The SHI office at PAHO has confirmed that copies of the new Staff Health Insurance Rules, in English or Spanish as pertinent, were mailed to participants, both active and retired, in the field on 18 July, and in the USA on 19 August 2005.

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## Spring Luncheon

*by Jan Barahona*

Thirty-seven members of the Washington area AFSM got together in early June for lunch at Luzmaría Esparza's house in Silver Spring. It was a beautiful day, and the light-hearted throng enjoyed her lovely garden as they lunched on paella and salad, followed by cheesecake and fruit, accompanied by a generous selection of libations. It was good to see some of the more recently retired members in attendance, as well as several members who had not participated in AFSM social events before.

Everyone enjoyed the food, the weather, the camaraderie, and the opportunity to exchange family news and photos and to reminisce over old times!

For photos of the event, please see later pages of this Newsletter.

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## An Enjoyable Evening At the Singhs'

*by Irene Pino*

June started off with a bang for retirees this year. We thoroughly enjoyed our luncheon get together at Luzmaría Esparza's home on June 1st. There was much camaraderie, and Birendar Singh and his wife, Awtar, then issued an invitation to follow it up with a dinner party at their home on Sunday evening, 12 June. They invited the whole group and enticed us with the promise of home-cooked Indian food! Needless to say, it was an invitation that no one could resist!

Our expectations of the event were highly rewarded. The Singhs turned out to be great hosts. As each group arrived, the conversation started with admiration of the Singhs' home, which is truly beautiful, and our hosts made us feel right at home with

their warm hospitality. Following delicious appetizers and drinks, we were served a delightful Indian dinner. The weather was mild and we ate outside and enjoyed the beautiful fountain that is the centerpiece of their impeccably manicured property. Following dinner a few of the more daring souls danced under the stars!

All 27 of us enjoyed meeting the Singh family, particularly the grandmother. Although we could not communicate directly, we talked to her through a daughter-in-law. The grandson was also a joy to watch as he played before us and said hello.

Our sincere thanks to the Singhs for such a wonderful evening! It will remain in our memory for a long, long time.

## **LIFE AFTER PAHO: An Interview with Solum Donas**

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*by Luzmaría Esparza*

**LME:** Solum, I had the opportunity to get to know you in our Organization during your visits to Washington, my missions to the countries, and through your involvement with the Staff Association. For the benefit of our colleagues and ex-colleagues, I would like to ask you some questions about your life in the international ambit. First I would like to comment that I have always thought that the lives of United Nations staff members are fascinating, in that they at once belong everywhere and nowhere. I know there is a big sacrifice in this service, but the benefit is incalculable, in that we become "Citizens of the World." Let me now ask you some questions.

**LME:** Where were you born?

**SD:** I was born 66 years ago in Montevideo, Uruguay.

**LME:** What is your profession?

**SD:** I am a Pediatric Health Doctor in my sci-

entific life and an artist since adolescence!

**LME:** When did you start work with PAHO?

**SD:** In 1976, in Haiti.

**LME:** In which countries have you worked for the benefit of public health?

**SD:** To a greater or lesser degree, in all the countries of Latin America, as well as some of the countries of the English-speaking Caribbean. I have also interacted with professionals from Africa, Asia, and Europe at WHO meetings.

**LME:** When did you decide to retire?

**SD:** A few months before my mandatory retirement age, when I was working in the country of my last assignment, Venezuela.

**LME:** We know you retired to Costa Rica. Why did you decide to retire there?

**SD:** I decided to retire in San Jose because in the eight years I spent working in Costa Rica, I came to like it very much. San Jose is a very comfortable city, with a stimulating cultural life, and it is surrounded by mountains and beaches, which makes it a very pleasant environment. I have made good friends here, and there are good opportunities for me to exhibit my art. Also, Costa Rica is a country with a low level of violence.

**LME:** You have always been recognized for your creative abilities, your art. I personally have framed pieces of your artwork hanging in my house. Tell me a little about this, how you got started. Does any else in your family have this interest and ability?

