



# Newsletter

Association of Former PAHO/WHO Staff Members

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*Panama Reunion!!!*

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## Message from the President



Our goodbyes to 2012 and a fond farewell to the PAHO Director, Dr. Mirta Roses. We welcome our new Director, Dr. Carissa Etienne, and are looking forward to a very productive era of collaboration.

We are making plans for the Association to be even more responsive to our members as we continue to explore the new ways of communication opening to us all. SharePoint, Facebook, and Elluminate may all play a role in our future. We expect to build upon the experiences and events that took place in 2012.

A successful international reunion in Panama this past October, a very informative and well-attended General Meeting in December at PAHO Headquarters, personal meetings with the President of AFSM/Geneva and with the President of AFICS/NY, and an excellent workshop for international organizations at the International Monetary Fund in Washington all contribute to our continuing to actively represent our constituents.

Our Chapter in Colombia is thriving, and other countries have expressed interest in creating either a formal AFSM chapter or at least an informal group that would allow for PAHO former staff to come together and enjoy social events in their home country. Some have volunteered to be official focal points to work

with AFSM/Washington. They will distribute to former staff in their country information that comes from AFSM/ Washington, and, at the same time, they will forward information from former PAHO staff to AFSM/Washington. We are hoping and expecting that these focal points will strengthen ties between colleagues in Washington and in member countries. If you would like to accept such a position in your home country, we ask that you kindly contact our Vice-President, Carol Collado, who will provide you with guidelines and assistance.

Elluminate is a tool which may provide us with the ability to open our Washington meetings to former staff living outside the area who would not be able to attend in person. Our first experiment took place at our recent General Meeting but met with limited success because the participants in both Colombia and Peru experienced difficulty with their audio systems. They were able to see and hear us on their home computers and were able to type messages to us, but their voices could not be heard. We must continue to practice until the system has proved itself to be reliable. There will be endless possibilities for communication and participation once we have such a system in place.

And so we begin a new year. It is our hope that 2013 will bring our friends, colleagues, and dear ones a year filled with good health and much happiness. Our best wishes to all!

Nancy Berinstein  
*President*





# Fifth AFSM International Reunion

# P A N A M A

The Fifth International Reunion of former PAHO/WHO staff members was held in Panama from 15-18 October. The heat, rain, and humidity did not dampen the excitement and enthusiasm that was generated by friends and colleagues greeting each other upon arrival at the Continental Hotel. The opening reception on Monday evening was well attended, and we were particularly pleased to welcome the new PAHO Representative in Panama, Dr. Federico Hernández Pimentel.

The meeting itself was chaired successfully by César Vieira and documented by our rapporteur, Marilyn Rice, with the assistance of Virgilio Escutia. It began with a video prepared by Dr. Mirta Roses specifically for our reunion. She spoke briefly about her work at PAHO and then moved on to applaud all former staff who have been staying actively involved at some level in furthering the work and goals of PAHO. She concluded by thanking all of us for past support and assured us that she is now looking forward to retirement and becoming an active member of AFSM!

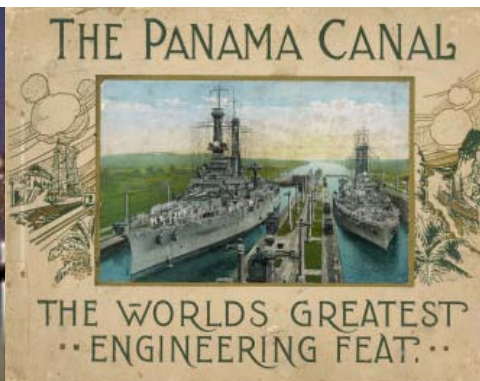
We became better acquainted with our host country by the excellent presentations made by guest speakers about various aspects of Panamanian life. Dr. Claude Betts, Director of New Era in Health, spoke about “Public Health in Panama, Past, Present, and Future.” Dr. Ricardo Stevens brought us through the “Cultural,



*Samuel Arévalo, Patricia Ilijic, Germán Perdomo, Hernán Rosenberg, Rigoberto and Alvis Centeno*

Economic and Political Developments of Panama,” starting with its independence from Spain in 1821. Dr. Marco A. Gandasegui, Jr., Professor at the University of Panama spoke on “The 20th Century: One Hundred Years to Recover National Sovereignty,” and Dr. Alvaro Uribe, Jr. also a Professor at the University of Panama, spoke on “The Transformation of the City of Panama: From Town to Metropolis.” Indeed, Dr. Uribe’s PowerPoint presentation graphically demonstrated why the traffic in Panama City today is a major challenge to visitors, developers, and inhabitants!

As the meeting continued, we were pleased to welcome Dr. Jean-Paul Menu, who presently serves as President of



AFSM/Geneva. This was the first time in our mutual history that a colleague from Geneva has attended one of our international reunions, and we viewed it as an exciting new beginning of collaboration between the two associations. Discussions are already underway to seek ways to work together in the time ahead. Attention was eventually moved to PAHO today, and we became acquainted with various programs and responsible staff members through a DVD that was prepared for us by the staff at PAHO Headquarters on our behalf.

