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GARRY ASLANYAN

Rédacteur en chef adjoint/Deputy Editor-in-chief

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The Global Guardian of Public Health

The month of May is usually a very busy month in the life of the global health community. This year, May is particularly special as the World Health Assembly will elect the new Director General who will lead the World Health Organization for the next five years. My colleagues at *UN Special* covered the candidates in our previous issues, including interviews with shortlisted candidates and their views on the future of the organization and what it may mean to staff. By the time you pick up this magazine, that decision will have already been made and plans will be under way for the new DG to kick start the implementation of their vision. A strong leader at the helm of the WHO pushing for further affirmation of the role as the global guardian of public health is what we as staff will welcome. In our June issue, we will bring you the final interview with the current DG Dr. Chan, in which we asked her to reflect on her ten years of tenure. In this issue, in an attempt to show WHO in action and the diverse and extensive number of activities that WHO is engaged in globally, we offer you a set of special articles prepared by staff that express their passions, their goals, their hopes and frustrations.

My goal of showcasing the extensive and far-reaching impact of the work of staff at WHO has, however, been overshadowed by a decision that may have an impact on Geneva-based staff pay. It is gratifying to see how the heads of Geneva-based agencies all stood in solidarity with the staff and requested a review of the proposed reduction in post adjustment compensation. Several articles and opinion pieces look at this issue.

Finally, we have lots of arts, culture and other interesting pieces to help you get through the month of May! ■

Le gardien global de la santé publique

Le mois de mai est généralement un mois très occupé dans la vie de la communauté mondiale de la santé. Cette année, mai est particulièrement spécial car l'Assemblée mondiale de la santé élira le nouveau Directeur général qui dirigera l'Organisation mondiale de la santé pour les cinq prochaines années. Mes collègues de *UN Special* ont couvert cette période préélectorale dans nos numéros précédents, recueillant leurs points de vue sur l'avenir de l'organisation et ce que cela signifie pour le personnel. Au moment où vous prendrez ce magazine en main, le choix aura déjà été fait et des plans seront en cours pour que le ou la DG lance la mise en œuvre de sa politique. Un chef fort à la tête de l'OMS qui affirmera son rôle de gardien mondial de la santé publique est ce que nous espérons tous en tant que personnel. Dans notre numéro de juin, nous publierons la dernière entrevue avec l'actuelle Directrice générale, le Dr Margaret Chan, dans laquelle nous lui avons demandé de revenir sur ses dix années de mandat. Dans ce numéro, nous vous proposons une série d'articles spéciaux préparés par l'ensemble du personnel exprimant ses passions, ses objectifs, ses espoirs et ses frustrations. Ils soulignent l'action de l'OMS et ses activités, nombreuses et diversifiées, à l'échelle mondiale.

Mon objectif de montrer l'impact étendu et approfondi du travail du personnel à l'OMS a cependant été éclipsé par une décision qui pourrait avoir un impact sur la rémunération du personnel à Genève. Il est gratifiant de voir comment les responsables des organismes basés à Genève se sont tous montrés solidaires avec le personnel et ont demandé un examen de la réduction proposée de leur indemnité de poste. Plusieurs articles et réflexions traitent de ce problème.

Enfin, nous vous offrons tout un éventail d'articles sur l'art, la culture et autres sujets intéressants pour vous aider à traverser le mois de mai! ■

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Staff pack the Palais to denounce 7.5 percent pay cut

It was standing room only last month when over a thousand staff packed Room 19 in the Palais des Nations to denounce a decision of the International Civil Service Commission (ICSC) to cut pay by 7.5 percent.

IAN RICHARDS, UNOG

Affecting P and D staff, and coming on the heels of the compensation review, the cut is the first of a series of austerity measures being pushed by member states.

These include:

- offshoring of administrative functions through the global service delivery model;
- outsourcing of ICT services;
- the preparation of the next budget;
- cutting of G posts through the supposed success of Umoja; and
- the review of conditions of service for locally recruited categories of staff.

As one staff member mentioned at the meeting, this is just the thin end of the wedge. Staff need to put their foot down, or watch things get worse for all of them.

As with everything at the UN, the 7.5 percent pay cut follows an ostensibly technical narrative based on a methodology. In this case, it is mainly attributable to a pay freeze in New York in a time of inflation. Given Geneva hasn't had inflation, it is being translated here as a direct pay cut. Something without parallel in any other system.

Further, the ICSC, recently removed mitigation measures that would have softened the blow, most probably knowing what was coming.

The fury of staff was clear at the meeting. To chants of "no pay cuts, no pay cuts," staff called for tough action, including industrial. Memories were evoked of 1977 when staff at the Palais stopped work for eight days on a similar matter.

It is important to state upfront that staff do not join the UN for the paycheck. They join for the privilege of working under the UN flag. Many put their lives at risk and work extremely hard over their careers, with Geneva just one of their postings. Staff are rightly disappointed and angry at the decision.

They have been living within their means, but adjusting to a loss in salary of almost one month per year will present huge difficulties, including for young families struggling to make ends meet given high childcare fees, rents and other costs in Switzerland.

It is hard to square this cut with the \$1 billion that will be probably be spent on a new building in the Palais that is designed to replace perfectly decent office space, and will certainly enrich

a large number of construction firms. And staff realize this.

At the meeting, a resolution was passed unanimously, calling on organizations not to implement the cut. A cover letter was also sent to executive heads. Both are presented in the central page of this issue of the magazine. ■

Alors, crie-t-on au loup?

Les fonctionnaires de Genève se réunissent en masse au Palais des Nations pour dire non à l'annonce d'une baisse potentiellement excessive de leur indemnité de poste et donc de leur rémunération nette.



NATHALIE CROUÉ, UNOG

Pour la plupart des près de mille participants à la réunion organisée par les deux syndicats de fonctionnaires, la CCISUA et la FICSA, le jeudi 6 avril 2017 au Palais des Nations, la recommandation de la Commission de la Fonction Publique Internationale (CFPI) de réduire de 7,5% les salaires de fonctionnaires de la catégorie professionnelle est perçue comme inacceptable, abusive et sans fondement statistique. Une baisse considérable de l'indemnité de poste, et donc du pouvoir d'achat du personnel de Genève, nuirait à la relation de confiance entre le personnel et son Organisation.

La question que l'on est en droit de se poser est de savoir si les organisations internationales basées à Genève vont appliquer la recommandation de la CFPI?

Les dirigeants de nos organisations n'ont-ils pas la possibilité de refuser de l'appliquer à leur personnel?

Est-ce dans l'intérêt des États membres et du Secrétaire Général de démotiver leurs troupes?

Restons optimistes. A ce jour, l'Administration de l'ONUG ne nous a envoyé qu'un 'broadcast' général le 31 mars 2017. Ce message des Ressources Humaines n'indique aucun pourcentage et ne précise pas la durée de la phase transitoire. Il ne donne aucune idée précise de l'ampleur de la potentielle réduction. Il ne mentionne pas explicitement non plus le fait que l'inflation à New York justifierait un nivellement par le bas à Genève. Il semble que les chiffres nous seront officiellement communiqués en mai 2017 au plus tard.

Il y aura toujours de l'inflation à New York. Si la logique est celle de l'inflation à New York et pas des motivations politiques ou simplement économiques inavouées...

Devra-t-on niveler par le bas à Genève chaque fois que le pouvoir d'achat de nos collègues de New York baissera? Cela fera de Genève un lieu d'affectation moins attrayant et cela ne sera pas bon pour la Genève Internationale.

Examinons de plus près le coût

de la vie à Genève et l'inflation à Genève. Selon l'Office cantonal de la statistique: «En mars, l'indice genevois des prix à la consommation s'accroît de 0,2%. Par rapport à mars 2016, il progresse de 0,7%».

Donc, si le coût de la vie a augmenté à New York, les prix n'ont pas baissé à Genève depuis 2015.

Si notre pouvoir d'achat en tant que visiteurs à New York ou ailleurs s'est renforcé grâce au franc suisse fort, notre vie quotidienne est à Genève et Genève a elle aussi subi l'inflation ou au moins un coût de la vie stable ces dernières années.

Les autorités suisses qualifient elles-mêmes leur pays 'd'îlot de cherté'. Le coût de la vie y est d'ailleurs l'un des plus élevés d'Europe. Cette réalité va de pair avec des niveaux de salaires élevés en Suisse. L'enquête suisse sur la structure des salaires de novembre 2012 de l'Office fédéral de la Statistique conclue que pour les résidents étrangers (permis B, L et C) les plus qualifiés, le salaire moyen est d'un peu plus de 12 750 francs suisses. Les travailleurs étrangers qualifiés sont en moyenne très légèrement mieux payés que les Suisses (11 268 CHF). Quant au salaire suisse brut moyen des travailleurs frontaliers qui occupent les postes les plus qualifiés en Suisse (permis G), tous secteurs confondus, il est d'environ 10 866 francs suisses. (Souvent sur treize mois, ce à

quoi s'ajoute une prime à l'intéressement, dans certains secteurs.)

Selon une étude de Mercer, cabinet spécialisé dans les problématiques des expatriés, Zurich, Genève et Berne sont les seules villes européennes faisant partie du top 10 dans le classement mondial des villes les plus chères au monde. New York ne ferait pas partie de ces 10 villes. Certes, il faut être prudent sur les critères utilisés, puisque celui qui procède au sondage en contrôle le résultat. Ce classement d'août 2013 compare le coût de la vie de plus de 210 villes dans le monde en tenant compte du prix de plus de 200 produits et services. Il tient compte de plusieurs types de biens et services. C'est en général le logement qui est le poste de dépense le plus élevé. En moyenne, le prix du poste «logement» en Suisse est 60% plus élevé que dans la moyenne des 27 pays de l'Union Européenne.

En tant qu'expatrié, le coût de la vie à Genève est un facteur essentiel dont on doit tenir compte dans la décision de travailler à Genève.

La 16^e édition de l'étude Prix et salaires publiée le 17 septembre 2015 par l'UBS place Genève au 2^e rang des villes les plus chères au monde avant New York. Elle examine les prix du panier standardisé de 122 biens et services, les salaires et le pouvoir d'achat des salariés dans 71 villes de par le monde environ tous les trois ans depuis 1971. Elle recueille plus de 68 000 données reflétant les événements économiques qui ont eu une incidence sur le monde depuis sa précédente édition (parue en 2012). Celle

de 2012 classait Genève au 4^e rang mondial après Zurich.

Alors pourquoi proposer un nivellement par le bas pour nous les fonctionnaires internationaux de Genève?

Si New York doit rattraper Genève, pourquoi ne pas augmenter New York au lieu de baisser le pouvoir d'achat des membres du personnel basés à Genève?

Si la véritable raison est une grave crise, ou un franc suisse trop fort, il faut le dire clairement.

La force du franc ne peut en aucun cas servir de prétexte pour une baisse de l'indice, car une condition de la présence du siège à Genève est le paiement intégral de la rémunération en devise locale. Les fonctionnaires ne devraient pas faire les frais d'une comptabilité

tenue en dollars US. Quant à l'enquête sur le coût de la vie menée en octobre 2016 à l'ONUG, j'avoue que je n'ai pas tout compris malgré les explications données: pour les résidents en France tous les postes de dépense (y compris le logement) sont inscrits dans la catégorie dépenses non locales ('out-of-area'). A mes yeux, cela déséquilibre le panier type et donc les résultats pour le calcul du coût de la vie moyen réel à Genève.

J'ai essayé de comprendre la méthode de calcul utilisée après les 'enquêtes intervalles' et notamment le fait que New York, la ville de base qui sert pourtant de référence de calcul à notre indice d'ajustement, dispose elle aussi d'un ajustement ou indemnité de poste. La brochure de 2005 de la CFPI décrivant le système des ajustements, elle-même hermétique, prouve que la méthode

de calcul est difficile d'accès voire opaque.

D'autant plus que, selon la même méthode, fin janvier 2017, une augmentation probable de l'indemnité de poste nous était annoncée suite à une augmentation des salaires des fonctionnaires de Washington sur lesquels ceux des fonctionnaires des Nations Unies à New York sont indexés. Certains évoquent d'ailleurs des changements de la méthode d'enquête et de la méthode de calcul des ajustements qui auraient été apportés juste avant la dernière étude. Avec la méthode précédente, il y aurait eu une baisse, certes, mais moindre.

La décision de la CFPI, si elle était appliquée telle quelle, aurait des conséquences pour nous tous. Notamment pour ceux qui viennent de signer un contrat avec l'ONU ou accepté un transfert et viennent de

déplacer toute leur famille à Genève. Et encore davantage pour les collègues ayant tout un foyer à leur charge, dont les époux ont renoncé à leur carrière pour suivre leur conjoint ou conjointe à Genève et dont les familles vont subir, si cette mesure est appliquée, une double peine.

Restons optimistes mais mobilisés et vigilants et tout notre possible pour que la décision annoncée jusqu'ici sans transparence ne soit pas appliquée par les Organisations de Genève.

Dans le cas contraire, à la lumière de la très forte mobilisation du jeudi 6 avril, il semble qu'une bonne partie du personnel soit prête à défendre ses droits et si besoin à faire grève... ■



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UNwavering in the drive to end polio

The global effort to eradicate polio has become one of the largest global public health initiatives in history. UN Special talks to Director-General of UNOG Michael Møller on the UN's role in this effort, and what the Geneva international community can do to help secure a polio-free world once and for all.

© UN Photo/Jean-Marc Ferré



Why has the role of the UN been so central in polio eradication efforts?

Polio eradication embodies the essence of the UN – nations cooperating towards the achievement of a global goal. When the UN was established

in 1945, there were more than 350,000 children paralysed for life by polio every single year.

When the Global Polio Eradication Initiative (GPEI) was established in 1988 spearheaded by two UN bodies – WHO and UNICEF – the international community rallied to act as 'one UN' and end this crippling disease forever. By bringing together the different mandates and skills of UN organizations, we have made incredible progress; in 2016, just 37 cases of polio were reported globally, and the world stands on the brink of being polio-free.

The objectives behind polio eradication align with the core objectives of the United Nations: promoting and maintaining peace and human rights, fostering development, and providing humanitarian aid to those in need. Every child has the right to grow up free from polio. The GPEI is helping to strengthen health systems in the most challenging areas, to ensure that every

child has access to vaccines and other essential health services. I am proud to see the UN family so close to achieving a goal that captures so much of what we stand for, together.

Why is the role of the international community so important?

We live in a world where challenges are global, and no country can pretend to solve them alone. This is the case with the efforts to end polio, which by nature, need cooperation across borders and across sectors. While the virus continues to exist somewhere in the world, unvaccinated children everywhere are at risk. From global coordination, advocacy and funding at a global level to a health worker knocking on a door and delivering two drops of polio vaccine into the mouth of a child, the work of thousands of people around the world make eradication possible.

The UN's partnerships with civil society organizations are essential; Rotary International provided the driving push to start the GPEI and remain a core partner. Rotary and the UN will be celebrating this partnership on the 11 November, when Rotary/UN Day will be held in Geneva for the first time. With unique access to communities and broader civil society, the relationship between WHO, UNICEF and Rotary to fight polio encapsulates the approach that the UN and International Geneva aim to foster.

What will the eradication of polio mean for the international community?

Back in 1980, the eradication of smallpox – the only human disease ever to have been removed from the face of the earth – provided a bolt of electricity to the UN and beyond. It was a concrete example of the positive change that could be achieved through global cooperation.