**SD:** I began with photography, with no family influence. I continued in this medium from adolescence until around 50 years of age, when unexpectedly I began to draw, and from there I moved on to collage, to woodworking, and to what today occupies most of my time, wood sculpting. I also work with iron, and I have now resurrected my photographic library, reworking some of my photos using digital procedures. I have

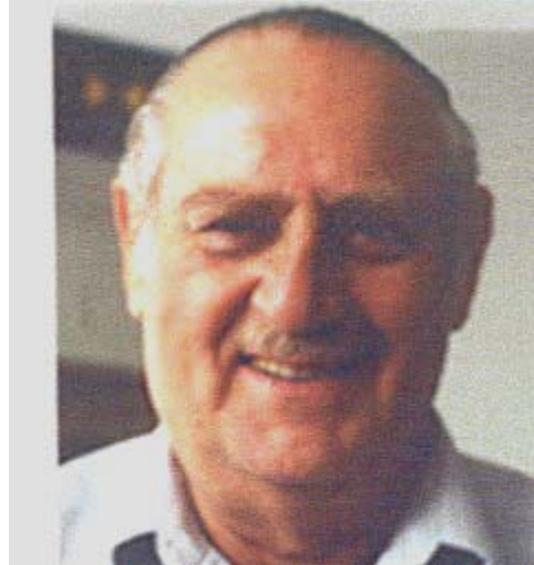
had the opportunity to exhibit these in several countries. I have published four books of poetry, stories and essays. I am lucky in that my art is an outlet for my creative expression, and I have the privilege to be able to do what I want without worrying about whether my creations sell – an advantage most artists don't have.

**LME:** I think the achievements of your professional life while making a living are admirable, but if you could not have combined that life with an outlet for your creativity as you have with your art, I think you would have not felt fulfilled. You have mentioned that you are also a poet, a writer, and a sculptor. Tell us a little more about those interests..

**SD:** I've already told you a little, but I would like to add that it is not only artistic achievements that are satisfying; one also gets great satisfaction from one's achievements in the scientific area (from what I was able to leave with the countries, and from the books and documents that I have published). I have exhibited my artwork in various countries, and as I said earlier, although it is not my specific goal to sell my works, some have been purchased by people who are interested in my work and they now hang in various countries. But my greatest pleasure is to make gifts of my drawings and books, and occasionally my sculptures, which are then enjoyed by the people who have them, like yourself.

**LME:** How many children do you have? What are they doing, and are any of them following in your artistic footsteps?

**SD:** I have four children. My oldest daughter, Judit, lives in Israel and is a preschool teacher who is presently doing social work with Argentinean immigrants. Ernesto, my second child, lives in New York, where he is doing his doctorate in ethnomusicology. He is a bassoon player, composer, and poet. My third child, Malena, is completing her psychology degree and working in the community with adolescent mothers in Montevideo. Finally, Ariel, my youngest, is working on a degree in mechanical engineering at the University of Costa Rica.



**Solum Donas**

**LME:** I think we would all like to know how where we could access your books of poetry, your drawings, paintings and sculpture?

**SD:** I have been thinking for some time to develop a web page with some of my works, but if someone is interested they can contact me at my e-mail address (solumcr@gmail.com) and I will provide them with the information.

**LME:** Would you be interested in showing your work in an exhibition by international organizations in a country of Latin America?

**SD:** Of course!

**LME:** I want to thank you for being willing to talk to me, and I hope that your artistic achievements will be an inspiration for the newly retired among us, who are just now entering into "life after PAHO!"

**SD:** Thank you for remembering me and for giving me this opportunity. I hope it will be useful not only for those who are about to retire, but also for the younger generation, to see that science and art can go hand in hand, because they are both based on creativity and the pleasure of achievement.

## Travels through the USA

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*by Jean Surgi*

My sister, Sara Thacker of Richmond VA, and I drove across the USA and a part of Canada on a 10,000-mile trip lasting seven weeks this spring, departing from Charlottesville, Virginia, on 26 April and returning there on 14 June. Traveling into 22 states and two provinces, we visited with family and friends; attended the Tulip Time festival in Pella, Indiana, in early May and a family reunion in Canyon Lake, Texas in early June; toured the new Lincoln Museum in Springfield, Illinois, the Mount Rushmore and Crazy Horse monuments in South Dakota, Howard Hughes' *Spruce Goose* in McMinnville, Oregon, and the Hearst Castle in California. We saw mountains, rivers, lakes, waterfalls, deserts, and redwoods, as well as deer, elk, long-horned sheep, and even a pair of grizzly bear cubs. We drove down the Pacific Coast on Route 1 from upper Oregon to Lompoc, California.