It was gratifying that Chris Saenz, Team Leader, Staff Benefits, Financial Resources Management, and Patricia Ilijic, Operations Manager of the PAHO Federal Credit Union, were able to travel to Panama to join us. They brought us recent and complete information regarding the United Nations Joint Staff Pension Fund, PAHO Health Insurance, and the PAHO/WHO Credit Union. Chris acknowledged complaints regarding communication with the Pension Fund office in New York. We were informed that the PAHO Finance Office in Washington will gladly receive letters regarding pension matters via the diplomatic or PAHO pouch and will forward the documents to New York. One should address the envelope to: Attention Pension Unit.

Martha Paláez, who only recently retired from PAHO, presented an informative and thought-provoking presentation entitled “The Art and Science of Aging.” It was one of the reunion highlights, and we plan to print it in its entirety on our SharePoint site.

And, finally, Rocio Picado, active staff member from Costa Rica and representative of the PAHO Staff

Association, also addressed the assembled. This was the first time that a Staff Association representative had spoken at an AFSM reunion and, again, we viewed it as another positive step towards collaboration on issues of mutual interest. As was agreed, the staff member of today is the AFSM member of tomorrow!

Discussions regarding the global election of SHI representatives to the Global Standing Committee and the Global Oversight Committee brought expressions of dismay from the audience when it was discovered the only five individuals out of the 40 in the room had ever received any information about this subject from Geneva. Several participants stood to explain that mail service is unreliable and, in some instances, non-existent where they live. The audience was then assured that Geneva would be advised of the situation and asked if they would consider electronic voting. They were also assured that AFSM Washington would do everything possible to further their ability to receive a ballot and cast a vote. We would be interested in learning from our readers whether they ever did receive a ballot from Geneva and whether they were able to send in their votes by mail before the deadline.

One night, after a long day of presentations and discussions, the Credit Union was kind enough to invite all participants to a wonderful evening of dinner and dancing at an elegant private club. Few participants were able to resist the music, and the dance floor was filled with smiling couples. An extra bonus was the drive to the club that permitted us to view the amazing architecture of many new buildings that dot the landscape of Panama City.



*Alfredo Ballevena*



*César Vieira*



*Professor Alvaro Uribe, Jr., University of Panama*



*Dr. Claude Betts, Director of New Era in Health*





*Marilyn Rice, Panama Reunion Rapporteur*

Another evening, we were entertained at a restaurant that served us Panamanian food and drink along with a floorshow of music and dance. Again, it was a fun opportunity for conversation with old - and new - friends.

Toward the conclusion of the reunion, people voiced their desire to continue the conviviality and sharing of histories by founding chapters in their own countries. The Colombia Chapter volunteered to offer their time and experience if asked for assistance. It was also agreed that information found on the new AFSM SharePoint site could be enormously helpful in providing guidance and a basis for their work. Time was then spent reviewing how the new SharePoint system works, and a promise was made to once again include this important information in our forthcoming Newsletter.

**Suggestions regarding future reunions were as follows:**

1. Seek a site where there is a significant number of retirees to help with the organization of the event
2. Take into account factors such as security, expenses, and weather
3. Consider hiring professional event planners to arrange the reunion
4. Consider a concert in place of a folkloric experience for entertainment
5. Consider having two reunions - one in the north and one in the south
6. Consider changing the nature and purpose of the reunion to put more emphasis on social exchange and the organization of more participatory activities
7. Dominican Republic was suggested as a possible site, spending time at a resort in Punta Cana and then on to Santa Domingo
8. Rio de Janeiro and Costa Rica were also mentioned
9. Try something different and organize a short cruise, perhaps starting in Panama
10. Think about allowing people to participate virtually in future reunions by using modern technology



*Participants at Panama reunion attending presentation by guest lecturers*



*(front) Gabriel Schmunis, Elva López-Nieto; (center) Alfredo Ballevena, Helena Restrepo, Elmer Escobar, Herb Rosenthal, Marta Ligia Fajardo; (standing) Hernán Rosenberg, Mercedes Ayalde, Rigoberto Centeno*

**Other suggestions:**

1. Create a link between our SharePoint site and the Web pages of the Pension Fund and the Credit Union
2. Establish a focal point in each country to serve as a liaison with AFSM/Washington and with PAHO/WHO former staff in the country
3. Establish links with other PAHO/WHO former staff in one's country to be able to offer assistance in times of emergency or need

At the conclusion of the reunion, we shared a buffet lunch along with discussions about city sightseeing and excursions outside of Panama City. There were many embraces, along with promises to keep in touch and to stay well.

Virtual communication has its place and will be a valuable tool in the years to come, but it can never take the place of sharing real time and company with dear friends and colleagues. ■

## WHERE ARE THEY NOW?

### CÉSAR VIEIRA

#### Is There Life after PAHO? My Experience as a Retiree

Since I retired from the Organization, my life has been a quite exciting experience. The fact that I devoted about two-thirds of my professional life to work at PAHO means a lot to me and my family. I was stationed for more than six years in Brasilia and almost 21 years in Washington DC, having enjoyed in both places the supporting company of my wife and four kids. All of us learned a lot during those years, which contributed significantly to our developing feelings and attitudes as global citizens.