The eradication of polio has never been closer. This monumental milestone will show our children that they can make a real difference in the world; it will provide a proof point for why the UN matters today, as much as ever; and will bring new life blood to existing public health programmes seeking to reach a goal.

In more concrete terms, the eradication of polio will mean economic savings of over US\$ 50 billion globally, more than 16 million people walking who would otherwise have been paralysed for life, and all future generations of children born without this threat hanging over them.

What can the international community in Geneva do to help end polio once and for all?

The fight against polio is a perfect illustration of how fundamental a horizontal approach to disease eradication is, in the spirit of the sustainable development goals (SDGs). That is exactly what the new approach of the SDG is supposed to do: tackle vertical issues through different lenses to go the extra mile and cross the finish line which, in this case, would be eradicating polio. We know today with tuberculosis, AIDS, malaria and polio that a medical response alone will never eradicate any disease. If issues such as education, health systems, engagement of local communities, discrimination and nutrition are not addressed, the response will either be partial or not sustainable. And this is exactly the role of the UN and of International Geneva, which offers an ideal platform for all the actors to bring together their expertise to give a holistic and sustainable answer to this problem.

Secondly, the international community in Geneva has a critical role to play in securing success. We are in a unique and privileged position here in Geneva. It is the global centre for peace, international diplomacy and worldwide policy. We are the critical link between the global community, and activities at the grassroots level.

As such, it is the international community here in Geneva, which must ensure that our respective national governments at home are fully aware of what they need to do, and to ensure that they do it – whether it is the implementation of national public health emergency plans, or making sure that the necessary financial resources are mobilized to finish the job.

So it is on all of us to ensure we are fully informed about these efforts. And it is our challenge to ensure that the international community here in Geneva is engaged accordingly.

Thank you for your time to speak to us about polio eradication. Do you have any final words or insights you would like to offer?

I think I would simply say this. We have it in our own hands to finish this disease once and for all. We are close, but we are not yet there. And make no mistake, it is a global fight. Let us show the world that – despite current perceptions – humanity can be noble, and righteous and capable of achieving something that is quite simply tremendously good for all humans, around the world. ■

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CHAMAN, PAKISTAN – NOV 24: Health worker administers polio-vaccine drops to a child during anti-polio immunization campaign at Pak-Afghan Border on November 24, 2014 in Chaman.

What do you need to finally achieve success?

Ultimately, we need for every child to be vaccinated in the remaining infected areas. That is really the core premise behind this effort. We have an affordable, effective vaccine that is available. And all children have a right to be protected by it, whether they are born here in Switzerland or rural areas of Somalia, or anywhere else in the world. Most areas of the three remaining countries are already polio-free. But there are under-served areas, where too many children remain unvaccinated. We are working hard with national and local governments and communities to fill these remaining gaps, and the trend is encouraging. But we are not there yet. And some of these areas are the most challenging to operate in, such as the state of Borno, in North Eastern Nigeria, which is affected by a severe humanitarian crisis and inaccessibility. We are working closely with the broader aid community, and of course local communities, and even in such settings, health workers and vaccinators are able to reach the children, unfortunately often at the risk of their own lives. Ultimately, what we need, is for every last child to be reached and vaccinated.

A question on funds: do you have the necessary resources to succeed?

No. We have tremendously generous partners supporting us, such as Rotary International, the Bill & Melinda Gates Foundation, donor governments, and the governments of the infected countries themselves. Without their engagement and support, polio eradication could not happen and will not happen. We have a plan to achieve a lasting polio-free world by 2020. But to fully implement this plan, we need an additional US\$1.3 billion. Without this, we cannot succeed. It is a lot of money, of course. But polio eradication is associated with significant economic benefits. A polio-free world will reap savings of US\$50 billion, mostly in developing countries. These are funds that can be applied to other pressing development and public health issues. So polio eradication makes sense, both from a humanitarian and economic point of view. Therefore it is critical that the international community continue to support this effort, and rapidly mobilize the remaining funds that are needed. ■

UN Special talks to Michel Zaffran, Director of the Global Polio Eradication Initiative at the World Health Organization (WHO), on how close we are to eradicating the disease and what else needs to happen to achieve success



© UN Photo/Jean-Marc Ferré

How close is the world to being polio-free?

We are closer than ever before. The World Health Assembly adopted its global decision to eradicate polio in 1988. At that time, every year more than 350,000 children were paralysed for life, in more than 125 countries across the world. Today, we are seeing fewer cases from fewer areas of fewer countries than ever before. Last year, only 37 cases were reported, from just three countries: Nigeria, Pakistan and Afghanistan. But it is still 37 too many, we cannot stop until we get to zero cases.

Why keep focusing on polio? Why not on other diseases?

Of course WHO and the international development community is supporting countries in addressing other diseases of public health importance including many that are also preventable by vaccination. But we cannot stop until polio has been completely eradicated. The reason is that unless we succeed, this disease will come roaring back. Within ten years, poliovirus will have again spread all over the world, and we will again see 200,000 children paralysed for life, all over the world, including right here in Switzerland. That is the danger with this disease, and why we have to finish it once and for all.

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Getting to know the WHO Kobe Centre

Innovating and transforming health systems for universal health coverage and ageing populations.

ALEX ROSS, MEGUMI ROSENBERG AND JOHANNES SOMMERFELD, WHO CENTRE FOR HEALTH DEVELOPMENT, KOBE, JAPAN

Bordering Osaka Bay and the international harbour of Kobe, Japan, you can access a department that is an integral part of the WHO headquarters of the Cluster for Health Systems and Innovation – only its 9,674 kilometers from Geneva. The WHO Centre for Health Development, otherwise known as the WHO Kobe Centre (or WKC), was conceived in the early 1990s as a global research centre of excellence to address the social, economic and environmental determinants of health.

The brainchild of former WHO Director-General Dr. Hiroshi Nakajima, WKC was endorsed by the WHO Executive Board in 1995, two weeks after the Great Hanshin-Awaji Earthquake. Today, the Earthquake Memorial Museum, just a few meters from the WHO Kobe Centre, reminds visitors of the devastation caused by the earthquake that occurred on January 17, 1995 at 5:46 a.m., claiming 6,434 lives and destroying major parts of the City of Kobe. The earthquake, however, did not shake the local authorities' commitment to establish the WHO Kobe Centre. It was viewed as an early milestone in the earthquake-affected region's path to recovery. It was also seen as an ideal vehicle for sharing lessons learned from disasters in Japan with the rest of the world, and for gathering related global expertise.

Since then, the Centre has continued to

receive generous financial support from Japanese authorities to pursue its global mandate. While small in size, WKC has made important contributions to global development agendas.

In 2016, the Centre embarked on its third decade of operation with its new research strategy addressing universal health coverage (UHC) and innovation with an emphasis on ageing populations. Alex Ross, Director, WKC, says that “the new strategy continues to build on the past strengths of WKC addressing emerging health issues arising from demographic and epidemiological transitions, using cross-cutting, multidisciplinary, and multi-sectoral approaches. Health systems thinking and research are at the centre of its work and are at the nexus of three global development agendas: the Sustainable Development Goals, UHC (a target under the SDGs), and the Global strategy and action plan on ageing and health.” Preceding the launch of the new strategy, the Centre convened two large Global Forums on Innovation for Healthy Ageing (2013 and 2015). And, the 2016 G7 Ise-shima Summit and G7 Health Ministers meeting in Japan further advanced the global agenda for UHC and for healthy and active ageing. Building on this momentum, WKC has developed and launched new streams of research that aim to identify how countries can achieve and sustain universal health coverage as populations age.

The current work of WKC builds on a decade of experience during which the Centre has played a “pivotal role in placing



The International Health Development (IHD) Building in Kobe, Japan.

urban health and health equity on the global agenda culminating in influencing Habitat III and laying a foundation for multisectoral action on health and urban planning, and the SDGs,” says Dr. Megumi Rosenberg, Technical Officer of WKC since 2009. WKC produced two Global Reports on urban health, including one published

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just last year, in partnership with UN Habitat. As the only WHO knowledge hub for the WHO Commission on Social Determinants of Health, WKC pioneered research on health inequity and its determinants related to urbanization.

Despite being geographically distant from WHO Headquarters and Regional Offices, WKC works in close collaboration with colleagues in these offices to promote the “One WHO” approach. Current research initiatives addressing UHC, innovation and ageing involve working closely with the various departments within the Health Systems and Innovation cluster, the Non-communicable Diseases and Mental Health Cluster, the Department of Ageing and Life Course, as well as with Regional Offices to name just a few.

“Essential to the success of WKC and to implementing its diverse research portfolio are strategic partnerships with researchers and institutions. We work with leading academic experts across the world and in Japan to jointly conduct research, develop policy papers as well as practice-relevant tools and resources,” says Dr. Johannes

Sommerfeld, Senior Scientist, who recently joined WKC after 16 years with TDR, the Special Programme for Research and Training in Tropical Diseases. While some of the research is commissioned, innovative ideas for research are also encouraged and supported through open Calls for Proposals. The Centre convenes meetings of experts as well as political leaders, most recently the WHO Side Event to the G7 Health Ministers meeting in Kobe. WKC has also launched a new UHC Leadership Capacity development programme.

Add to this the role that WKC plays to develop the next generation of global health leaders. WKC receives graduate-level interns each year and provides guidance and mentorship through working on substantive projects. Several former WKC interns are now working as professional staff within WHO or in other development agencies. WKC staff are also regularly invited to offer lectures to students and scholars in Japan.

Japan offers many lessons for the world in ensuring healthy and active ageing, and in transforming health and social delivery

systems to attain UHC. WHO is privileged to have a global centre in Kobe, offering opportunities to contribute to global health and to Japan – all in the beautiful city of Kobe, nestled between the Rokko mountain range and the Seto inner sea. ■

For more information visit:
http://www.who.int/kobe_centre/about/en/ or contact wkc@who.int

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On World Health Day 2017

WHO encourages people around the world to talk about depression

ASHLEY SARIKAYA, WHO

“My depression began with the feeling of being sad. I would stand outside the classroom, put my headphones on, turn on the music, and the sound that I would hear in my ears would help drown out the abuse I use to get from all the other boys,” said WHO Goodwill Ambassador and news presenter James Chau of his childhood depression. “Each year it seemed to get worse and worse. By the time I was 17, because I hadn’t spoken about it, my confidence was just broken.”

Chau did what many are not brave enough to do — he sought help. “There was a time when I didn’t think I would live past 25 years-old. Something went right when I chose to open up, share, and listen to the health professionals,” said Chau who is a London-born, Beijing-based Chinese broadcaster and writer currently serving as a WHO Goodwill Ambassador for Sustainable Development Goals (SDGs) and Health.

The leading cause of ill health

Depression is now the leading cause of ill health and disability, affecting more than 300 million people around the world. It causes mental anguish and impacts on people’s ability to carry out even the simplest everyday tasks, with sometimes devastating consequences for relationships with family and friends and the ability to earn a living. At worst, it can lead to suicide, now the second leading cause of death among 15-29 year-olds, behind road injuries.



Increased investment is also needed. In many countries, there is no, or very little, support available for people with mental health disorders. Even in high-income countries, nearly 50% of people with depression do not get treatment. On average, just 3% of government health budgets is invested in mental health, varying from less than 1% in low-income countries to 5% in high-income countries.

Depression: let’s talk

It was for all these reasons that WHO decided to focus on depression for this year’s World Health Day, on 7 April. World Health Day is the highlight of a 1-year campaign, “Depression: let’s talk” that kicked off on 10 October, World Mental Health Day.

“The continuing stigma associated with mental illness was the reason behind the name of our campaign,” said Dr Shekhar Saxena, Director of the Department of Mental Health and Substance Abuse at WHO. “For someone living with depression, talking to a person they trust is often the first step towards treatment and recovery.”

The overall goal of the campaign is that more people with depression in all countries will seek and get help. For the first six months the focus has been on awareness-raising, about depression as an illness, how it can be treated, and how families, friends and colleagues of people suffering can provide support.

Information targeted specifically to adolescents and young adults, women who are pregnant or have young babies, and older people has been translated into many languages. Posters depicting conversations in the home, at school, in a clinic, in community settings and even in emergency situations are accompanied by advice on dealing with depression at different ages and life stages.

A global campaign

An online application was created upon which individuals and organizations publicize their activities. “The growing momentum as we got closer to World Health Day was very exciting for those of us who had been involved from the beginning,” said Alison Brunier, the communications lead for the

campaign. “A day before World Health Day, close to 200 activities from over 50 countries had been registered.”

At WHO headquarters, the team organized a Facebook Live event, during which mental health experts were joined by a guest from London who had experienced depression herself, to answer questions from an online audience. The engagement of those following online was further evidence that depression is an issue of concern to people everywhere.

What comes next

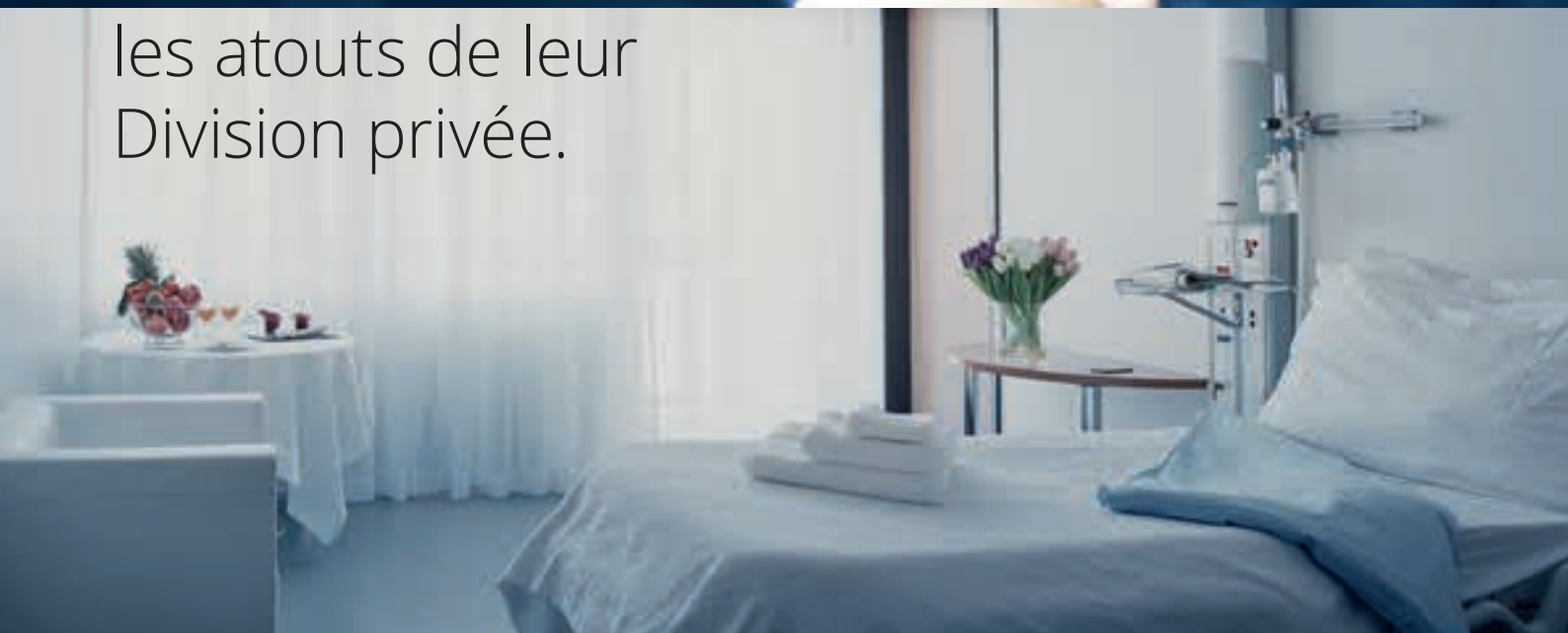
World Health Day signals the start of the second half of the campaign. “Our focus during the next six months,” said Dr Saxena, “will be to build on the momentum of recent months and support governments and partner agencies in their efforts to scale-up mental health services so that ultimately, support is available for everyone who needs it.” ■

For more information see the campaign site: www.who.int/depression/en and the campaign application: <http://apps.who.int/depression-campaign-2017/en>



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Protect people's health

Before, during and after outbreaks and emergencies

Much of WHO's work related to emergencies actually happens outside of emergencies. It is focused on preventing or mitigating the impact of outbreaks and health emergencies. Here, we take a look at several aspects of WHO's emergencies-related activities.