In Calgary we had breakfast with **Margaret Cammaert** in her lovely condominium, and in Las Vegas we had lunch with **Toni Pfeifer** in her beautiful home. These were two highlights of my trip – renewing my acquaintance with two old friends from PAHO. We also spent a night at a bed-and-breakfast in Gualala, California where **Sumedha Khanna** now resides, but she

and her husband **Steve Serdehely** were traveling at that time, so we did not see them. We did enjoy our stay in Gualala, in a room overlooking the Pacific Ocean.

I also flew to Tampa, Florida, in April to



**Margaret Cammaert**

attend a reunion of my late husband Bill's WWII fighter squadron; I also visited with my great-niece, a teacher in Tampa, and with Bill's sister, who lives in Bradenton, Florida. In late June, I drove to Charleston,



**Toni Pfeifer**

South Carolina, with my granddaughter, whose paternal grandparents host "Beach Week" each year to get their children, grandchildren, and in-laws together. I am donating some of Bill's military memorabilia and collections to the Yorktown CV-10 Museum at Patriots Point, just outside of Charleston, so I took this opportunity to deliver a large number of aviation and naval history magazines to its library. In mid-July, Sara and I flew to New Orleans to attend a reunion of Bill's family; we rented a car and drove to Panama City Beach, Florida, to visit their niece and her family, then drove back to New Orleans and flew home.

## Greetings from California

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*by Sumedha Mona Khanna*

Hi!

Thanks for continuing your good work at AFSM, keeping us informed about new developments in PAHO and in the lives of our friends and colleagues in PAHO. I feel sad when I see the name of one of my colleagues among those who have passed on and happy to learn about the new ventures of some of my other colleagues. Keeping ourselves busy and especially involved in some way in our professions and serving our global community remains a challenge after we retire from our active professional life. We do not give much thought to this when we are working.

As I have mentioned in some of my previous notes, for the past decade I have been dedicating my time to learn more about health and healing, and especially integral approaches to protecting, maintaining, and preserving our health. My Center, Healing Well, has focused on communicating with women in my community on enhancing their health through integrating body/mind/spirit practices in their lives.

More recently, I have been collaborating with the Institute of Noetic Sciences (in Petaluma, Northern California) on exploring the concept of Integral Medicine. Apollo 14 astronaut Edgar Mitchell, following his journey to the moon, founded the Institute in 1973. He was so moved by the vision of the Earth from space that he wanted to explore our relationship to the cosmos and our connectedness to the inner self, to each other, and to the Earth. (“Noetic” comes from the Greek word, *nous*, which means intuitive mind or ways of knowing.) Noetic sciences further the explorations of conventional science by rigorous inquiry into aspects of reality – such as mind, consciousness, and spirit – that go beyond physical phenomena.

Over the past 25 years, the Institute has been carrying out research and inquiry into the inner mechanisms of healing. Encouraged by the recent developments and recognition of the mind-body medicine, the Institute continues to conduct and sponsor research that expands our understanding of the effects of consciousness on our bodies, minds, and spirits.

A new book – *Consciousness and Healing*—edited by the Institute and published by Elsevier/Churchill Livingstone explores integral approaches to mind-body medicine. I have contributed a chapter to this book – “Sociopolitical Challenges to Integral Medicine” – and I am continuing to associate with the Institute in advancing the concept and approaches to Integral Medicine, especially with health care providers.

I would strongly recommend this book to those interested in learning more about Integral Medicine and exploring the concept in their own professional environments. I do believe that this is the future direction of medicine in the 21<sup>st</sup> century, and WHO leadership should be an active participant in the process of defining and advancing it. I will be happy to provide more information (khannas@mcn.org) about the Institute’s work, especially in health and healing, if anybody is interested.

## ***In Memoriam***

Dolores Schneider	10 October 2001
Elina Dominguez	31 May 2005
Marvelle Toney	28 June 2005
Rodolfo Salinas	16 July 2005

## **REMEMBERING COLLEAGUES**

### **Ramón Álvarez Gutiérrez**

*by José María Salazar Bucheli*

We were deeply saddened to hear the news of the passing of Dr. Ramón Álvarez Gutiérrez on 3 November 2004, in Washington, DC.