In addition to all the good experiences we enjoyed during those years, our kids – and our grandkids – now enjoy a dual Brazilian and American citizenship. In addition, English became their second – or first – language, while Spanish is the third language for some of them.

A few months before leaving the Organization in 2005, Heloísa and I had the privilege of participating in a quite useful seminar offered by PAHO for future retirees and their spouses. That event provided all its participants a lot of illuminating lessons about what could be our life after PAHO. I am pleased to know that this activity continues to take place every year with the support of AFSM, benefiting pre-retirees from all over the Organization, through either a face-to-face or a virtual format.

The most critical decision we had to make before retiring was about returning to Belo Horizonte, our hometown in Brazil, particularly because that would make us a couple of “expatriated” parents and grandparents, since our sons, daughter, daughters-in-law and grandchildren now live in São Paulo, Tampa, Seattle, and Arlington. You can imagine the complexity of our flight destinations for our annual visits to them.

Returning to our hometown was not an easy task for us, despite the number of family members and friends we have here. It has not been easy for us to adapt ourselves to the daily life in Brazil, because our mindset sometimes makes us



feel like Americans in the city where we were born and grew up. We have had some tough experiences while trying to re-adjust to the Brazilian way of driving a car or time-management, just to give you some examples.

A very good experience since coming back to Brazil has been my work as a technical advisor and teacher on health policies and systems, based on the experience I was so pleased to accumulate during my years at PAHO. Thanks to this work, I have had the opportunity to support different entities, either public or private, both in Brazil and abroad, which are committed to developing their respective health policies and systems. Because of such work experience, I consider myself to be a very active retiree who does not want to change this occupation for the time being.

Another very significant experience in our new lifestyle has been the continuous contact we have kept with former – and current – PAHO colleagues and their families, both in Brazil and other countries. This includes tourism, celebrations, and different sorts of dialogue, both face-to-face or through the internet.

I keep myself updated about PAHO through daily visits to its very rich Web page. And we continue to be active members of our precious PAHO Federal Credit Union, as well as beneficiaries of our Staff Health Insurance and the UN Joint Staff Pension Fund. Since their services are essential inputs to the sustainability of our lives as retirees, we must always reiterate our gratitude for the valuable support they provide us.

Finally, this year Heloísa and I have had the great pleasure of participating in the wonderful Panama meeting of our AFSM. This was the first meeting we have ever attended but I can assure you it is not going to be the last one!

For all these reasons, it seems to me that we can leave PAHO, but PAHO will never leave us!!!

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## Election Results: New SHI Committees

The first global elections for the retiree representatives in the new SHI governance structure closed on 30 November 2012, and the results have now been made known to the candidates. You will shortly be receiving an official notice from the SHI unit in Geneva.

We want to thank all of our members who made the effort to participate in these elections. We are confident that your votes made a difference. We want to let you know that we believe that your interests will continue to be well represented, as the elected persons have both history and dedication to the retiree population as shown by their past participation in SHI matters through Surveillance Committee representation and service in AFSM committees and Board positions.

Retirees who are SHI participants will be represented on the Global Oversight Committee by Ann Van Hulle, former manager of SHI/Geneva Surveillance Committee, and a member of the AFSM/Geneva Board (alternate member Clas Sandström); and on the Global Standing Committee by Marjory Dam, former AFSM/Geneva member to the working groups preparing the governance changes, and Jean Paul Menu, current president of AFSM/Geneva (alternate members Carol Collado, Vice President of AFSM PAHO/WHO, and Françoise Hery-Persin).

We are pleased that Carol Collado, the Coordinator of the Health and Pension Committee of AFSM PAHO/WHO, is within this group. In addition, we want to assure you that AFSM PAHO/WHO considers health insurance as one of their principal areas of work, and we will continue to show diligence in all ways possible to make sure that the concerns and interests of the retirees in the Americas Region are heard, and that you are kept abreast of the processes within the SHI governance deliberations. We highly encourage you to continue to make your questions, ideas, and concerns known through AFSM channels so that we may facilitate an efficient, effective and healthy staff health insurance for the future. ■

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## News from the Field: Message from the Colombia Chapter of AFSM

*By Gustavo Mora*

I believe the year we are ending has been very positive for both the Association in general and for the Colombia Chapter in particular.

One of the most promising developments was the launch of the Association's SharePoint, hosted by PAHO's platform. It provides an opportunity to stimulate information exchange, and it can be accessed through the following web address: <https://sites.paho.org/afsm>. On 5 December Helena Restrepo and I had the opportunity to participate virtually in the annual meeting via this SharePoint. Similarly, you can use the AFSM Facebook to connect with other partners. For any additional information or support, please contact Cristina Torres [torres.tina.08@gmail.com](mailto:torres.tina.08@gmail.com).