WYNNE BOELT, WHO



1. Preparedness

More than 30 countries (with over 1.2 billion people) have welcomed evaluations of how well they are prepared to face a health emergency. The process is called a Joint External Evaluation). The evaluation looks at readiness on many fronts, including at points of entry, such as this border crossing between Ghana and Togo.

2. Disease detection

Every month, WHO receives 5000 disease alerts. Annually, 300 alerts require follow up. This means WHO performs at least one field investigation every day somewhere in the world, such as mapping an outbreak in the Democratic Republic of the Congo.

3 Alert and ready

About 350 million doses of flu vaccine should be available for the next flu pandemic, for countries in need, based on commitments by vaccine manufacturers under the Pandemic Influenza Perspectives framework.

4. Mapping health services

In the Syrian Arab Republic, more than half of the country's public hospitals and primary health care centres have either closed or are only partially functioning, and almost two thirds of all health professionals have fled the country. WHO uses its Health Resources Availability Monitoring System to get a clear picture of the health services available, and where support is needed.

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5. Bringing services to the people

More than 50 countries are facing emergencies with support from WHO teams on the ground. Medical teams supported by WHO set up mobile clinics in hard to access areas of north-eastern Nigeria, and dispense medicines to treat malaria and minor ailments, as well as vitamin A supplements and deworming tablets for children.



© WHO D. Spitz

6. Research and development

In the on-going battle against Zika, WHO brings together experts and shares research results to improve understanding of the virus and how to detect, control and treat it and the disorders linked to it.

(For information on how social sciences support health emergency work, see story on page 20.)



© WHO L. Pezzoli

7. Outbreak prevention and control

Some 40 million people live in cholera-endemic areas in sub-Saharan Africa alone. WHO recently supported an Oral Cholera Vaccination campaign in Mozambique that reached more than 200,000 people living in 6 neighbourhoods at high risk for cholera. WHO works with partners within a cholera control strategy that involves access to water, sanitation, and other necessities to combat the disease.



© Gavi/ Karel Prinsloo

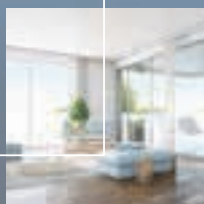
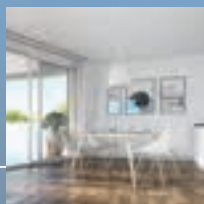
8. Food insecurity and disease

Diseases such as cholera, malaria and measles flourish when food becomes scarce, and people's immune systems are weakened. With Ethiopia, Kenya, Nigeria, South Sudan, Somalia, Uganda and Yemen facing food insecurity this year, WHO is working to deliver vaccinations and health services to the most vulnerable people. The response requires the cooperation of partners working in health, food, water, sanitation, nutrition, livelihood and other sectors. Here, Nurse Shamsa Yusuf Mohamed weighs a child at the malnutrition centre in Banadir Hospital in Mogadishu, Somalia.

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Social media can have a positive impact on people's health



@DANTE_LICONA AND@SETIOGI

Everyone at WHO works towards a shared goal: improving people's health. Thousands of colleagues are working all over the world with governments, partners, and public health professionals to find better ways for attaining the highest standard of health. Through social media, we share in real time with a global audience stories of what WHO does as well as those that can help them make healthier and safer choices.

Social media is at the digital frontline of every organization. Social media is the fastest channel WHO has for distributing information and other important messages to the public. And through social media, WHO finds out in real time what people are saying about our work, how communities perceive our impact, and how news organizations report on our work. We catch and correct

rumours and misinformation that are circulating. It's the most efficient information loop WHO has.

Social media usage is growing fast. We live in a smartphone world, where more people have access to mobile phones than any other means of communication. Billions of individuals of all ages use a variety of social media platforms, interacting with friends and family, expanding their networks and exchanging points of view on every topic, including health.

And on social media, interest in health is quite high – one in 20 Google searches is for health-related information. People want to know about what is relevant to them: How often should I visit a clinic if I'm pregnant? Is one dose of yellow fever vaccination good for life? What is Zika and how can I protect my loved ones? WHO has evidence-based answers

and the fastest way we get this information out is via our social media channels.

WHO has over three million followers both on Facebook and on Twitter. With every Facebook post, Twitter message or photo on Instagram, WHO makes public health information accessible to our audience, reaching people in the places where they consume information regularly. While users are scrolling on their phones through photos of friends and family, we share with them the latest infographics on tuberculosis, antimicrobial resistance or any of the important topics WHO is working on. If people find our content useful and visually attractive, they might share it and spread the word.

With one of our most popular posts, a video about depression, WHO reached 10 million people on Facebook (40 times above our average performance). Of those, 8.4 million people were out of our "fan zone" – meaning that although they don't follow WHO on a regular basis, the video reached them through their friends. That single piece of visual storytelling has prompted hundreds of people to seek help. That's having a direct impact on people's health, that's WHO's objective and our motivational engine.

Are you on social media? If you are, help us spread the voice for a healthier world. ■

Embed this Facebook post:

<https://www.facebook.com/WHO/deos/1331396243572422/>

@MONIKAGEHNER

How staff on social media can have a positive impact on people's health

In the age of social media, most people, including almost every staff member at WHO, has some presence on social media. This gives them a platform to be a public communicator, both on their own behalf – and, often simply because of the fact that they work for WHO, they are also seen as speaking with the voice of WHO. When they do so, there is the potential of reputational risk for WHO, if the staff member does not strike the right tone.

How does the staff member balance what the "right" conduct is on social media as a personal account user, with what is "right" for the Organization, and what is right for society? For example, will a message be viewed as impartial or critical of a government or partner? Is the use of social media respectful of other opinions and practices?

To help protect staff, WHO is rolling out its first-ever global social media policy, developed over the past 3 years with a global task force. The policy puts an emphasis on ethical principles which are consistent with the (UN) Standards of Conduct for the International Civil Service. Staff's individual credibility and that of WHO hang in the balance and ultimately, our shared goal of improving the world's health. ■

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Knowledge Transfer

A weapon for fighting epidemics

DR SYLVIE BRIAND, DR GAYA GAMHEWAGE,
MS HEINI UTUNEN; WHO

Innovation in emergency response

A day before his 85th birthday, Nelson Mandela said¹ that “education is the most powerful weapon (with) which you can change the world.” He was passionate that everyone had access to education, and promoted innovation in education. In no other sphere of human life is education and innovation more important than in health emergencies.

Every year, WHO and its global network of partners investigate at least 200 disease outbreaks. Mandela’s own continent, Africa, experiences a new disease outbreak every four days on average. Countries, such as the Central African Republic, are dealing with several epidemics today. Disease outbreaks take hold and amplify into full blown epidemics, and maybe even pandemics, for many reasons. Low-income and war-torn countries are even more at risk as they lack health systems that can anticipate, detect and respond to outbreaks.

Getting knowledge to the front-line is hard

Knowledge exists for battling many known disease outbreaks. The challenge is to get the latest science and knowledge into the hands and minds of decision-makers and front-line responders. Even more difficult is to capture, package and deliver knowledge on new diseases. From 1970-2007 at least 1420 new pathogens – disease-causing microbes – have been discovered, 177 of them identified in the past decade. 70% of these originated from animals, which humans are having increasing contact with due to modern farming, livestock

practices, and deforestation. While not all new pathogens have public health impact, some threaten humans. MERS Coronavirus outbreaks in the Middle East and in South Korea was caused by a new virus that came from camels and new science had to be developed, packaged quickly, “transferred” to front-line responders for real-time use for bringing these outbreaks under control.

A sinister face to 21st century epidemics

The 21st century has witnessed unimaginable changes in how humans live. We are travelling far, wide, and often. In 2016, human travelled an unprecedented 5,902,393,674,603 kilometers just by air, crisscrossing the globe, and sometimes carrying dangerous pathogens with them. A single infected traveler was responsible for taking MERS-CoV from Saudi Arabia to South Korea, resulting in the death of more than 180 people. People also move on road, by train and on foot. Ebola spread fast from Guinea to Liberia, Sierra Leone, and other countries by people on the move. Sick people in search for hospitals also infected others on the way.

Rapid and unplanned urbanization also increases the risk of amplification of disease outbreaks. For the first time in human history, more than half the world’s population live in cities. Often these are places that concentrate poverty and lack proper infrastructure and hygiene. These conditions are perfect for the emergence and spread of infectious diseases.

Limited access to health care and health education, ecological changes, food production, weak health systems, conflicts, wars and humanitarian crises all create

the conditions needed for epidemics to thrive and grow.

New standards, new expectations

The 21st century also demands better response to health emergencies. WHO’s newly reformed Health Emergencies Programme is dedicated to using the latest know-how to minimize the loss of life and suffering. For example, 21st century response now involves providing clinical care for people sick with even deadly diseases, such as Ebola. This requires fast and effective knowledge transfer to ensure patients get the best chance at survival while minimizing risks faced by health care workers. More than 800 health care workers died as they became infected during the provision of care at the onset of the outbreak. WHO led the training effort in the Ebola response training more than 6,000 national and international health care workers to work safely and effectively in Ebola Treatment Units. Another 8,000 front-line responders were trained through eLearning to work safely in the field.

Easy-to-use knowledge has to reach large numbers of responders wherever they are. Some of this knowledge already exists, but some is new or still evolving. This means that an effective “knowledge transfer” system has to be responsive, flexible, accessible even where internet is limited, and host hundreds of thousands of people. For example, at one stage during the West Africa Ebola outbreak, 110,000 responders had to be “trained” and briefed in just 8 weeks. Improved care for patients is just one of the new standards emerging in the management of infectious hazards in the 21st century. Four other areas of



interventions also require knowledge transfer: research for and during outbreaks; new interventions (such as vaccines), rapid diagnostic tests and risk communication and social science interventions. Applied as a package, on an effective operational platform, these interventions promise to revolutionize outbreak and epidemic response.

WHO innovates

“At the core of the (WHO emergency) reforms is ensuring that WHO’s response to infectious disease outbreaks is at the cutting edge,” said **Dr Peter Salama, Executive Director of the WHO Health Emergencies Programme (WHE)**, at the launch of a new learning programme for Managing 21st Century epidemics for the Africa region in March 2017.

The Department of Infectious Hazard Management under the WHO Emergency programme strives to ensure the latest science and evidence-based knowledge is generated, packaged, translated for the level of education of responders, and put easily into their hands. A recent example of this was during the Zika outbreak in the Americas in 2015-2016. In a matter of a few months, WHO developed 23 guidelines on how to manage the disease and its tragic complications, made them available in 7 languages, and on an easy to use mobile app free of charge. More than 122 countries are now using this digestible information easily and frequently.

OpenWHO.org

WHO’s new online course platform – OpenWHO – aims to equip all frontline responders with the knowledge they need to better contain disease outbreaks and

manage health emergencies. OpenWHO offers free transfer of the latest and most relevant scientific, technical and operational knowledge to any location in the world. The platform is flexible and can host up to 250,000 users simultaneously. It offers courses at introductory, intermediate and practitioner levels. These courses are accompanied by interactive “knowledge packs” bringing together all resources related to a disease in one place.

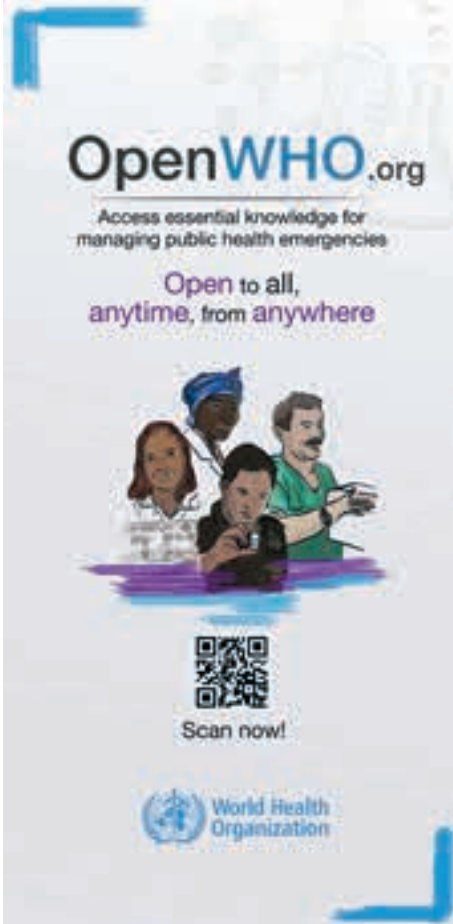
A mobile app will let you know when new courses are available. Anyone, anywhere can access it anytime.

A landmark workshop was held in Africa at the end of March. 125 participants from 45 African countries, including WHO staff and key partners, such as CDC, UNICEF, IFRC, the World Bank, ECHO and USAID, gathered in Dakar, Senegal for a workshop on *Managing 21st century Epidemics*. All participants completed courses on epidemic-prone diseases on OpenWHO before the workshop, so that practical issues could be discussed in depth at the face-to-face event. “When we have risk in one region, it can also be in another region very quickly because of the density of transport and people moving from one country to the other,” said Dr. Ibrahima-soce Fall, AFRO Regional Emergency Director, “We really need to work together to analyze the risk and to have the mechanism for experience sharing.” ■

For more information

Outbreak.training@who.int

1. (Source: “Lighting your way to a better future: Speech delivered by Mr N R Mandela at launch of Mindset Network,” July 16, 2003)



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Immune Nations at the United Nations

ANNEMARIE HOU, UNAIDS

In a dark room, you see a shadow of yourself on a large screen, white lights create spots that arc across the screen and onto your body.

It's the deadly Shadowpox trying to infect you.

Watching your shadow-self on the screen you try to sweep the spots off your body. More spots appear and you realize the virus isn't just attacking you – it's attacking everyone around you. What do you do now?

This is the type of question people are faced with in *Shadowpox*, an art installation part of the new *Immune Nations* exhibit. Using interactive projections, *Shadowpox* gives participants a unique experience of fighting a virus with a vaccine while trying to save the people around them by what public health officials call herd immunity – when enough people are immunized that the virus has no one left to infect.

The questions and decisions people face

interacting with *Shadowpox* are similar to public health scenarios being played out around the world. And it is exactly the kind of thinking a grant by the Research Council of Norway tried to provoke by bringing artists, researchers and policy-makers into a room together to see how they might reframe the current discourse surrounding vaccination.