Ramón was born in Mexico on 5 August 1925. He joined the Pan American Health Organization during the tenure of Dr. Abraham Horowitz, serving as Country Representative in Colombia from February 1971 through February 1974. In March 1974 he was transferred to Venezuela to serve as Chief of Area I, where he remained until February 1983. He then retired and moved back to his native Mexico, where he reestablished ties with the Secretariat of Health.

In June 1983, Dr. Carlyle Guerra de Macedo, then Director of the PASB, appointed Ramón

as the Deputy Director of the Organization, and charged him with the responsibility of coordinating the activities of the Country Offices. He remained in this position until 15 February 1998, when he retired from PASB after a distinguished career.

Ramón's involvement with the Organization did not stop with retirement. On the contrary, his extensive public health knowledge of the Region continued to serve the Organization, especially his expertise in the area of political problems and problems of development. On several occasions he was called on by the Director to serve as Interim Representative in countries that had difficulty with the implementation of cooperation programs, including Belize, Brazil, Jamaica, and Paraguay.

The list of the positions Ramón held is testament to his long career of valuable service to the Organization and to the countries of the Region; however, his service was only one dimension of his personality. For that reason, I would like to offer some recollections of my personal association with Ramón.

In 1971, I was appointed Minister of Health of Colombia by then President Misael Pastrana Borrero, and held that position until August 1974. Within a few days of assuming my post, I met PAHO Representative, Dr. Ramón Álvarez Gutiérrez, who from that moment until the end of my service at the Ministry, stood by me and helped me at every bend of the road, channeling extremely valuable technical cooperation with the Organization. This cooperation would not have been possible were it not for the decisive support of Director Emeritus, Dr. Abraham Horwitz, and Ramón's knowledge of and access to sources of existing cooperation in an organization such as PAHO/WHO. Unfortunately, space does not allow me to relate the many experiences I shared with Ramón in my tenure as Minister of Health when he was the PAHO Country Office Representative in Colombia, working together for the well-being of the Colombian people. Looking back on that time and the activities we shared, I recall Ramón's hon-

esty, clarity of vision, frankness, and dedication to his work.

Another of Ramón's virtues was a firm dedication to his principles, his loyalty to the Organization, and his devotion to the duties of the positions he held. This loyalty was especially evident to his friends, including Dr. Abraham Horwitz, former Director of the Pan American Health Organization and one of the most brilliant leaders in public health on the regional and world stage. As frequently occurs in the lives of great personalities, there are moments, especially during the sunset of life, when solitude sets in, often caused by a lack of appreciation of the people they served and guided. Dr. Horowitz was no exception. However, those moments in the life of this great individual were made easier thanks to Ramón's great generosity and his empathy with the man who was his boss and his friend.

At his funeral, on behalf of all of his colleagues at the Organization, we had the opportunity to express our heartfelt condolences to his distinguished wife, Carmen, and daughters. To you, Ramón, we say thanks for a job well done; we wish you eternal peace.

## **Marvelle Toney**

*by Nancy Berinstein and Jane Carey*

Marvelle Toney passed away on 28 June 2005 in California. She had spent her early years in the Pacific Northwest area of the United States and, even in her youth, had an interest in different cultures and languages. She did university and postgraduate studies in languages and anthropology and spent time pursuing these interests in Guatemala.

When Marvelle moved to Washington, she entered PAHO as a placement clerk in the Fellowship Branch. Her intellect and ability to speak several languages made her a val-

ued employee. She married a writer, and she and her husband moved to Paris, where he wrote novels and she worked in the Fellowship Branch at UNESCO. After several years in France and extensive travel throughout Europe, they returned to Washington. Newly divorced, Marvelle was offered a position as a Training Officer in the Fellowship Branch, where she had worked many years before. In time, she became the Senior Training Officer.



***Marvelle Toney***

When the Administration decided to decentralize the Fellowship Unit, Marvelle spent four months in Barbados, writing the Fellowship Decentralization Manual. It became the official administrative reference for the PAHO Administration in Washington and for all offices in the field. She held seminars and workshops throughout the Region to ensure that decentralization would become a successful reality.