The chapter continued its consolidation process with the holding of its seventh annual meeting in the coffee hub. New contributions were made by members from different public health disciplines, and the session on missing members was very emotional. We hope to have even more participation in next year's meeting, which will take place in Plains.

On 3 December, the first meeting of ASOPENUC took place in Medellín. Six members and three spouses participated in this very pleasant event. In Bogotá there is already good communication with former United Nations staff, and it would be worth exploring expanding this activity to other cities. We know there are former staff members in Cali, Bucaramanga, Ibagué, and Popayán.

I think one of our priority activities should be to transmit information and motivate those who are recently retired. Recent messages from Sempertegui Roberto and Diego Victoria have been very stimulating. We know that the current director will retire in February and that she is eager to contribute on both a local and continental level. In Panama we learned that Rocio Picado from Costa Rica will also retire in 2013, and she has expressed her desire to join the effort.

I wish all of you and your families a Merry Christmas and the best in the coming year. ■



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## Health Information Tips

### Heart Disease Risk Factors You Can Do Something About

By Marilyn Rice

**N**on-Communicable Diseases (NCDs) kill more people in the Americas than any other cause of death and inflict great socioeconomic hardship, particularly in poorer populations. In the Americas, equal numbers of men and women, 250 million people, live with NCDs, which may require long periods of treatment and care, but the biggest rate of NCD increase will be in women (PAHO 2011 Series: Chronic Disease Issue Brief 2: Chronic Diseases on Global Agendas).

Cervical cancer is a leading cause of death among women in Latin American Countries (LAC), with mortality rates seven times higher than in North America (GLOBOCAN 2008, <http://globocan.iarc.fr>). Poorly controlled diabetes increases the chances of premature mortality, as well as chronic complications such as cardiovascular diseases, blindness, nephropathy, foot ulcers, and amputations. Preventing primary risk factors, namely tobacco use, poor diet, harmful use of alcohol, and physical inactivity, will help to reverse these trends.

#### So what are some of the key risk factors and what can you do to prevent them?

- ◆ High blood pressure – Have your doctor check your blood pressure. Keep your weight to a healthy level. Maintain a minimum of physical activity. Follow a healthy eating plan, including food lower in salt and sodium. Limit alcohol consumption. Take medication if and how it is prescribed.
- ◆ High blood cholesterol – Get your blood cholesterol level checked and understand what the numbers mean. Follow a low saturated fat and low cholesterol eating plan. Stay more physically active. Aim for a healthy weight. Take medication if and how prescribed.
- ◆ Smoking – Stop smoking now or cut back gradually. If you cannot quit the first time, keep trying. If you do not smoke, do not start.
- ◆ Overweight – Maintain a healthy weight. Try not to gain extra weight.

- ◆ If you are overweight, try to lose weight slowly. Lose one to two pounds a week.
- ◆ Diabetes – Find out if you have diabetes or pre-diabetes. Get your blood sugar level checked.
- ◆ Physical inactivity – Become or stay active. Get 2 ½ hours of moderate-intensity aerobic activity each week.
- ◆ Comprehensive cervical cancer prevention and control programs are essential, including education, HPV vaccination, screening, treatment and palliative care.
- ◆ Screening for diabetes and impaired fasting glucose-impaired glucose tolerance in people with two or more risk factors for type 2 Diabetes (i.e., family history of diabetes, high blood pressure, a history of hyperglycemia or gestational diabetes, or overweight), and improved management of diabetes through education, smoking cessation, increased physical activity, and healthy eating. ■

— From US Department of Health & Human Services, NIH

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## Chronic Disease Self-Management Program

By Martha Peláez, Ph.D. ([pelaezma@earthlink.net](mailto:pelaezma@earthlink.net))



**S**tanford self-management programs are designed to give participants chronic disease self-management tools. This is achieved through workshops that are given for two and a half hours once a week for six weeks in community settings such as senior centers, churches, libraries, and hospitals. Workshops are facilitated by



two trained leaders, one or both of whom are living with chronic diseases themselves.

The Spanish-language Program is not a translation of the Chronic Disease Self-Management Program; it was developed separately. The subjects that are covered in English and Spanish are similar, but they are presented in ways that are culturally appropriate. Subjects include:

- 1) Techniques to deal with problems such as frustration, fatigue, pain and isolation
- 2) Appropriate exercises for maintaining and improving strength, flexibility, and endurance
- 3) Appropriate use of medications
- 4) Communicating effectively with family, friends, and health professionals
- 5) Healthy eating
- 6) Appropriate use of the health-care system
- 7) How to evaluate new treatments

However, it is the process through which the Program is taught, rather than just the subjects covered, that makes it effective. Classes are highly participatory, where mutual support and success are used to build the participants' confidence in their ability to manage their health and maintain active and fulfilling lives. The three major skills that are taught and practiced during the six-week workshop are action-planning, problem-solving, and decision-making. The methodology used is based on self-efficacy theory and is proven to be effective in helping people manage chronic conditions and make behavior changes to improve health.