"We are interested in exploring the role that art and culture could have in informing global health decision-making," said Steven Hoffman, a law professor at the University of Ottawa and co-lead of the Vaccine Project.

In the summer of 2015, renowned artists and experts gathered at the University of Ottawa and concepts for the evidence-based art exhibit emerged. *Shadowpox*, was imagined by a group of collaborators led by Alison Humphrey and Caitlin Fisher. The idea started with a new vaccine-preventable disease composed of viral shadows. The concept was part fact and part science fantasy. The mixed-reality installation

combines real-world statistical data with live-animated digital effects. "The final work is equally stunning, fun and provoking – everything needed to engage people on the issue of vaccines," said Natalie Lovell, a co-lead and curator for the exhibit.

The Vaccine Project is multi-year collaboration that has spanned continents and cultures. "More than 100 people and organizations are collaborating on this exhibit," said Sean Caulfield, a co-lead of the project. "We have representatives from virtual reality labs and universities to governments and the United Nations."

The project will also include peer-reviewed research papers that will be published in 2017. The *Immune Nations* exhibition will open in Geneva at the UNAIDS building at 20 avenue Appia on 23 May 2017 to coincide with the World Health Assembly. ■

For more information please visit www.thevaccineproject.com



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The first and best food for humans to achieve the Sustainable Development Goals

DIANA ESTEVEZ, WHO

In the context of the 2030 Agenda and the Sustainable Development Goals (SDGs), a simple action has a deep horizontal impact towards reducing poverty and inequalities, improving health and providing well-being, supporting academic performance, promoting women's empowerment, economic growth and innovation, sustaining responsible consumption and production, protecting water, life on land and peace, while providing the best nutrition for babies: **breastfeeding**. While breastfeeding is not included as such among the SDG indicators, it is part of the global nutrition targets for 2025, endorsed by the World Health Assembly in 2012, where member states agreed upon six targets to improve maternal, infant and child nutrition, including to increase the rate of exclusive breastfeeding for children under six months of age to at least 50%.

In 2015, the global rate of exclusive breastfeeding under 6 months of age was 43%. This percentage varies depending on the regions.

When a mother breastfeeds her baby, she is not only providing the most natural and best feeding, but contributing to the better development of society.

The World Health Organization (WHO) recommends exclusive breastfeeding up to six months of age. This means that babies should not be given water or any other food or liquid, only human breast milk. Breastfeeding should be continued along with appropriate nutrition up to two years of age or beyond.

Breast milk is the most appropriate and best food for healthy human babies. Its composition changes depending on the needs of the baby, from colostrum to mature milk. It contains the right types and percentages of lipids, proteins and carbohydrates. It also contains antibodies and bacteria that will shape the baby's microbiome. Breast milk protects the baby against infections, strengthens the immune system and, in the long term, breastfeeding reduces the risk to developing chronic conditions like obesity or type 2 diabetes.



Mother breastfeeds her 6 month old baby with the tender support of the father.

© Chico Romanelli, 2015, Sao Paulo, Brazil.

The benefits of breastfeeding also reach the mothers, promoting uterine involution, preventing postpartum haemorrhage and decreasing the risk of iron-deficiency anaemia. The release of hormones and the close contact with the baby provide positive psychological outcomes.

Effective strategies to protect, promote and support breastfeeding include improved maternity care and education, professional education and awareness, access to professional support and peer support programs, support breastfeeding in the workplace

and provide at least 6 months of maternity leave, social marketing and full implementation of the International Code of Marketing of Breast-milk substitutes.

The overwhelming scientific evidence that breastfeeding is key to reduce child mortality, end all forms of malnutrition, promote health, impact education and sustainable communities probes that any action taken now to protect and promote breastfeeding will drive member states to achieve the SDGs and better health to all. ■



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Letter to the Executive Heads of all common system organizations with staff in Geneva

Geneva, 7 April 2017

Dear Executive Heads,

Yesterday over one thousand common system staff met at the Palais des Nations in Geneva on the subject of the pay cut proposed by the International Civil Service Commission (ICSC) for staff in Geneva. The meeting was standing room only, raucous and noisy, with frequent chants of "no pay cuts, no pay cuts!" Staff voted unanimously in support of the [resolution in Annex 1]. Many called for strike action.

It is important to state upfront that staff do not join the UN for the pay check. They join for the privilege of working under the UN flag. Many put their lives at risk and work extremely hard over their careers. But staff are disappointed and angry with the decision. It will lead to a real cut in take-home pay of 7.5 percent in dollar terms, on top of other cuts from the compensation review. Staff are living within their means, but adjusting to a loss in salary of almost one month per year will present huge difficulties, including for young families struggling to make ends meet given high childcare fees, rents and other costs in Switzerland. It is hard to square this cut with some of the considerable capital expenditures currently being made by organizations here.

The decision bears little relation to the macroeconomic situation in Geneva and results mainly from an earlier pay freeze, but not pay cut, in New York. The methodology is therefore questionable and without comparison to the outside world. It is also based on a change in rules two years ago designed to make the impact tougher.

We believe this decision will reduce the attractiveness of Geneva for key policy and decision-making staff, and will in so doing, reduce the profile and importance of International Geneva.

We also see this cut as part of a broader attack on all staff, and for this reason it is a matter for colleagues of all categories.

We appreciate the efforts of your management teams at the ICSC to argue against the decision. However, now it is passed, **we ask your organization to support its staff by not implementing the cut.**

We see this cut as a breach of our labour rights, and as such, staff have given their associations and unions a clear mandate to contest this decision by all legitimate means, and hopefully with your support. We are ready to meet with you if necessary and look forward to a reply on your intentions with regards to non-implementation by 20 April.

We thank you for your attention.

Sincerely,

Gemma Vestal
FICSA General Secretary
ficsagensec@unog.ch

Ian Richards
CCISUA President
ian.richards@un.org

On behalf of the following staff unions and associations, members of the Geneva Group:

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From: Gemma Vestal, General Secret

FICSA TAKES ACTION AGAINST IC

The staff federations of both FICSA and CCISUA met on Thursday, 6 April 2017, to inform them of the decision of the International Civil Service Commission (ICSC) to implement the Professional and higher categories' compensation review results (as of the October 2016, date of the review) of a pay reduction of 7.5 per cent in US dollars.

More than one thousand common system staff met in Geneva, which was promptly transmitted to the management organizations in Geneva.

As FICSA is concerned that other headquarters will follow with similar ICSC decisions to cut the pay, as adopted, as well as the letter sent to the management organizations in Geneva. Both documents are annexed to this letter.

FICSA will keep the membership apprised of the situation.

7.5%
PAY CUT



Geneva, 13 April 2017

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ICSC DECISION TO CUT PAY FOR STAFF IN GENEVA

ICISUA organized a meeting of all Geneva-based staff on 13 April 2017 to seek their input in regard to the recent decision of the International Civil Service Commission (ICSC) to cut the take-home pay of Geneva-based staff in 2017. When comparing the prevailing pay index to the survey results (of the survey), the comparison would lead to a take-home pay cut of approximately 6.7 per cent in Swiss franc terms.

Common system staff came to the meeting. After expressing their concerns, they unanimously adopted a resolution against the pay cuts in Geneva, which was sent via a letter to the executive heads of all common system organizations.

Common system duty stations may in the near future be confronted with the decision of staff, we would like to share with you the Resolution, adopted by all executive heads of common system organizations in Geneva, hereto for information purposes.

We will keep you informed of any developments concerning this important issue.

* * *

RESOLUTION: AGAINST PAY CUTS FOR STAFF IN GENEVA

ADOPTED AT A MEETING OF STAFF FROM ALL INTERNATIONAL ORGANIZATIONS IN GENEVA HELD AT THE PALAIS DES NATIONS, THURSDAY, 6 APRIL 2017

The staff of the international organizations in Geneva, united in solidarity,

Expressing pride in their work as international civil servants;

Noting the decision of the International Civil Service Commission at its 84th Session to reduce take-home pay in Geneva by 7.5 percent in dollar terms;

Believing that the decision does not correspond to the macro-economic reality of the Geneva economy;

Further believing that fighting this decision unites all categories of staff and expressing solidarity between all categories and duty stations;

Noting that just prior to the Geneva survey, the International Civil Service Commission removed key mitigation measures that would have significantly lessened the negative impact;

Affirming that the cut will have a strongly negative impact on livelihoods as staff will have difficulty to meet their existing financial commitments, including rents, school fees, loans and household costs;

Noting that this reduction comes on top of other cuts imposed by the recent compensation review for staff in the Professional category and above;

Believing the cuts will make Geneva a less attractive duty station for policy and decision-making personnel, reducing the profile and importance of international Geneva;

Noting with disappointment the decision of the International Civil Service Commission not to attend the staff meeting;

1. Denounce the decision of the International Civil Service Commission to reduce take-home pay in Geneva;
2. Call on international organizations with staff in Geneva not to implement the decision of the International Civil Service Commission to reduce pay;
3. Urge the International Civil Service Commission to review its methodology for post adjustment;
4. Call on the International Civil Service Commission to urgently meet with staff in Geneva;
5. Give mandate to the staff associations and unions of international organizations in Geneva to work in coordination among themselves and with the CCISUA and FICSA staff federations to mobilize vigorously against the cut and use all legitimate means to defend their interests.

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7.5%
PAY CUT

7.5%
PAY CUT



Les résidents en salle de sport, avec Vincent Flavien, bénévole



Petite fête de départ au Foyer Appia avec Sophie, Laurence, Nahom, Yonas, Samson et Naim

Coup de foudre au sommet de la colline Entre les bénévoles et les résidents du Centre Appia

*Nous étions au printemps
2016, et au sommet
de la colline, quelque
chose changeait.*

**SONA BARI, OMS &
CATHERINE DISSARD, OMS** (TRADUCTION FRANÇAISE)

Les autorités suisses avaient transformé un bâtiment de bureaux désaffecté en un lieu de vie pour les requérants d'asile, avec lits superposés, cuisines et salles communes pour se retrouver. Les premiers des 150 hommes environ attendus s'installaient dans le Centre Appia; les âges variaient: certains avaient tout juste 18 ans, d'autres avaient atteint la majorité. Ils venaient des quatre coins du globe – notamment d'Érythrée, d'Éthiopie, d'Irak, de Sri Lanka, de Syrie, du Soudan, de Tunisie et de Sierra Leone –, parlaient des langues différentes, et leurs histoires étaient différentes. Mais ils avaient tous un point commun: avoir fui leur pays d'origine. Les organisations internationales installées dans le quartier les ont vus arriver: ceux pour qui ces organisations avaient été créées se trouvaient juste là, en face d'elles. Si certains ont avoué quelques craintes, celles-ci ont rapidement été balayées par les réactions positives de la majorité des membres du personnel de l'OIM, de l'OIT et de l'OMS qui ont souhaité venir en aide à ces nouveaux voisins.

La motivation première était d'aider et de soutenir des personnes qui ont cherché refuge dans un pays d'accueil.

Comme l'a dit l'une des bénévoles, Marilyne Vonlanthen, «J'ai proposé mon aide parce que nous devons leur montrer qu'ils sont les bienvenus ici».

Avec l'appui de l'Hospice général de Genève, une enquête a été menée auprès des bénévoles des trois organisations internationales pour savoir ce qu'ils étaient prêts à proposer. Aux résidents du Centre Appia, on a demandé ce dont ils avaient besoin. Dans leur très grande majorité, les résidents souhaitaient des cours de conversation en français, afin de pouvoir pratiquer ce qu'ils apprenaient dans les cours officiels mis en place à leur intention. Un autre souhait souvent formulé: du matériel pour équiper leur salle de sport.

Et c'est ainsi que presque chaque jour de la semaine, à l'heure du déjeuner et en fin d'après-midi, les passants peuvent apercevoir, par les larges fenêtres du Centre, de petits groupes de résidents discutant en français avec les bénévoles. Un jour, la conversation pourra porter sur les courses, avec de faux légumes mais une vraie liste: poulet, huile, tomates, lait. À tour de rôle, les résidents et les bénévoles seront acheteurs ou commerçants. Un autre jour, la conversation s'anima autour d'un jeu improvisé



Galette des Rois, 05.01.2017



Photo de groupe, bénévoles et résidents, lors d'une promenade au parc

de Pictionary: les talents des dessinateurs sont variables, mais les mots suggérés le sont toujours avec enthousiasme. De petits groupes partent aussi en balade, d'autres se retrouvent dans un café et, pourquoi pas, s'essaient aussi à la pétanque! Un jeune résident nous raconte: «l'une de mes séances préférées a été celle où nous avons joué avec les prépositions, criant à tour de rôle: «Dehors, dedans, devant, derrière!» Ce jour-là, j'ai tellement ri!»

Le travailleur social responsable du Centre pour l'Hospice, Hacène Ouahmane, a servi de guide aux résidents comme aux bénévoles. Rebekah Thomas, l'une des bénévoles animant les cours de conversation en français souligne: «Alors que nous nous tracassions pour savoir quels sujets aborder pendant nos cours, Hacène nous a fait comprendre qu'apprendre le français n'était peut-être que secondaire.» Ce qui importait avant tout c'était l'échange avec les «gens d'ici» et trouver peu à peu une place dans cette nouvelle vie. Quant aux bénévoles, selon les propres mots d'Hacène, cette initiative nous a permis de «devenir meilleurs», et de relativiser nos petits soucis du quotidien.

La salle de sport du Centre, équipée de machines offertes par des donateurs, est un havre de paix pour ces jeunes hommes actifs. C'est avec plaisir que les bénévoles Vincent Flavien et Christian Decharrière leur enseignent comment bien utiliser les machines. La vie d'un réfugié est faite aussi de longs moments d'ennui, et la salle de sport offre le moyen de retrouver une meilleure forme, physiquement et mentalement. Plusieurs résidents évoquent

leurs insomnies, et les kilomètres parcourus pour lutter contre celles-ci. Le Centre Appia a sans doute permis à ces hommes d'atténuer les fêlures de leurs vies cabossées. Les cours de musique ont remporté un grand succès. Pour Heber Gómez-Malavé, bénévole guitariste, «C'était une expérience extraordinaire, parce que j'ai beaucoup appris sur les musiques d'ailleurs, et découvert de nouveaux instruments et de nouvelles langues. Cela m'a conforté dans l'idée que nous sommes tous très semblables; nous sommes tous à la recherche du bonheur, et quel que soit le chemin que nous empruntons pour atteindre nos objectifs, un sourire sur un visage, un rire partagé et des moments de joie dont on se souviendra nous feront toujours avancer.»

Participer à cette initiative, c'est passer du terme abstrait de «réfugié» entendu chaque jour dans la presse, à la réalité concrète d'une personne qui a vécu de terribles épreuves et qui garde l'espoir d'une vie meilleure; ce sont maintenant pour nous des prénoms, des sourires et des réalités partagés.

Les bénévoles, membres des organisations internationales ou proches de ceux-ci, ne se font pas d'illusions sur les difficultés et sont bien conscients de la portée limitée de leur action dans la vie des résidents du Centre Appia. Mais ils ont tous l'espoir que les résidents emporteront avec eux certains des moments partagés là, au sommet de la colline, avec les personnes qui ont traversé la rue pour les rencontrer, lorsqu'ils poursuivront leur long chemin pour retrouver un foyer.