Marvelle was an accomplished cook, a connoisseur of wines, a world traveler, and an equestrian. She adopted a horse named Allegro and would drive for hours out to the country every afternoon after work to ride him. When she retired from PAHO, she and Allegro drove cross country to their new home in California. She purchased a small

ranch outside of Healdsburg, a small but sophisticated town in the wine country of Sonoma County, CA. There, she was able to pursue her hobbies of flower and vegetable gardening while having Allegro always close by. After five years in Healdsburg, Marvelle relocated to San Francisco, where she purchased an Edwardian condominium on Telegraph Hill. She took on a backyard that was overgrown and disorderly and turned it into a beautiful blossoming garden that served as a peaceful haven for her and for her neighbors. Allegro was moved to the Presidio Riding Stable in Marin Headlands, where Marvelle made many friends from all areas of society. She volunteered several days each week to tend the horses at the stable. In addition, and adding to the fullness of her life, Marvelle took up watercolor painting and served as a docent at the Conservatory of Flowers in Golden Gate Park. She traveled extensively, visiting Vietnam, China, and Mongolia, all within the last five years. In addition to all these activities, Marvelle cared for her mother, who passed away in February at the age of 98.

Sadly, Marvelle did not have her mother's longevity and she passed away peacefully from cancer at the University of California San Francisco Medical Center. A memorial to celebrate her life was held in the garden of her home in San Francisco on 3 July and, in keeping with one of the pleasures she enjoyed in life, many toasts were made and champagne was sampled by all.

Marvelle will be remembered by her friends as one who believed in herself and in us. She helped many to better themselves and to approach and solve problems with realism and optimism. Through her own example she inspired many to discover something new everyday. For all of us who knew her well, she will be missed and remembered for many years to come.

## ***AFSM Spring Luncheon***



***Hortensia Saginor and Luzmaría Esparza***



***Gloria Khokhar, Richard Marks, and Asenneth Marinaccio***



***Mario Boyer and  
Carlos Dávila***



***Renewing old acquaintances***

***Egla Blouin***



***Patricia Peterson  
and Jenny Eybers***



***Norma Gandolfo, Amanda Ellauri, and Hortensia Saginor***



***Luzmaría Esparza, Birendar Singh, Raquel Aldo, Awtar Singh, and Amanda Ellauri***



***Germán Mora and Heidi Buttari***



***Graciela Stukey, Julia Rodenburg, and Ana Mariía Metz-Gambaro***



***Dinorah López-Molina and Marina Mena***



***José María Guerricagoitia and Norma Gandolfo***



*Irene Pino and Irma Jacks*



*Lupe Daça and Gloria Liebrand*

***Enjoying an Evening at the Singhs'***



***Awtar and Birendar Singh***



***Luzmaría Esparza and Birendar Singh***



***Awtar Singh, Jan Barahona, and Birendar Singh***



*Flora Early, Martha Bailey, and Jenny Eybers*



*Hortensia Saginor, Carlos Daza, Mercedes Ayalde, and Luzmaría Esparza*



***Awtar and Birendar Singh, Jan Barahona, and Jaime Ayalde***



***Tony and Asenneth Marinaccio, Martha Bailey, Nancy (Berinstein) Rosenthal, Flora Early, Herb Rosenthal, Jenny Eybers, Dick Early, Key Eybers, Irving and Hortensia Saginor***



*Germán Mora, Elsa Ochoa, and friends*



*Conversation under the umbrellas*



*Unwinding in the beautiful gardens*



*Jan Barahona, Jenny Eybers, and Nancy (Berinstein) and Herb Rosenthal*



***Carol Collado, Nancy Berinstein, Luzmaría Esparza, Marta Marín, and Elsa Ochoa***



***Martha Bailey, Hortensia Saginor, Birendar Singh, and Flora Early***



*Martha Bailey and Carol Collado*



*Carlos Daza and Nancy (Berinstein) and Herb Rosenthal*

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**THE BACK PAGE**

AFSM 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 parentheses.*

**Membership and Social and Cultural Activities:**  
Coordinator - Hortensia Saginor

**Field Activities:**  
Coordinator - Germán Mora

**Health and Health Insurance Committee:**  
Coordinator - Carlos Daza  
Members - Mario Boyer, Carol Collado, Gerald Hanson

**Editorial Committee:**  
Coordinator - Jan Barahona  
Members - Jaime Ayalde, Mario Boyer, Muriel Vasconcellos

**AFSM Member Facilitator:**  
Carol Collado

**Staff Association and Credit Union Liaison:**  
Luzmaría Esparza

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