### **Does the Program replace existing programs and treatments?**

The Program will not conflict with existing programs or treatments. It is designed to enhance regular treatment and disease-specific education such as Better Breathers, cardiac rehabilitation, or diabetes instruction. In addition, many people have more than one chronic condition. The Program is especially helpful for these people, as it gives them the skills to coordinate all the things needed to manage their health, as well as to help them keep active in their lives.

### **How was the Program evaluated?**

The English-language Program was first developed in 1991 as a collaborative research project between Stanford University and the Northern California Kaiser Permanente Medical Care Program. This study and more than 50 subsequent ones have found that people who partake in this Program generally have fewer symptoms such as depression and shortness of breath, have a better quality of life, exercise more, and usually utilize health care services less. The Spanish-language Program was developed later, with the participation of over 500 Spanish-speaking people with heart disease, lung disease, or diabetes, in a randomized, controlled test of the Program, and they were followed for one year.

Researchers looked for changes in many areas: health status (disability, social/role limitations, pain and physical discomfort, fatigue, shortness of breath, health distress, self-rated general health), health care services utilization (visits to physicians, visits to emergency departments, hospital stays, and nights in hospital), self-efficacy (confidence to perform self-management behaviors, confidence to manage disease in general, confidence to achieve outcomes), and self-management behaviors (exercise, cognitive symptom management, mental stress management/relaxation, and communication with the physician). At four months, the participants, as compared with usual-care control subjects, demonstrated improvements in health status, health behavior, and self-efficacy, as well as fewer emergency room visits. At one year, the improvements were maintained and remained significantly different from baseline condition.\*

### **How can we replicate the Program?**

The Stanford Program is licensed and requires both a license from Stanford and training from a Stanford certified T-Trainer or Master Trainer. I have gone through the Stanford certification process and would be happy to work with any group in the Association of Former Staff Members interested in receiving training for the implementation of self-management programs in their communities. The Program is available both in English and Spanish. ■

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\* Reported in Lorig KR, Ritter PL, González VM. *Hispanic Chronic Disease Self-Management: A Randomized Community-based Outcome Trial. Nursing Research, 52(6):361-9, 2003*

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## Workshop of International Retiree Associations

*By Carol Collado and Hernán Rosenberg*

The fourth annual meeting of associations of international retirees was held at the International Monetary Fund on 24 October 2012. Participants came from the 1818 Society (the World Bank alumni association), AFE-ADB (the Association of former Employees of the Asian Development Bank), AFICS (the Association of Former International Civil Servants, New York and Washington), AROAS (the Association of Retirees of the Organization of American States), IMFRA (the International Monetary Fund Retirees Association, and AFSM (the Association of Former PAHO/WHO Staff Members). The workgroup was divided into two subgroups, one dealing with health issues and insurance and the other with management and how each association was organized, including the relationship of retiree associations with the “parent” organization.

The health group discussed several significant issues. In some organizations, changes occurred in the participation of retirees in the governance of the insurance plans. This brought discussion as to how governance is handled in each organization. Participants indicated whether or not Medicare was obligatory for eligible former staff in their organization and, if so, to what extent were participants reimbursed for their obligatory payments. Attention was also paid to the increases in the parent organizations’ health insurance costs to participants, parent organizations having to deal with liabilities with international accounting procedures and related unfunded deficits, and the member countries’ and parent organizations’ opinions on the increasing costs of health insurance in relation to tight budgets.

Some discussion occurred about the changing workforce and the potential impact that a pool of fewer “career” employees might have on the future of the health systems, especially in light of retirees becoming an ever-increasing percentage of those covered, a situation that would inevitably result in an increase in benefit payments. Although some cost offset may be had with increases in retirement age, this is not seen to be significant.

Based on a member survey about priority topics, an invited panel with participants from PAHO and Express Scripts, the largest pharmacy benefits management company in the US, presented an overview on the development of generic drugs. We learned that the average time and cost to bring a product to market is 20 years and \$800,000. Of those that initiate the process, only one in 10,000 actually make it to market. When the drug manufacturing company obtains a patent for a drug, these research and development costs are built into the consumer cost. A patent lasts for 20 years. A generic drug is one which is out of patent protection but must be bioequivalent to the brand name, meaning that it must have the same active ingredients and the same effect. There are a small number of drugs which should not be substituted if the original treatment is a brand name, such as anti-seizure medications, thyroid replacement drugs, and a few others.

The regulatory agencies in the countries insure the safety of the drugs produced in their respective countries. At the present time about 77% of the drugs are now in generic form. A pharmacy benefits management company also monitors quality and safety through procedures and random checks on their pharmacies. Generics provide a means of keeping costs down while assuring safety, and, where regulation enforcement is strong, they can be used with confidence. The USFDA website was cited as a good source for consultation on the ingredients in the drugs.

The health group finished with comments on matters of concern and formed working groups that will continue the discussions during the year on the topics of best practices, Medicare, governance and politics, and long-term care. A virtual meeting will be held in the next several months to maintain contact and inform on the working groups.