Sophie Amet nous fait part de son souvenir préféré: «Certainement le jour où les garçons nous ont fait la surprise de nous préparer un repas typique afghan... on s'est senties très privilégiées.» ■

Luz Caguioa (OMS) souhaite remercier les bénévoles de l'OIM, de l'OIT, et de l'OMS, le personnel de l'Hospice de Genève, du Centre Appia (Hacène, Fabio et Jo), les associations du personnel et les membres des familles du personnel qui ont donné de leur temps ou fait des dons.

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SAHANA SRI LANKA – School children at the Mallika Maha Vidyalaya School, Hiniduma

Small Island, Big Dreams

Inspiring Sri Lanka's next generation through the success stories of innovative leaders, entrepreneurs and drivers of change

INDIRA KITHSIRI AND HASHENDRA WIJESINHA

Sri Lanka is at the cusp of a paradigm shift. The country is poised for rapid growth, with aspirations to position itself as the vibrant economic hub of South Asia. In recent years, Sri Lanka has made robust efforts in establishing itself as a knowledge-based economy, with strong emphases on education and skills development.

Driven by their passion for the country and for social entrepreneurship, authors Indira Kithsiri and Hashendra Wijesinha are collaborating to write a book profiling the stories of successful entrepreneurs and inspirational leaders with Sri Lankan roots, from within the country and abroad. Indira began the project after recognising the lack of an adequate local platform to highlight these exciting individuals and their achievements. Her collaboration with Hashendra was born out of their closely aligned interests and goals, particularly Hashendra's aspirations to establish a non-profit organisation focusing on mentoring young Sri Lankans in the areas of entrepreneurship, personal and career development, specifically for youth from disabled and low socio-economic backgrounds. The non-profit is at the crux of the book project, as sales from the book will be used to set up the organisation. Indira and Hashendra spoke to us about the initiative, and how it could help shape Sri Lanka's success story.

What is the book about and what are you trying to achieve with this initiative?

The book will feature the life journeys of Sri Lankan entrepreneurs, drivers of change and inspiring leaders from varied spheres. It will be the first component of an ecosystem of initiatives we will build to engage both the private and public sectors in supporting the nation's burgeoning young and innovative talents. We truly hope that our publication will provide insights, direction and guidance to bright young Sri Lankans who have the aspirations to turn their ideas into powerful and impactful realities. An essential part of this project will be the involvement of the broader local and diaspora Sri Lankan community in selecting the most accomplished talents as exemplars for the local youth.

How do you hope to involve the community in selecting the profiles?

We have created an online nomination process for selecting the individuals who will be featured in the book, on our website, www.iaminspired.lk. We have generated a selection criteria to assist us with evaluating potential candidates. Anyone can nominate an individual who inspires them, and is within the parameters of the selection criteria. We especially urge all Sri Lankans, and the international community to help highlight the unsung heroes who continue

to make a positive impact on our society. Once the nomination process is over, we will shortlist and select five individuals, diverse in background, experience and outlook for each chapter of the book.

What are the topics you are hoping to focus on in the book?

The book will cover chapters anchored on topics like Start-up, Business & Digital, Arts & Culture, Tourism & Hospitality, Public Policy & Governance, Human Rights & Philanthropy; providing insights into sectors where Sri Lanka has seen tremendous progress in recent years. Each chapter will feature one or two advisors, recognized as influential leaders or established experts in their fields of work. For example, we are incredibly thrilled to have cricketering veteran Muttiah Muralidaran for the chapter on Sports & Adventure.

Similarly, we are honoured to receive the endorsement of Rosy Senanayake, a renowned women and children activist, who will lead the Young Stars & Exceptional Women chapter. Mrs. Senanayake, who is also the Deputy Chief of Staff for the Sri Lankan Prime Minister stated, *"I am confident that this book will contribute to the local ecosystem of creativity, innovation and leadership cultivated by the talent chronicled in these chapters. These individuals are a powerful source of inspiration to the youth, especially the many deserving young women who continue to break the glass ceiling in the private and public sectors."* By joining this initiative, advisors are given the opportunity to engage in discussions, share critical lessons learned, build innovative ideas and commit their knowledge and passion to nominees they select.

What type of profiles are you planning to feature in the book?

We hope to strike a balance between established figures, and comparatively newer industry disruptors. We are thrilled to partner with Dilmah Tea's non-profit organization, the Merrill J. Fernando Foundation (MJF) and the Foundation of Goodness to identify and feature promising young men and women from less privileged backgrounds throughout the chapters. We hope it will give them fantastic exposure to the Sri Lankan community at large, and will be crucial to cultivating a connection between young rural readers and the book's purpose. We are also in discussions with other

international organizations in Sri Lanka on how this project may increase its impact from a grassroots level.

What is the audience you are targeting? Are you also planning to launch a local version of the book?

Our dream is to see a copy of our publications in Sri Lankan households both on the island and internationally! While written by us, we hope that getting the public involved with the nominations will ensure we have a finished product regarded by Sri Lankans with pride on what we can achieve, both young and old. The book will first be published in English, but we hope to collaborate with the Sri Lankan government to distribute Sinhala and Tamil versions in textbook format to high schools across the country. We believe this initiative could support the current government's reforms in the education sector, by providing innovation to school curriculums. ■

For more information about the initiative, visit www.iaminspired.lk

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Back to Basics

From phones to paint brushes

UN staff test a new approach to team-building – with a socially responsible twist.

GELISE MCCULLOUGH, UNITAID

Digital technology helps people in all kinds of ways. For mobile phones in particular, as a communication tool, the opportunities for improving access to health care are huge. But an unexpected addition has now found its way onto this list – health promotion through painting.

In April 2016 a team at WHO received the Director-General's Awards for Excellence, in recognition of the work they and their colleagues have done to promote the use of mobile health solutions for NCD control. The initiative, *Be He@lthy, Be Mobile*, is a joint partnership with the International Telecommunications Union (ITU) and has been working with governments to scale up mHealth solutions for noncommunicable diseases (NCDs) and their risk factors. As part of the award they were offered a training opportunity on a topic of their choice.

You would assume that they would opt for something digital. But their choice was completely the opposite. Together

with ITU counterparts, they selected a day of artwork, run by a local program working to provide educational funding for girls living with HIV. Historically children born with HIV do not get equal opportunity to go to school, but today longer life expectancy makes education vital for improving their opportunities for employment and healthy life choices. Young girls are currently amongst those who suffer the most from limited access to education.

Since 2010 Gelise McCullough from UNITAID has been working in her spare time to raise awareness of the issue of education for HIV positive girls. Her Lean on Me Foundation uses proceeds from the sale of her own paintings and from teambuilding art workshops to pay for school fees and supplies for young girls in Kenya. In this short time she has seen the positive health benefits that secured schooling has had on these young girls, such as less time off sick and higher self-esteem.

It is a wonderful cause. But for a team whose commitment lay

in NCDs and digital, you might question the relevance. And yet the logic behind it is surprisingly simple – communication and collaboration.

By supporting a communicable disease initiative, the team highlighted the message of the Sustainable Development Goals: that NCDs and communicable diseases can work together. Since its founding in 2013, the *Be He@lthy, Be Mobile* initiative has worked to show that mobile health technology can support multiple disease agendas by being an agnostic tool. Its versatility is one of the reasons the technology is seen as a good investment for governments, since once the core infrastructure is established it can be tailored to target whichever public health issue is a current top priority.

The second reason, communication, is also a core theme of the initiative. Painting is one of the most elemental forms of communication between humans. It can overcome racial, social, chronological and economic divides. And by using mobile phones to improve access to health services, this is exactly what the team ultimately hopes to achieve – the creation of NCD services which anyone can access regardless of gender, geography or

socioeconomic status. It is a vision in line with the 2030 Sustainable Development Agenda promise for health care: to ensure healthy lives and promote well-being for all at all ages. This is a huge undertaking – but with as many phone subscriptions as people on the planet, it is one which mobile technology might just be able to help deliver.

On a basic level, the objective of the day was for the team to metaphorically create relationships with each other by physically creating communities – another symbol of connected living. Each painting was individual, allowing its author to develop their own style, but followed a common theme unifying all the individual pieces together. But far from just internal team-building, the activity was an exercise in relationship building in a much broader sense: between diseases, between people, and between cultures – mimicking the connectivity and collaboration mobile phones are beginning to bring to health care. ■

For further information on Gelise McCullough's work see her website: www.gelise.org

Ascension du Mont-Blanc

PASCALE TOUYÈRE, OMS

J'adore depuis toujours aller à Chamonix où il suffit de lever la tête pour admirer ce majestueux Mont-Blanc qui semble vouloir vous prendre dans ses bras. Un beau jour, je me suis dit: «Pourquoi pas moi? Un jour, j'irai au sommet du Mont-Blanc!». J'ai alors voulu mettre toutes les chances de mon côté pour réussir ce fabuleux projet, un peu fou, pour une néophyte comme moi. Je me suis préparée pendant 2 ans à cette fabuleuse ascension.

Mon premier 4000m fut le Grand-Paradis (4061m) en Italie, puis j'ai gravi une cascade de glace dans le Val de Rhêmes (bon entraînement pour le cramponnage et l'utilisation du piolet), le Wessmies (4017m) et l'Allalinhorn (4027m) en Suisse, suivi de l'Arête des Cosmiques (une ascension spectaculaire qui commence et se termine à l'Aiguille du Midi). Toutes ces courses ont été fabuleuses, mais mon plus beau souvenir restera à jamais l'ascension du Mont-Blanc, que mon guide, Antoine, avait sagement planifié sur 4 jours, du 1^{er} au 4 août 2016, pour espérer avoir du beau temps et pour une meilleure acclimatation aussi. Le premier jour, nous voilà parti pour le refuge de Tête Rousse, à 3167m d'altitude.

Le chemin est relativement facile, le première étape de ce fabuleux périple est franchi, je suis heureuse...

Nous passerons notre première nuit dans ce refuge, et tôt le lendemain matin, nous voilà en route pour la seconde étape en direction du Refuge du Goûter à 3815m d'altitude. La pente est bien raide, tout en rochers, il faut être concentré, ne pas glisser et passer le fameux couloir du Goûter aussi appelé «le couloir de la mort»...

Il y a comme un goût d'aventure à traverser ces quelques dizaines de mètres tant redoutés! La fin du parcours se fera dans un épais brouillard, après 3h de montée assez éprouvante et physique. Je suis très impressionnée de voir enfin de près ce magnifique refuge futuriste qui me faisait rêver et me semblait inatteignable vu d'en-bas...

Ma nuit sera sans sommeil dans ce refuge mythique, j'ai des maux de tête qui ne passent pas mais c'est le jour J, il est 1 h30 du matin, il faut déjà se lever... Le petit déjeuner sera pris sans enthousiasme (je n'ai pas très faim, un des effets de l'altitude), puis l'heure du départ arrive. Il est 3 h du matin et nous voilà encordé pour les 1000 m de dénivelé qu'il nous reste à gravir, à la



Sommet du Mont-Blanc (4810m)

lampe frontale dans cette nuit noire, jusqu'au sommet du Mont-Blanc.

C'est le grand Jour! Celui dont je rêve depuis plus de 2 ans... La montée est lente, mais régulière, le jour se lève lentement... L'arrivée au sommet à 8h00, après 5h de montée, est extrêmement émouvante, j'ai les larmes qui me montent aux yeux... Le temps est magnifique, la visibilité parfaite, nous restons environ 20 mn au sommet.

Je vis un moment magique, intense et inoubliable à 4810m d'altitude! Je n'ai qu'une chose en tête, vivre ce moment pleinement et ne jamais l'oublier, jamais... La joie, le bonheur est immense, je souris, embrasse et remercie

mon guide de m'avoir emmenée jusque là, c'est un moment d'éternité! Dans la descente, mon esprit vagabonde... je me surprends à rêver du toit de l'Afrique, le Kilimandjaro, qui culmine à presque 6000m. Alors je me dit: «Pourquoi pas moi? Un jour, j'irai au sommet du Kilimandjaro!» ■

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Surgery as a bridge to social justice

YIHAN LIN, HARVARD MEDICAL SCHOOL, BOSTON, USA
WALT JOHNSON, WHO



Dr Halfdan Mahler, DG of WHO (1973-1988), was a champion of primary health care that includes surgery.

In December 2016, the global community lost a beloved and well-respected member, Dr. Halfdan Mahler. Dr. Mahler served as the third Director-General of WHO from 1973 to 1988, and was the major inspiration for WHO to shift its focus to primary health care, highlighted by the Alma Ata Declaration. He saw health care for all as a moral imperative, and irrevocably changed the way that we all view health.

During his time as Director-General, Dr. Mahler also recognized the essential role of surgical care on the primary health agenda. He described surgery as the “most serious manifestation of social inequity in health care”, and emphasized that true primary health care cannot be attained without the provision of basic surgical care. He called for the distribution of surgical resources in countries to come under scrutiny, claiming that “social injustice is socially unjust in any field of endeavour, and the world will not tolerate it for much longer... The era of only the best for the few and nothing for the many is drawing to a close”.

More than 35 years later, this social injustice remains. A recent report by the Lancet Commission on Global Surgery revealed startling findings: more than 5 billion people in the world do not have access to basic surgical care. In addition,

the poorest third of the world's population only receives 6.5% of surgical services worldwide. And, while 33 million individuals face catastrophic health expenditure each year when seeking surgical and anaesthesia care, investing in surgical care is in fact affordable, saves lives, and promotes economic growth.

Fortunately, WHO has made significant strides in recent years to address this burden. In May 2015, WHA Resolution 68.15 was passed, focusing on strengthening emergency and essential surgical care and anaesthesia as a component of universal health coverage. This resolution received unanimous support from all Member States, highlighting the incredible need and strong political will to include surgery in strengthening health systems.

This call for action was both timely and critical, as surgical care is an integral part of achieving the United Nation's Sustainable Development Goals. SDG 3 – good health and well-being – has eight separate targets directly linked to resolution WHA 68.15. SDG 1 – ending poverty, SDG 8 – economic growth, and SDG 10 – reducing inequalities – are not achievable without a concomitant emphasis on surgical care and appropriate financing mechanisms. The World Bank published the Disease Control Priorities, 3rd Edition, Volume 1 *Essential Surgery*, which showed that the cost of basic surgical care is comparable to vaccinations and the provision of bed nets. Surgery is a necessary investment for all countries; although investment in scale up in low and middle income countries could cost USD 350 billion, the consequences of not doing

so is vastly more expensive, at USD 12 trillion.

Countries around the world are working in concert to develop strategic health plans specifically aimed at improving surgical access for national populations. The Emergency and Surgical Care (EESC) Programme at WHO, along with many other partners and funding bodies, has been working to provide technical expertise and coordination in this new but important field. WHO plays a critical role in ensuring the mandates of WHA Resolution are realized in countries that need it the most. This is done through strengthening broad-based health systems, which serves to improve health care as a whole, rather than within individual siloes. Focusing on surgical care will mean improvements in multiple areas of healthcare, for example, paediatric care. In Sub-Saharan Africa where 43% of the population is under the age of 14, increasing access to paediatric surgery will lead to increased health and prosperity for the next generation. Strengthening surgical care will also mean

improving trauma systems, as injury is a major cause of death around the world, with evidence that 68% of the surgically avertable burden of disease is injury³. The EESC programme is working with major international, regional, and local organizations to ensure that surgical care improves the entire health system, thereby greatly reducing premature death and disability.