The second group started with a review of survey results from the different organizations. There are some formal differences; for example, some organizations, like ours, have boards, while others have an executive committee - much smaller- with a council overseeing policies. With few exceptions, membership is voluntary, although a few indicated that retirement automatically meant registration.

A second topic of discussion was the incorporation of the associations into the decision-making process of the parent organization. In general there is very little of this,



except for matters directly related to former staff members. The exception was the 1818 Society of the World Bank, but it seems to be heavily dependent on the personal contacts of the Association's directors. Most parent organizations provide some support to the retiree associations, sometimes financial, but mainly in kind, such as office space, email addresses, and even secretarial services. In addition, most parent organizations help with mailings.

Relations with other entities such as ombudsmen and staff associations tend to be cordial albeit focused on specific topics. PAHO pointed out the close collaboration with the staff association observed during the changes in the health insurance discussions held in WHO.

A common problem noted in the discussion was the difficulty in mobilizing volunteers. There was consensus in that when asked for help with specific tasks, it is not that difficult to get support. However, for general operations of the association lack of support seems to be common problem. This results in the same people always showing up, which seems to further alienate members. The more generic question posed was about the value added of membership in the associations, a topic that seems to affect all of them.

A model that was discussed is the use of the association as a platform from which "clubs" of similar interests can function. Examples were horticultural, photography, and trekking. These seem to need a "champion" who organizes the activities, as well as a fluid communication mechanism to inform the membership of the group. The extension of these for inter-association activities was also discussed, and it was noted that some activities, such as excursions, have taken place with members of several organizations. But these incidences are few, and there is a need to actively pursue them.

It was also noted that communications are moving towards electronic media. Newer members tend to feel quite comfortable with these media. There may always be some preference for physical newsletters and the like, but time delays and extra costs are moving all of us in the opposite direction. ■

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## PAHO's Project "Reflections"

*By Jaime Ayalde*

The outgoing Director of PAHO, Dr. Mirta Roses Periago, has established a new project entitled "Reflections." The purpose of this initiative is to capture the institutional memory of the Organization over the past 110 years as well as to provide some of the prominent retirees the opportunity to reflect on key issues and share thoughts and recommendations. The project is based on personal interviews recorded in video tape, usually in the private residence of the interviewee.

The interviewer recognizes the dedication the subjects have given of their professional lives in public health and how they have provided services for a number of years to the Pan American Health Organization. Interviewees reminisce about their work experiences and the lessons they have learned. In particular, ideas are expressed about the role the Organization has played during his/her years at PAHO and about what its role might be in the next 5, 10 or 20 years. Additionally, ideas are shared about how retirees can continue to contribute to their own national health systems and advice is given to guide the new and upcoming generations of public health experts.

As of this writing, 30 retirees have participated in the project, representing not only the Washington DC area but also a number of countries of the Region. These interviews are in the public domain, not only through the official records of the Organization but also via the social media. The "Reflections" of our colleagues already interviewed may be accessed by entering the PAHO site at: <http://new.paho.org/tblogs/reflexiones/index.php?lang=es>, by going to Facebook directly, or via Google and searching the name of the person in whom you are interested. Some examples of those currently included are Dr. George Alleyne, Dr. Sumedha Khanna, and Dr. Ciro de Quadros.

In order to preserve this valuable knowledge for the future, all retirees are invited to reflect on these issues and to share their thoughts with PAHO's Administration and with their colleagues. Those interested in participating may do so by contacting the PAHO officer in charge of this project at PAHO/Washington HQs, Mr. Manuel Calvit, telephone 1-202-974-3032 or e-mail [calvitma@paho.org](mailto:calvitma@paho.org), or via the office of the PAHO/WHO Country Representative. ■

## Welcome to New AFSM Members

### From the Washington, DC Area

Miriam Magali Almazán Aguirre  
Iris Maritza Bradshaw  
Julio Durand  
Ana Maria Febres-Perdomo  
Rebeca De los Rios

### From Other Parts of the US

Isaias Daniel Gutiérrez – Pembroke Pines, FL

### From Other Countries

Claude D. Bett – Panama  
Rigoberto Centeno Vega – Panama  
Iván Estribí Fonseca – Panama  
Jorge J. Jenkins – Panama  
Lilia Verónica Lambert Busch – Panama  
Dorothy L. Wilson – Panama

## Twenty-Third General Meeting of AFSM

*By Enrique Fefer*

The 23rd General Meeting of AFSM was held at PAHO HQ on an unusually warm Washington December day, a welcome start. The PAHO lobby, where attendees gathered for a pre-meeting coffee, resounded with the traditional greetings of “How nice to see you!” “You look great!” “You haven’t changed!” or variations thereof. Over 50 members and spouses, as well as representatives from international organizations, attended this event. For the first time, members from Colombia and Peru were able to participate via Elluminate, a significant advance in PAHO’s effort to enhance communications with our members in the field, though, as can be expected, some bugs have yet to be worked out.

**Opening of the meeting:** In her welcome address, President Nancy Berinsein referred to the transition in the administration underway at PAHO, acknowledging the excellent support received from outgoing Director Dr. Roses, and welcoming Director-Elect Dr. Carissa

Etienne, who addressed the gathering via video. Dr. Etienne graciously recognized the past contributions of the retirees to the growth and impact of the Organization, and considers them to represent a resource with deep knowledge of the countries and the Organization. She would like to know more about the work of the Association and expects to attend a future meeting.

**Business meeting:** Elsa Gómez, designated by the Board as chairperson, opened the session with a moment of silence in memory of colleagues who passed away during the year. Following adoption of the agenda and approval of the minutes of the 22nd General Meeting, Sylvia Schultz presented the Treasurer’s Report, which had recently been approved by the independent auditor.

**Election of Board Members:** There were no nominations from the floor. The meeting unanimously re-elected three of the current members who agreed to serve another three-year term: Mario Boyer, Germán Perdomo, and Cristina Torres.

**Report of the President:** Nancy Berinsein remarked on the changes in PAHO: new younger faces, new titles, the end of collaborating centers, a new Administration. A constant over the last 10 years, however, has been the support and encouragement provided by Dr. Roses, with our expectation that they will continue under Dr. Etienne.



*Elsa Gómez, Chairperson, and Nancy Berinsein, President, at AFSM 23rd General Meeting*

**Ms. Berinsein highlighted some recent issues and events:**

- The proposed changes in governance of the WHO Health Insurance Program have led to closer communication with AFSM/Geneva and with the Regions, as a result of the active positions taken by





*(left to right) Jerry Hanson, Bryna Brennan, Antonio Hernández;  
(back row) Laura Argueta and Tatiana Schepeler*



*Iris Bradshaw, Alfonso Chang and  
José María Salazar*



*John Silvi and Edgar Barrientos*



*Alicia Pome, Alfredo García (IDB) and Sylvia  
Schultz*



*Leo Lamarche and Jean Surgi*

the Association. The president of AFSM/Geneva attended a luncheon in Washington and the International Reunion in Panama, events that provided him with a better understanding of our priorities as well as of our capabilities. The strong relationship with AFSM/Geneva will be a valuable advocacy channel for our Region since its president participates in the international meetings of FAFICS which, in turn, meets with the UN Pension Fund.

- The Association will continue to explore and document the advantages of Medicare reimbursement for US retirees, a position already taken by the World Bank, the UN, and its agencies. Since Medicare becomes the primary insurer, the change reportedly results in 10%-15% yearly savings in health insurance expenses. WHO remains an exception. Even though it complains about the high AMRO expenses, it has resisted requiring Medicare coverage and offering reimbursement for the premiums.
- For the fourth year, AFSM participated in the Workshop for International Retiree Associations which focused

on health issues and on relationships with parent organizations. AFSM will host the 2013 workshop.

- The International Reunion in Panama was a productive event, despite the hot and rainy weather and the ever present traffic jams. Excellent presentations and good discussions led to the Reunion participants requesting more frequent activities. In response, Nancy Berinstein announced the formation of a Social Activities Committee headed by Hernán Rosenberg and Cristina Torres and open to volunteers and to ideas. She thanked Germán Perdomo and Rigoberto and Alvis Centeno for the organization of the Panama reunion and the Credit Union for hosting a delightful dinner and show for the 50 participants. The meeting ended with heated discussions about the venue for the next Reunion, with the Dominican Republic making a strong case for being the host; Brazil and Costa Rica were also proposed. There are other possibilities, such as a river cruise or a tour. The Board is open to suggestions.

**PAHO Today: 110 Years of Progress in Pan American Health:**

The presentation by Mr. Guillermo Birmingham, Director of Administration, summarized the achievements of the Organization as it celebrated its 110th anniversary. Guided by its principles of equity, quality, and universality, it continues to focus on the provision of technical cooperation, building national capacity and promoting partnerships. Mr. Birmingham noted that PAHO will undertake a study in 2013 on the potential financial benefits of reimbursing Medicare premiums, an announcement welcomed by our members.



*Juan Manuel Sotelo*

**Update on UN Pension and Health insurance:** Chris Saenz presented a detailed review of the status of the Pension Fund which covers 120,774 active participants from the UN and 23 specialized agencies. Its assets of \$43.1 billion are invested in 41 countries and 23 currencies, with North America representing less than 50%. Due to the present low return on investments and longer

life expectancy, the Fund is recommending that the UN increase retirement age to 65 years for new staff starting in 2014.



*Blanca Camarena*

The WHO Staff Health Insurance Program is undergoing changes in governance, leading to greater centralization and less participation, though it is allowing, for the time being, continuation of the Regional Surveillance Committees. Mr. Saenz pointed out that the SHI Oversight Committee would have to approve PAHO undertaking a study of Medicare reimbursement. Due to a significant actuarial deficit (\$1.1 billion), the rate of contributions was increased this year by 10% and will continue to increase by 4% for the next 30 years. Mr. Saenz noted that the PAHO contract with Aetna does not allow for outsourcing. A specific telephone number for Aetna is provided for PAHO participants on the back of their insurance cards; dialing other numbers, as some members have done, might reach India or Manila, sites where Aetna



*Roberto Ribero, Richard Marks, Enrique Fefer*



*Flora Early and Elsa Ochoa*



*Elias Anzola and Jaime Estupiñán*



*Henning Jensen, James and Nancy Rust*



has outsourced services and whose staff is not familiar with our excellent coverage.