Dr. Mahler initially framed surgical care as an issue of social justice. This will continue to be the underlying motivation for our goal to provide health care for all. However, beyond social justice, the issue of surgical care is now one of a financial imperative. The political case has been made through the WHA resolution and the SDGs, the economic case has been made through DCP3 and others, and the unprecedented global needs have been identified through many sources. In the words of Dr. Mahler, “Surgery cannot escape the political, social, and economic factors that influence all human endeavours”. The era of only the best for the few and nothing for the many MUST come to a close. ■

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Rally in Geneva

Calling for the ouster of the WIPO DG

Why would staff who do not even work for WIPO want to protest against the organization's DG in near-freezing temperatures?



© Laurent Chambost, WIPO

DIAB EL-TABARI, FICSA PRESIDENT

They would do this because it is time to say that enough is enough. The DG's behavior has been unacceptable, and staff members of various Geneva-based international organizations, including CGAS, the Geneva Community of Trade Unions, took a stand to call for his resignation. In a demonstration jointly called by FICSA¹ and CCISUA² on Wednesday, 25 January at Place des Nations, these staff members stood in solidarity with colleagues at WIPO and made statements of support in the effort to oust the DG.

This protest has been a long time coming. Over the past few years, WIPO's DG has displayed inappropriate and unacceptable conduct for someone in a position of power. Among this behavior is his dismissal of the former head of the staff council,

who blew the whistle on the DG for his involvement in transferring computer equipment to North Korea and Iran. In addition, staff members have been subjected to DNA theft, interference in procurement processes, and intimidation of those who chose to speak out. The DG has also attempted to shut down the elected staff council and replace it with one that is compliant to his leadership.

Leadership is a questionable term to use when describing the role of the DG. A true leader does not use fear and intimidation as motivation for his staff. A respectful and effective workplace cannot exist under such conditions. This demonstration not only called for the ousting of WIPO's DG, but it also served as a message stating that these abuses will not be tolerated by any organization, both now and

in the future. After all, today it is happening to WIPO staff, but tomorrow it could be any of us.

Among the speakers at the event were Miranda Brown, former WIPO strategic advisor, and Ed Flaherty, a local Geneva lawyer handling a number of WIPO cases. Brown described being forced to leave the organization after blowing the whistle on the shipping of computers by WIPO to North Korea and Iran. Flaherty spoke about the outrage that we should all be feeling in response to what is happening. This outrage can be utilized to create change and to take action.

When staff associations work together, we can successfully remove a threat to the wellbeing of our colleagues and prevent future threats to staff members in all organizations. Let's work together to oust the WIPO DG! ■

Various news articles have been written about the event, listed below. In addition, FICSA has posted a video documenting the rally on Youtube (<https://www.youtube.com/watch?v=Yh7XhQTIx8>).

UN staff demand ouster of controversial WIPO boss Francis Gurry (https://www.theregister.co.uk/2017/01/25/un_staff_demand_removal_of_controversial_wipo_boss_francis_gurry/)

UN Staffers Demand Ousting of Agency Head Accused of Corruption (<http://www.cnsnews.com/news/article/patrick-goodenough/un-staffers-demand-ousting-agency-head-accused-corruption>)

UN Staff Demonstrate against WIPO Director General (<http://nlipw.com/un-staff-demonstrate-wipo-director-general/>)

1. Federation of International Civil Servants' Associations
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Videoconference with interpretation

Why it is not as easy as it might seem



© Chris Wildt, CartoonStock.com

"Call the tech. Our new video-conferencing equipment needs adjustment."

**AMY BRADY, ANNE TARNAVSKI,
MONICA VARELA-GARCIA,
INTERPRETATION UNIT UNOG**

Videoconferences have become a part of our everyday lives. Even Skype and Facetime are basically videoconferences. At the UN, staff have been using videoconferencing for years, generally in a monolingual setting. However, videoconferencing in a multilingual setting with interpretation is another story.

Let's say that a UN Country Team or a National Human Rights Institution wants to make a contribution to a country review before a treaty body in Geneva. With current videoconferencing technology, they can make a 10 to 15 minute presentation during the meeting without having to travel to Geneva. This is called remote participation. You would think that having interpretation of these interventions is no big deal.

But here's the thing about videoconferences – although they are supposed to make our lives easier, the technology itself is not at all easy to use in multilingual meetings with interpretation. There are numerous technical parameters involved and many things can go wrong. The technology is highly unpredictable; it can work fine one day, but not the next. And positive experiences of videoconferences with interpretation are still rare.

Having interpretation for a videoconference adds to the technical complexity. Professional conference interpretation requires above average

acoustics and a stable signal, as interpreters are listening, processing information and speaking at the same time. Your usual FaceTime and Skype calls fall far short of these requirements: they have insufficient bandwidth, and frequent congestion and outages occur because you are on the public internet.

Making arrangements ahead of time with the Interpretation Service, on top of the other steps you usually take, can improve your chances of success. For that, you should contact us at Videoconfint@unog.ch, and we can explain a number of the requirements to be met, including sound and image quality, correct use of the technology and control of the environment.

Now let's have a look at the various types of teleconferencing available at the UN, what each type has to offer and what its limitations are.

One option that UNOG offers is an audio conference via an audio link. This is very convenient for the remote participant, who can take part in the meeting from their office using a telephone line. However, the quality of the sound has always turned out to be so sub-standard that interpretation for audio conferences has now been ruled out. In addition, there is no image of the remote participant, and interpreters rely a great deal on non-verbal information in conveying the message. This type of conference call is therefore best suited for a situation where the remote participant wishes to listen to the meeting

without intervening. But make sure you mute the phone – you wouldn't want a personal conversation to be overheard, or to fall asleep and have colleagues in the meeting room hear you snoring! (Yes, this has actually happened.)

A second option UNOG offers is to connect to the meeting from a computer. In this case, the UN will provide an internet link (Webex or Jabber Guest). With this option, the participant's image can be shown on a screen in the meeting room, which is a step in the right direction. However, there is one major drawback – the signal quality depends upon the speed of the internet connection at the exact time of the videoconference. Internet speed can vary a great deal, so even if a successful test is carried out beforehand, the sound and image quality at the time of the videoconference itself may not meet the levels required for the interpreters to be able to do their job. The sound and image also depend a great deal on the quality of the computer and equipment used at the other end. As a result, interpretation can never be guaranteed.

A third option is to use industry-standard equipment. For instance, you might have the possibility of using UN

premises at the other end. There is a good chance they have this kind of equipment, i.e., camera, screens for you to receive a good image of the main meeting and a dedicated line. This option generally provides for better sound and image quality. Unfortunately, these systems are most often delivered with spider phones or table-top microphones, which are completely unsuitable for interpretation.

That brings us to the topic of microphones. For interpretation purposes, microphones should be unidirectional and suitable for voice recognition. They should faithfully transmit all frequencies between 125 Hz and 15,000 Hz. You often see people videoconferencing with their laptop computers, or videoconferences with a handful (or even a roomful) of remote participants sitting around a table and using a spider phone or a table-top microphone. Unfortunately, all three of these types of microphones are omnidirectional, meaning that they pick up sounds coming from any direction; rustling papers or a squeaky chair can easily drown out the voice of the speaker. This is why these microphones are not suitable for videoconferences requiring interpretation. Hence the need for some adjustments to

be made in order to accommodate interpretation. For instance, spider phones and table-top microphones can be replaced by discussion systems or hand-held microphones.

Using the microphone properly during the videoconference is just as important as choosing the right one, so remote participants should always familiarize themselves with the instruction manual for their microphone. They should also test out their system to make sure they are using it correctly. Perhaps most importantly, remote participants must be sure to mute their microphones whenever they are not speaking. It may sound trivial, but un-muted microphones interfere with the UN's conference system and disrupt the meeting for everyone in the room.

Finally, the overall environment at the remote end must be carefully controlled. No one will be able to hear you if you are in an office with open windows facing onto a busy street, or if you put the microphone 3 meters away from you at the other end of the table! You should be in a room with curtains and blinds closed in order to avoid external light blurring the camera. Doors and windows should also be closed and there should be no unnecessary background

noise, such as air conditioning or people talking. Be particularly careful to avoid touching or tapping on the microphone, and shuffling papers right in front of it. Just talk directly into the microphone in a normal voice, and don't turn your head from side to side or move around while you are speaking. Incidentally, these same conditions apply to the recording of video messages that are to be shown during meetings, and we have guidelines about this.

With all of the technical parameters involved, we would not recommend that you attempt a videoconference on your own without seeking the assistance of a technician at your end.

Confronted for a long time by all these difficulties, the Interpretation Service saw that there was a need to take a proactive approach. This is why we have now developed a procedure to communicate with committees or groups who are preparing to hold videoconferences during their meetings and wish to arrange for interpretation. We have a dedicated email address (Videoconfint@unog.ch) where we can be reached and provide further information. All you need to do is contact us! ■

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Michael Møller, Directeur Général des Nations Unies de Genève, Christian Friis Bach, Secrétaire Général de la UNECE et Jean Todt, envoyé spécial de l'ONU pour la sécurité routière, ont essayé la mobilité autonome au Palais des Nations.

La mobilité du futur à l'essai au Palais des Nations

À l'occasion du 70^e anniversaire du comité en charge des transports intérieurs (ITC) de la Commission Economique pour l'Europe (UNECE), le Secrétariat a sorti le grand jeu. Sans un sou en poche pour cela, il a organisé une démonstration avec un véhicule autonome à l'intérieur même du parc du Palais des Nations Unies.

FRANÇOIS E. GUICHARD, LISA CALLENS, UNECE

Durant deux jours, lundi 20 et mardi 21 février, un véhicule hors du commun a transporté ministres et autres décideurs du monde des transports, venus pour la semaine anniversaire de l'ITC du 20 au 24 février. En effet, les délégués sont montés dans une navette et ont parcouru, à basse vitesse et en toute sécurité, le chemin entre le portail de Prégny et le bâtiment E. Les démonstrations étaient également ouvertes aux fonctionnaires présents sur le site. Dans le même temps, quarante ministres, originaires de tous les continents, ont mis l'accent sur la nécessité de passer la vitesse supérieure sur la mobilité autonome et sur le rôle de gouvernance de la Genève internationale sur ces nouveaux modes de transports lors de la conférence extraordinaire.

C'est sous un temps au beau fixe que la présentation s'est déroulée avec un véhicule de Car Postal Suisse SA de la marque Naveya. La navette possède toutes les autorisations requises pour circuler en Suisse. Elle a effectué sans peine un trajet en boucle de

plusieurs minutes entre les deux arrêts de bus des heures durant. Représentants de pays et fonctionnaires des Nations Unies se sont succédés dans le véhicule d'une dizaine de places. Debout ou assis, le voyage est resté confortable car la vitesse de croisière n'a pas excédé les vingt kilomètres par heure. Au démarrage, un sentiment d'appréhension s'est fait ressentir. La sensation de n'avoir aucun contrôle sur l'engin a été une expérience inédite pour la majorité des passagers. Mais elle a vite été remplacée par l'excitation de voir le véhicule réagir aux aléas du parcours en adaptant sa vitesse à la situation.

Une navette sans conducteur... Ou presque!

De fait, l'entreprise Naveya n'en est pas à son premier essai. En effet, il s'agit de la même navette qui circule à Sion depuis juin 2016. La firme, spécialisée dans les véhicules autonomes et électriques, a dépêché un ingénieur qui a travaillé pendant quatre jours pour la rendre capable de rouler sur un terrain non cartographié et semé d'embûches.

Le parcours est effectivement resté ouvert au public, tels que les cyclistes, les piétons, les diplomates pressés, ou encore les véhicules à l'arrêt sur son chemin. Le bilan de cette expérience est très positif pour les constructeurs de véhicules sans conducteur, car la technologie est convaincante. Seul un arrêt d'urgence pour faute de signal cohérent sur un capteur est à noter. Mais l'opératrice présente dans la navette, près de l'écran de contrôle, a su gérer la situation au mieux et a discrètement repris la main avec une manette de type jeux vidéo.

Ainsi, ce véhicule électrique et autonome a eu toute sa place lors du 70ème anniversaire de l'ITC. En effet, la UNECE est à l'origine de la réglementation internationale sur la sécurité routière, ou encore sur les véhicules, et la conduite assistée et autonome. Ces préoccupations se sont retrouvées au cœur de la présentation puisque la navette a impressionné ses occupants en s'arrêtant automatiquement aux passages piétons lorsque des personnes s'y présentaient. Cette démonstration a également été l'occasion

de sensibiliser les ministres à ces nouvelles technologies, aux progrès fulgurants déjà réalisés et aux challenges restants à adresser. Ils ont ainsi pu expérimenter une solution pour la mobilité autonome dite «du dernier kilomètre», couvrant par exemple la distance qui sépare le dernier arrêt de transport en commun de la destination finale du voyageur.

Des progrès technologiques à réaliser et une législation à développer

Dans les années à venir, la mobilité autour du Palais des Nations va être bouleversée, entre autre, avec la prolongation du tramway vers le centre des congrès Palexpo et plus de 700 fonctionnaires de diverses agences de l'ONU présentes à Genève vont arriver sur le campus du Palais des Nations. Dans ce contexte où la ville de Genève encourage une réduction du nombre de places de parc sur les lieux de travail, tous les moyens pouvant contribuer à faire face aux futures difficultés devrait être examinés. Ce genre de solution pourrait, par exemple, transporter des personnes à mobilité



La navette 100% autonome et électrique Navya était au Palais des Nations les 20 et 21 février.

©UNECE/Pierre Albouy

réduite pour réaliser le «dernier kilomètre».

A posteriori, cette expérience demeure fascinante aux yeux des testeurs, et cela même s'il reste des progrès technologiques à réaliser pour pouvoir se passer complètement d'un conducteur ou d'un opérateur humain en cas de problème. Elle démontre que les véhicules autonomes ne font plus seulement partie de la science-fiction et peuvent être affrétés pour de courts trajets fixes. La réglementation se devra alors de

progresser afin d'assurer la sécurité des passagers et des personnes hors de l'habitacle. Mais sur ce point, la UNECE répond présent! ■

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Natural healing clinics@ 400 metres below sea level

The Dead Sea at an altitude of -400 metres is endangered as it progressively dries out



EVELINA RIOUKHINA, UNOG

What kind of clinic can exist at 400 metres below sea level? What kind of doctors work there? What kind of medicine do they practise in such conditions and what exactly are they healing? Actually, it so happens that we know these clinics well, and there are no doctors, no medicine – it is nature itself that created this natural “hospital” or treasury of health, a place where you can heal all diseases simply because this place represents the richest natural “pharmacy”, full of important minerals, so vital for the body (actually, the whole of Mendeleev’s periodic table is here and this table is the chemistry of life!) These minerals increase immunity and give vitality to one’s body, recharging its health battery and regenerating all your cells with new life.

Paradoxically to the life-giving effect this place represents, its name is the total opposite – the Dead Sea. For long years it was believed that there were no living organisms here due to the high concentration of salt in the water of this lake situated in the middle of deserts and

serene mountains at the negative altitude of exactly 400 m below sea level on the border between Israel and Jordan, and this explains the name once given to it. Further discoveries and especially the treasure trove of minerals and the healing effect they produce changed its name to the “Living Dead Sea” or clinic of nature. What diseases can be treated here? All in fact. Dry air and minerals protect your lungs and treat asthma and the respiratory system, mineral-rich salt and mud are good for all today’s diseases – muscles, PC-induced pain, arthritis, joints, mobility, movement, back pain and bones. All require a special temperature (the best of all is warm to hot water between 39 and 42 degrees). And of course water itself is a great healer with such a high percentage of salt that it has condensed and is oily. One can just float or simply sit or stand “inside” the water.