**Credit Union:** Mr. Miguel Boluda, Jr., CEO, reported that the CU continues to grow, albeit slower than in the past, and is well capitalized. A staff of 14 manages the \$158 million in deposits of the 4,700 members. The CU's broad definition of membership makes it easy for relatives to join and benefit from the products and services provided, particularly the very low rates on loans and credit cards. Retirees can present for election to the volunteer Board of Directors. He pointed out two AFSM members present at the meeting who are active, respectively, in the Credit Union's Board of Directors and Surveillance Committee. Door prizes offered by the Credit Union were drawn to the delight of the winners. Nancy Berinstein again thanked the Credit Union for its continuing support of AFSM.

**Adjournment:** The president declared the meeting adjourned at 1 pm and invited all present to enjoy a buffet lunch in the Delegate's Lounge. The informal atmosphere in the crowded room literally brought members closer together. Goodbyes and happy holiday wishes were heard as friends and colleagues separated and walked out with memories to match the unusually warm December day. ■

## *In Memoriam*

### DEATHS IN 2009, 2011 AND 2012 NOT PREVIOUSLY REPORTED

Rudolph Swann	1 April 2009
Leopoldina Araujo	1 November 2009
Donald Johnson	10 December 2011
Milton Mora Lima	5 August 2012
José María Ticas	21 August 2012
Anundo Duarte	10 September 2012
César Galindo	11 September 2012
Emilia Moliner de Fernández	8 October 2012
Juan José Urrutia	25 October 2012
César Mendizábal	26 October 2012
Walter Umstead	7 November 2012
Roberto Rivero Hart	19 November 2012
José Mathias Rocha	3 December 2012
Dr. Charles Williams (PAHO Deputy Director 1967-79)	5 January 2013
Ella Siguenza	22 January 2013

## Reminder about Pension Letters

*By Jaime Ayalde*

The payment of pension benefits is linked to the receipt by the Fund's New York office of a statement of survival known as the Certificate of Entitlement (CE). Beneficiaries should have received their CEs in late October 2011, and they should have been sent back, duly completed, in November or December.

You must allow up to two months after mailing your CE for the online system to be updated, so February and March were the key months for you to have made sure that the certificate arrived at its destination. The reason is that in April the wheels of fortune are turned one more notch, and if the certificate has not arrived the stop-payment order is given, a shocking fact that may come to your attention when you receive your bank deposit statement early in May.

**Here are the steps you need to follow to access the Fund's website and view your account:**

- Go to [www.unjspf.org](http://www.unjspf.org).
- Click Welcome (for English).
- Click Beneficiary.
- On the left side you can see the CE Tracking System.
- On the rest of the screen there are interesting articles, such as the Annual Letter of the CEO and a new quarterly report on investments, presented in English, French and Spanish. These are for general information, open to any reader.
- Click on CE Tracking System in the left-hand column and log into the Secure Documents page.
- If you are a new user, click Beneficiaries to register and follow the instructions provided.
- If you are an established user, enter your Retirement Number and Password (or PIN). ■

# The Back Page

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. Also, we encourage your contributions to the Newsletter, either in the form of articles for publication or in comments about its contents.

To reach us, write to:

**AFSM c/o PAHO**  
525 23rd St NW  
Washington DC 20037-2895

## Contact Information

Please refer to your 2013 AFSM Directory and be certain that all your personal contact information is correct.

We also encourage you to provide us with your email address so that important and pertinent information can be electronically mailed to you. Any changes or additions to your address should be sent to Hortensia Saginor (AFSM) by routine mail to PAHO Headquarters in Washington DC or, preferably, by email to [isaginor@aol.com](mailto:isaginor@aol.com) or [hortensiasagi@gmail.com](mailto:hortensiasagi@gmail.com)



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**Note:** The term of each member of the BOD expires in December of the year in parentheses.

## Communications Committee

Coordinator – Cristina Torres  
Members – Mario Boyer,  
Germán Perdomo, Hernán Rosenberg

## Editorial Committee

Coordinator – Nancy Berinstein  
Editor-In-Chief – Marilyn Rice  
Members – Jaime Ayalde, Enrique Fefer,  
Jean Surgi, Cristina Torres

## Liaison with International Organizations

Coordinator – Nancy Berinstein  
Members – Carol Collado, Enrique Fefer,  
Hernán Rosenberg

## Membership Committee

Coordinator – Hortensia R. Saginor  
Members – Norma Montanaro,  
Cristina Torres

## Sociocultural Activities

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Carol Collado, Hernán Rosenberg,  
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## Pension and Staff Health Insurance

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Members – Jaime Ayalde,  
Nancy Berinstein, Mario Boyer,  
Jerry Hanson, Jean Surgi

**Auditor** – Fredy Burgos