In brief – water, salt, mud and air – those are the main healing components and ingredients that heal all, literally all, depending on the needs, indications and individual *mode d’emploi* of the patient.

Air is an important component, and in addition to its dryness – good for lung treatments – a very high percentage of bromine is good for stress and burnout, the nervous system and insomnia. The negative altitude also transforms the sun into a great healer. It stops UV rays that do not penetrate below zero, and despite the very high air temperature, your skin can only heal, with the body getting minerals and precious vitamin D from the sun without the risk of ever getting sunburnt.

We could go on forever about the healing effects of this miraculous place, but one word from its name is becoming more and more alarming, because despite the healing effects and the life it gives, the Sea itself is literally “dying” – drying out, with its volume almost reduced by half over the last decades. There is a high risk that in 50 years from now it could dry out completely. And those concerns have provoked a search for solutions on how to save the Dead Sea and not let it die. Among some proposals, it would appear that the latest project to create a canal from the Red Sea is

the most favourable, although controversial, as nobody can guarantee the effects it will have – whether it will save the Sea or put it at high risk of damage. Apparently, only fresh water without any other organisms can be added to the Sea and it quickly gets salinized. But there is not enough water in the deserts and the rivers nourishing the Dead Sea do not provide enough water. Today it is indeed on the brink of ecological disaster. So if you have never been – hurry up to see this natural phenomenon! It is disappearing at catastrophic speed and might not survive to the next generation. Not only will you heal yourself – going there twice a year for a week will save you from turning to doctors all year round – you’ll even be able to forget many of your diseases!

Chose the side of the Sea that you feel most comfortable with and do not delay your visit. You can easily travel there from Geneva with 3 to 4 direct weekly flights to Jordan or 2 to 4 direct daily flights to Israel. You can even get budget seats for as little as 28 CHF! ■

Career Counseling

An Inter-Agency success



From left to right, top: Elke Dervin (UNOG), Manuela Morelli (WHO), Beate Giff-Schmitt (WIPO); bottom: Emanuela Goerick (OHCHR), Jesus-Guerrero-Buitrago (UNOG), Dominique Norz (WIPO).

CAREER COUNSELLING INTERAGENCY GROUP (CCIG)*

Human Resources Management Services (HRMS) at UNOG were the originators of a recently launched career counseling programme initially intended for long-term General Service (GS) staff. The project began in 2014 with extensive data collection and analysis, including interviews of a randomly selected sample group. It showed that more than 50% of the interviewees – representing 50 long-term GS staff – would sign up for career development services if they became available. The idea was not only to empower these potential clients to take career-related decisions and ultimately enhance their motivation and job satisfaction, but also to benefit the organization. Three years on, an inter-agency working group has brought this programme to fruition with the aim of promoting meaningful succession planning, supporting the development of staff members, increasing the commitment and performance of individuals and ultimately, retaining high quality staff, especially in these uncertain times.

A well thought-out training programme was a prerequisite to success. UNOG identified an experienced career counseling and coaching specialist company. They had formerly trained not only UNOG Human Resources and learning professionals, but also staff from other UN entities worldwide. The latter saw the advantage of opening career development services such as these to their respective staff members. In April 2015, 10 human resources and learning professionals from ILO, UNICEF, UNOG, WHO and WIPO completed a Training of Trainers (ToT) course on Career Counseling and Coaching. The discussions on current career management and staff development needs that ensued resulted in the content of these Career Support and Personal Development workshops being offered to a wider reach of UN staff in Geneva – at both GS and Professional levels. Most UN entities are undergoing change right now. As well as implementing new strategic policies, including geographical mobility, these organizations are providing career support to the workforce and making

sure that it is equipped with the right skills, competencies and awareness to make meaningful career choices, in line with personal and professional goals.

Career counseling is delivered through workshops and one-on-one sessions and has received great feedback from participants. As one WIPO participant put it: "... our energy and thoughts were moved towards the right direction – it was a great fun experience!" Taking a step back from one's daily life to ask: "Who am I?", "What are my true personal values and strengths?" "How can I reach satisfying career goals?" is very useful in a time of budget cuts, high pressure and forced mobility for a majority of international staff in Geneva. The use of "unexpected techniques, such as drawing pictures and listening to music were surprisingly effective", stated one participant from WHO. Participants also appreciated the positive atmosphere of the workshops and the tone they set, encouraging them to pause, reflect individually and be challenged by unusual exercises. In twos with their peers, or in groups, they reflected on what they want and how to go about attaining it.

This new career counseling approach has not only created these workshops but fostered inter-agency cooperation among Geneva-based UN organizations. As much as possible, workshops are facilitated by trainers from two different UN entities and offered to a mixed group of participants. Based on the idea that inter-agency participation will encourage innovative ideas and

fruitful discussions, the mixture of backgrounds, career stages and personal goals has proven to be a key factor in their success. As one OHCHR participant said: "I really enjoyed the presence of WHO colleagues who added different perspectives to the more practical side of the course." From a trainer's perspective, it is amazing to see how a one-day workshop enables staff members to take meaningful actions towards a personal or professional goal. Participants seem to grow with each step they take! A total of 330 staff had benefitted from career counseling at the end of 2016. Statistics show, particularly at WHO, that most of the participants are women, on a career plateau, particularly at the P4 and G5-G6 levels, looking for new opportunities and challenges. Participants come from different departments and technical fields, which ensures animated exchanges and an enriching group experience.

Workshops have been successfully delivered since the beginning of 2016 in English and we are delighted to announce workshops in French as of spring 2017. These will better meet the needs of local staff members, as well as our initial GS target group. ■

* Beate Giff-Schmitt, Dominique Norz, Elke Dervin, Emanuela Goerick, Jesus Guerrero-Buitrago, Manuela Morelli, Sara Canna

If you are interested in learning more and/or contributing to this project, please contact: OHCHR: Ms Goerick (egoerick@unog.ch), Ms Redigolo (staffdevelopment@ohchr.org); UNOG: Ms Dervin (clm_mc@unog.ch), Mr Guerrero-Buitrago (jguerrero@unog.ch); WHO: Ms Canna (cannas@who.int), Ms. Morelli (mmorelli@who.int); WIPO: Ms. Giff-Schmitt (staff.development@wipo.int)

Bi-centenary of the Geneva Conservatory and Botanical Gardens



How it is today – state-of-the art digitalisation line that can scan 2,000 samples a day

A full programme of events will mark this milestone in the life of what is effectively the United Nations' next-door neighbour!

SARAH JORDAN, DEPUTY EDITOR

Habitually, at 12.30 on a weekday, I would be starting an English class at le Bocage. But not today! I am on *staycation*¹ in Geneva and about to visit the herbarium at the Conservatory and Botanical Gardens (CJB), one of my favourite outdoor spots in the city. I found out about the visit on the CJB website under the tab “Guided visits/ Botanical Variations”. To enrol was easy – I made a quick phone call to the CJB (e-mail also possible) – and here I am, waiting in the sunshine, along with 15 or so other enthusiasts, about to embark on a guided tour of the exhibition “The Multiple Lives of Herbaria”, which will take us out of the sunshine into underground vaults not usually accessible to the public.

Maybe, when you were young, you picked a pretty flower one day and then, to keep it forever, pressed it with a piece of tissue paper either side, between the pages of a thick and heavy book like a dictionary. Once flattened and dried, you may have stuck your specimen in a scrapbook and noted when and where you found it. You might even have added other specimens and built up a collection. Like stamp collecting, I'm not sure that this is something modern children do, but in the 1800s, it was a pastime and even a passion for some, known as naturalists. Augustin-Pyramus de Candolle was one of the most famous of these and founded the first botanical gardens in Geneva in 1817, in the Parc

des Bastions. It moved to its present site in 1904 and is now among the most prominent botanical institutions in the world: 28 hectares, fully organic since 2015, five buildings, six million samples in the herbarium, 70 research projects underway in Switzerland and abroad, and a library boasting 120,000 volumes. This year the CGB is celebrating its bi-centenary.

The visit to the herbarium began with our guide, Laurent Gautier, drawing our attention to some FAQs displayed on a red panel at the entrance to the exhibition, to which the visitor will find responses within. They are in French, but if I translate some of them for you, the exhibition's theme of “multiple lives” becomes clearer: “Does the herbarium contain extinct species?” “Do people still collect samples?” “Do people still use specimens?” “Aren't there more modern ways of conserving plants?” “Is there any DNA in dried plants?” “Can the seeds in the herbarium samples still germinate?” “Do people still find new species?” “Are herbariums still useful once the samples have been digitalised?”...

At the end of the visit, I did indeed have answers to these questions, but to many more too. Dried flowers have far more to them than meets the eye and science has transformed and extended their exploitation. For example, the when and particularly the where of my scrapbook example above, gets interesting when applied to



© CJB

How it used to be – samples of the blue passion flower



© Sarah Jordan

FAQs – to which the exhibition gives answers

6 million samples. The result is geographical data that allows botanists to predict where else a plant species may be found, thus enabling them to predict its migration further to climate change and better plan its preservation. And yes, there is DNA in plants, and it is possible to retrieve the full genome of a plant, even if it were picked 200 years ago. But no, unlike in the film Jurassic Park, when scientists re-created dinosaurs by extracting DNA from the blood contained in mosquitoes trapped in fossilized amber, it is not possible (yet) to resuscitate extinct flora. But seeds can and do germinate.

After passing through the vaults of the herbarium and hearing some marvellous and moving anecdotes about the dangerous and uncomfortable conditions in which 19th century naturalists often travelled the world over to find their samples... the visit ended with the very 21st century digitalisation machine that is currently methodically scanning all 6 million samples. Digitalised images are less fragile than samples and, in many cases, are sufficient for a researcher's needs.

Within the context of its 200th anniversary, the CJB has a whole series of events planned. You may have already seen the number 200 on the roof of the greenhouse, lit-up at night, but other important dates include a 200th birthday celebration open to the public over the weekend of the 20-21

May, in association with Museums at Night, and the official commemoration of the bi-centenary in the Parc des Bastions on 19 November. The CJB has also taken on a new visual identity with a new logo. In June, it will host the 6th World Congress of Botanical Gardens – the first time this event has been held in a French-speaking country, and, in addition to the exhibition I visited, which runs until the end of 2018 (so you've got time!) a new permanent presentation "Ethno-botanical Gardens" will be inaugurated on 26 June and two temporary exhibitions will pay homage to the CJB's charismatic founder under the name "A.-P. de Candolle: a passion, a garden" from 18 May to 15 October 2017.

Why not pop next door one lunchtime or summer evening and wish our neighbour a happy birthday and do yourself some good too? It's a perfect break from our screens and stress. There's a very nice café/restaurant too! ■

Further details: www.cjb-geneve.ch

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C'est du cinéma!

Du 17 au 28 mai 2017, un Festival franco-genevois à ne pas rater



SOLANGE BEHOTEGUY/UNCTAD

Directeur du Festival de Cinéma des 5 Continents et écrivain, élevé au biberon de Coluche, Desproges et Cabu, fan de Bruce Springsteen, bercé depuis son âge tendre au cinéma, Hervé Gransart aime toutes les formes artistiques, et cela se reflète dans la conception de l'unique festival transfrontalier (franco-genevois) qui se veut une plateforme multiculturelle. Le F5C traite de cinéma, mais on y trouve aussi des expositions de photographie, de sculpture, un village du monde avec piano bar, des spécialités culinaires à déguster entre deux films, des rencontres et du partage. 50 films seront projetés durant douze jours, c'est du cinéma... mais pas que.

Pour ce festival créé en 2005, la 12^e édition promet du lourd. Un thème tout d'abord: L'égalité des droits femmes/hommes. Puis un focus sur l'Inde, une des plus grosses industries du cinéma. Qui n'a pas entendu parler de Bollywood? Quel serait le rôle de la femme dans «le» ou «les» cinémas indiens? UN spécial fait un plan serré avec le directeur du F5C, provocateur et fidèle à ses passions.

Quel pont peut-on trouver entre le thème de cette édition et le choix du pays focus?

Cette année le thème est en lien avec le projet initié il y a deux ans avec la Mairie de

Ferney-Voltaire «Égalité des droits Femmes-Hommes: où en est-on?». Je fais partie du projet au titre de «cultures & cinémas», et dans le cadre du festival ce thème est pris sur le prisme du métier. Qu'est-ce que signifie d'être femme selon tel ou tel métier? Lors des conférences et différentes rencontres on aura l'occasion d'écouter les voix d'une distributrice, d'une réalisatrice et d'une auteure.

D'un autre côté, le pays focus retenu est l'Inde. Nous avons par le passé diffusé *The lunchbox*, *Titli*, et en 2016 *La Saison des Femmes* (Parched) pour lequel nous avons eu le bonheur de recevoir la réalisatrice Leena Yadav. On a découvert une société méconnue avec un film émergent, différent. Là on est loin de Bollywood.

Nous, on est des passeurs d'images, d'idées, de rencontres artistiques. Il n'en sortira peut-être rien, peut-être beaucoup... on espère du moins quelque chose. Tout ce qui arrive n'est pas de notre faute, mais ça peut le devenir si on se dit: «on ne peut rien faire, tant pis». Le cinéma permet de prendre conscience. Ceux qui viennent nous voir sont d'accord avec nous, c'est facile, c'est plus difficile de convaincre quelqu'un qui se dit «les femmes c'est fait pour s'occuper de la maison, des enfants».



Hervé Gransart

Quel est le rôle de la femme dans le cinéma Indien, ou plutôt quel est le portrait des femmes qu'on trouvera dans les films indiens sélectionnés pour cette édition?

On ne montre pas du Bollywood, on va montrer un cinéma social, d'auteur, où il y a une vraie violence psychologique, où vous voyez une vraie différence entre les gens qui sont très riches et ceux qui sont très pauvres. Et entre eux il n'y a pas vraiment de middle class.

Il faut être prudent, car les films faits par des hommes ou des réalisatrices femmes, ont forcément un prisme déformé, ils projettent aussi leurs envies. En général, il n'y a pas beaucoup de femmes chefs d'entreprise, de femmes qui ont pu s'affranchir. Ça reste une société très patriarcale, le poids de la religion et de l'histoire est très fort mais on voit aussi émerger chez les jeunes une culture différente.

Le cinéma présente parfois une image qui enjolive un peu parce que le réalisateur projette ses fantasmes, ce qu'il veut que la société devienne: il se nourrit de stéréotypes. C'est toujours embêtant un stéréotype. Le cinéma est un miroir un peu déformant. C'est comme un humoriste qui vous raconte les dimanches en famille, ça vous fait rire, vous pensez qu'ils sont

transposés, mais quand vous rentrez chez vous vous vous dites «c'est un peu moi quand même!» Et le cinéma c'est ça, il vous renvoie votre image gentiment ou pas, élégamment ou pas, violement ou pas.

Cinq films indiens ont été retenus pour cette édition: Lipstick Under my Burkha, A Billion Colour Story, Hotel Salvation, Death in the Gunj, Un Intouchable parmi les Morts. On montre un film sur l'antagonisme des religions entre les musulmans et les hindis, les réalisateurs Padmakumar Narasimhamurthy (A billion Colour) et Asil Rais (Un intouchable parmi les morts) seront présents, deux sur la place des femmes avec la présence de la réalisatrice de Lipstick Under my burkha, un autre qui est difficile à classer, sur un garçon qui est poète et ne trouve pas sa place dans la famille... sujet universel. Un mal être.

L'Inde c'est aussi 22 langues et 1652 dialectes, quelle sera la langue proposée par le F5C?

Ils sont tous en Hindi, sous-titrés en français.

Comme chaque année le Festival propose des projets nouveaux, parlez-nous de "Ciné-Cité"

Le festival évolue, c'est aussi un lieu de vie, une plateforme multiculturelle. Ciné-Cité est un projet qui me tient à cœur. Pendant dix jours 16 jeunes du quartier prioritaire de Ferney-Voltaire, dans le cadre de la Politique de la Ville (huit filles et huit garçons) vont choisir un thème, écrire un scénario, et produire un court-métrage, encadrés par un réalisateur professionnel, Jean-Marc Vincent. Le résultat sera présenté le dernier jour du festival. Peut-être qu'un jour l'un d'eux se dira «c'est ça que je veux faire dans la vie»... ■

Site: F5C.info ou F5C.ch

Page Facebook: [Festivaldes5Continents](https://www.facebook.com/Festivaldes5Continents)

L'appli du Festival – Pour consulter le programme en détail et en temps réel (pour les modifications éventuelles) à partir du 20 avril: <http://5continents.festicine.fr/guide/>

17 mai: Soirée Inaugurale à Ferney-Voltaire

du 18 au 27 mai: Ferney-Voltaire minimum 2 séances par jour

Vendredi 19 mai: Soirée NPNS Pays de Gex

Samedi 20 mai: Soirée bolivienne avec l'ONG «Voix Libres»

Dimanche 21 mai: 14h00 «Rencontres...» Cimade Pays de Gex en présence de la présidente de la Cimade Nationale. Thème: Les migrants

17h «Rencontres...» sur Égalité des droits Femmes-Hommes. Les métiers

Lundi 22 mai 17h «Rencontres...» Le cinéma Indien en 2017

Gex du 18 au 21 mai

Bellegarde du 18 au 23

Saint-Genis-Pouilly jeudi 18, lundi 22 et mardi 23

Versoix le 19, 20, 21 et 27

Grutli le 18, 23 (Soirée avec la Right Livelihood Award Foundation) et 24

28 mai: Soirée de Clôture à Ferney-Voltaire.

20 réalisateurs présents – 10 intervenants

Les deux dimanches à 13h, brunch offert par les organisateurs



© Claude Maillard

Dans l'enfer des « forçats du Karoum »

Éthiopie (2^e partie)

Le berceau du café

Après les hauts plateaux verdoyants du Simien culminant à plus de 4000 m d'altitude (voir UN Special du mois passé), place à une autre Éthiopie bien différente au climat beaucoup plus désertique et dont certains endroits sont situés bien au-dessous du niveau de la mer.

CLAUDE MAILLARD

Il n'y a qu'en Éthiopie (et dans l'État voisin de Djibouti) que l'on peut observer des volcans dont le sommet est à une hauteur négative. Ils se trouvent dans la dépression du Danakil située à -130 m d'altitude, résultat de l'effondrement de la croûte terrestre dans cette région. Mais, avant d'atteindre ce désert minéral en frontière avec l'Erythrée, la route est encore longue.

Le bus qui nous conduit dans le Tigré, à l'extrême nord de l'Éthiopie, a du mal à progresser, tant la piste est escarpée et recouverte de boue. En chemin, un long cortège funéraire nous oblige à patienter. Puis nous franchissons la rivière Tékésé qui se jette dans le Nil après avoir traversé le Soudan. Nous sommes passés soudainement d'une altitude de 4000 m à celle de 800 m, mettant à rude épreuve les freins de notre véhicule qui n'est pas de première jeunesse. Enfin, après 250 km de piste et une remontée à 2130 m d'altitude, Axoum est en vue. La ville de 40 000 habitants est située en bordure de la vaste plaine d'Azebo, au pied des monts Likanos et Zohado.

Axoum, capitale du royaume de la reine de Saba

Mentionnée dans des récits bibliques, coraniques et hébraïques, la reine de Saba aurait régné sur un royaume qui s'étendait du Yémen au nord de l'Éthiopie. Il est difficile d'imaginer qu'Axoum soit le berceau d'une des plus importantes civilisations de l'histoire éthiopienne. La petite ville rivalisa même en son temps avec les grands empires de l'époque jusqu'au VII^e siècle de notre ère. Les lieux regorgent de trésors et une journée est nécessaire pour les découvrir. Les grandes stèles, les obélisques, le réservoir de May-Shum, les tombeaux de Khaleb et de Gebré Masqal, le palais de Dongour, l'église Sainte-Marie-de-Sion..., autant de lieux chargés d'histoire à parcourir. Edifiée à l'emplacement même où s'élevait ce qui fut sans doute la première église d'Afrique, l'église Sainte-Marie-de-Sion (l'un des monuments les plus importants de l'Eglise éthiopienne) jouxte une étrange chapelle qui abrite la légendaire Arche d'alliance.

Debout bien avant le lever du soleil, nous nous retrouverons mêlés à des milliers de fidèles



Le rituel du café en Éthiopie, un moment fort agréable!



Labyrinthe de montagnes de sel dans la dépression du Danakil

qui progressent dans la ville, bougie à la main. De la foule s'élèvent des chants religieux. L'instant est prenant, bouleversant. Nous décidons de continuer notre escapade matinale. A plusieurs endroits stratégiques, des centaines d'hommes, armés de pioches, de pelles, de fourches... espèrent décrocher un petit boulot à la journée qui leur permettra de se nourrir. A quelques pas, des villageois découpent à même le sol des vaches dont les morceaux trouveront acheteur parmi la population locale.

Le rituel du café

Le brouhaha de la ville va faire place au silence des paysages désertiques qui nous attendent. Après la visite de l'église troglodyte d'Adi Kasho, une longue marche va nous conduire au pied d'un piton rocheux haut d'une centaine de mètres. A son sommet, taillée dans la roche et bien dissimulée, l'église Abuna Yamata Guh semble veiller sur toute la région où sont disséminés de rares villages. Nous y avons croisé quelques femmes et de nombreux enfants, curieux de nous voir et prenant un réel plaisir à jouer avec nous. Les hommes, quant à eux, nous attendent au pied de la falaise pour nous guider jusqu'à l'église. Car nous devons nous encorder, tels des alpinistes,

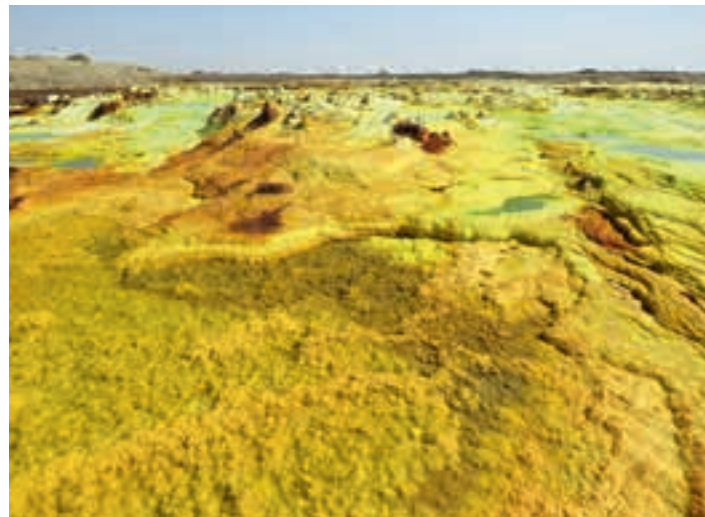
pour escalader la paroi verticale qui précède une vertigineuse corniche qui donne accès au lieu saint. Du haut la vue à 360° est grandiose.

Une fois redescendus, notre guide Hailé nous recevra chez lui où son épouse nous conviera à la cérémonie du café. Pour un expresso, il eut fallu s'adresser ailleurs, car ici le rituel dure plus d'une heure! Il faut d'abord griller les grains de café dans une petite poêle posée sur quelques braises, puis les concasser dans un mortier avant de pouvoir préparer le fameux nectar dans une cafetière en terre cuite. Mais cela vaut la peine de patienter un peu. Accompagné d'ambacha (pain maison) tartiné de miel d'acacias, c'est sans aucun doute le meilleur goûter auquel nous avons été conviés. Berceau du café (Les caféiers y poussaient à l'état sauvage bien avant l'existence de l'homme), l'Éthiopie est le premier producteur africain d'arabica et le cinquième producteur mondial, tous crus confondus.

La fin de cette trépidante journée sera consacrée à la découverte d'une autre église, celle d'Abreha Atsbeha.

Les «forçats du Karoum»

De Wukro, gros bourg implanté



Le volcan Dallol unique au monde avec ses teintes multicolores

aux abords d'une plaine fertile, la piste qui conduit à la dépression du Danakil a été, au fil des éruptions volcaniques, souvent recouverte de lave. Pour cela, trois gros 4x4 nous attendent devant notre hôtel. Le temps que nos nouveaux véhicules soient équipés, nous nous attardons près de l'église de Qirkos où un mariage et un baptême sont célébrés. Puis nous nous fondons dans la foule des villageois qui arpentent le marché local haut en couleurs avant de rejoindre Beahale où Anne-Marie, la benjamine du groupe, s'essaie à la confection de la galette Injera. Nous sommes en pays Afar, région au climat aride, avec des températures très élevées atteignant plus de 50 degrés dans le secteur allant de la chaîne volcanique de l'Ertale au lac salé du Karoum.

C'est justement dans ces lieux très spectaculaires et hostiles que nous allons vivre les jours à venir. Arrivés à Ahmed Ela, village isolé fait de cabanes construites en branchages, nous constatons que c'est le dénuement le plus total. Ici, en bordure du lac salé du Karoum, la vie des ouvriers chargés de récolter le sel se résume au strict minimum. Après avoir distribué vêtements, savons et jouets aux familles, nous installerons notre campement en

plein air et dormirons à la belle étoile. Au loin, le volcan Dallol, tel une île volcanique plantée au cœur de l'immense désert de sel est unique au monde avec son site d'évaporites aux couleurs variées et surprenantes. A quelques encablures, un massif formé de montagnes de sel, aux formes tourmentées et bien étranges, constitue un labyrinthe où nous prendrons le temps de déambuler. De nombreux lacs et vasques aux eaux bouillonnantes bordent la piste qui mène à l'endroit où s'affairent les «forçats du Karoum».

Dans des conditions inhumaines, par des températures extrêmes, sans la moindre protection, les hommes découpent de lourdes plaques de sel qu'ils débitent ensuite en briquettes au moyen d'une petite hache au manche curieusement recourbé. Puis, chaque pain de sel est arasé afin d'obtenir des morceaux parfaits d'environ 12 kg qui seront transportés par dromadaire jusque sur les hauts plateaux où ils trouveront acquéreur.

Prochaine étape sur l'Ertale, l'un des volcans les plus inaccessibles de la planète, dont le lac de lave en fusion atteint une température de 1200°C. Aventure à vivre dans le prochain numéro du *UN Special*. ■

Geneva, May 2018

The National Summer Games of Special Olympics

ELIZABETH BÖHLER-GOODSHIP,

PRÉSIDENTE, ASSOCIATION GE2018

From 24th to 27th May 2018, Geneva will host the National Summer Games of Special Olympics. To bring the event as close as possible to the population, the Games will be based in the heart of the city with the Olympic Village in the centre of town on the Plaine de Plainpalais and the opening ceremony in the Parc des Bastions, close to the Reformation Wall. The 13 competitions* are to take place at main sporting venues. Almost 2'000 athletes from all over Switzerland and its neighbouring regions are expected to participate with their 700 coaches and a dedicated army of 1'200 volunteers. The event is about friendship, sharing, willpower, self-fulfilment and mutual respect. It is a serious sporting competition. It is also about having fun.

Over the past fifty years, Special Olympics has become the largest international sports movement for people with intellectual disabilities. There are local games, Regional games, National and World Summer and Winter games, the last of which took place in Schladming, Austria in March 2017. A roaring success by all accounts.

Beyond the competition the aim of these games is to permit people to consider intellectual

disabilities in another light, to see the person and not just the handicap. Such sporting events can be important stepping-stones to better integration into communities, schools and the workforce.

Through its Healthy Athletes programme, Special Olympics has become the largest global health organisation dedicated to serving people with an intellectual disability. Because being healthy is not just about being physically active, during the Games free health exams are available for all the athletes. Emphasis has been put on vision and hearing but Geneva hopes to broaden its health programme.

The Geneva National Summer Games are organised by a committee of 11 volunteers, backed by Special Olympics Switzerland and the invaluable financial and logistical assistance of the Canton, City and communes. A number of private foundations and companies have also offered their support. They have been joined by a host of young and enthusiastic sports patrons including



National Games in Switzerland, Bern, 2014

© PPR Media relations AG

members of recent Swiss Olympic teams. To name but a few, Lucas Tramer, Swann Oberson, Julianne Robra and Céline Van Till, herself a paralympian.

These games are also about getting young people involved. Public and private schools will be sending volunteers. The organising committee invited the students of the Geneva University of Art and Design (HEAD) to create its communications and graphic lines. An effort has been launched to encourage junior sports teams to include young people with intellectual disabilities in their training programmes and, where possible, competitions.

Of course, the wish is also to involve all the population, including those working in the international sector, be it as spectators at the different events or as volunteers to help at one of the venues. As of 24th May 2017, it will be possible to sign up as a volunteer for all or part of the Games. Language skills and sporting knowledge might be a plus but the desire to partake in a special adventure

over a few days or hours and to meet others, are paramount.

Should a member of your family wish to compete in one of the competitions, he or she should be registered by 31st August 2017 at the latest.

A sporting event is about emotions, private and shared. As with all Olympic games, at the National Summer Games in Geneva there will be an Olympic flag, an Olympic flame, a torch relay and an athletes' oath. For Special Olympics it is "Let me win. But if I cannot win, let me be brave in the attempt." That oath is a lesson unto itself. Over the years, it has inspired a multitude of communities to support the organisation and countless numbers of athletes to participate no matter what challenges they may face.

Do join in! ■

For more information: www.ge2018.ch

* The sports contested at the Games (swimming, judo, table tennis, bocce, sailing, golf, athletics, tennis, football, basketball, cycling, equestrian, pétanque) are to take place at main sporting venues.

Message du rédacteur en chef

Vous aimeriez partager votre opinion sur le magazine et son contenu ?

N'hésitez plus et écrivez-nous !

Nous serions heureux de recevoir votre avis.
Les plus pertinents, les plus intéressants, les plus originaux seront publiés dans le magazine.

Si vous souhaitez proposer un article, n'hésitez pas à me contacter à tout moment.

Et maintenant, à vos plumes !

Adressez vos commentaires à :

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Would you like to share your opinion about *UN Special* and its contents ?

Write to us!

We will be glad to hear from you.
The most interesting, relevant, or even ingenious responses will be published in the magazine.

Should you wish to submit an article, please do not hesitate to contact me at any time.

Now, put pen to paper!

Send your thoughts to:

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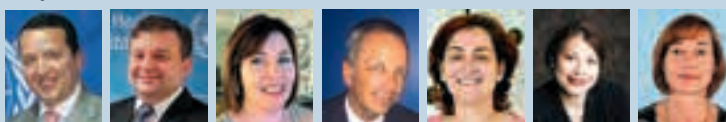
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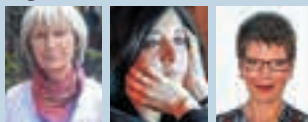
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