**106th Session** **Judgment No. 2786**

THE ADMINISTRATIVE TRIBUNAL,

Considering the complaint filed by Mr J.R. D. against the World Health Organization (WHO) on 4 October 2007, WHO's reply of 14 January 2008, the complainant's rejoinder of 12 February and the Organization's surrejoinder of 27 March 2008;

Considering Articles II, paragraph 5, and VII of the Statute of the Tribunal;

Having examined the written submissions and decided not to order hearings, for which neither party has applied;

Considering that the facts of the case and the pleadings may be summed up as follows:

A. The complainant, an Indian national born in 1959, is a former staff member of WHO. He was appointed in the Organization's Regional Office for South-East Asia (SEARO) as a messenger at grade ND.1-B on 1 July 1987.

On 30 October 2002 he submitted a health insurance claim in the amount of 49,240 Indian rupees in respect of his son's hospitalisation in New Delhi for a hernia operation from 19 to 28 August 2002. The Budget and Finance Officer asked the Regional Staff Physician

on 27 November 2002 to verify the authenticity of the claim. The physician asked the complainant by a letter of 2 January 2003 to bring his son to the Medical Services on 7 January. The complainant failed to do so and on that day was requested by a further letter to bring his son the following day. On 8 January he reported to the Medical Services without his son and on 9 January he went on sick leave from which he returned on 22 January. In the event, the complainant brought his son to the Medical Services on 28 January. The physician examined the boy and concluded that he had indeed undergone surgery but that the surgical wound did not appear to be more than 10 to 14 days old. With a view to obtaining a second medical opinion, the boy was examined on 31 January by a Consultant Surgeon, who concluded that the surgical site was of recent origin and definitely not more than two to three weeks old.

By a memorandum of 12 February 2003 the Director of Administration and Finance notified the complainant that the Regional Director had decided to suspend him with pay pending completion of an investigation into allegations of fraud regarding the claim he had submitted for his son. In a letter of 14 March the Director of Administration and Finance gave details of the allegations. He asserted, inter alia, that the complainant had confessed to the Regional Staff Physician on 8 January 2003, in the presence of the Clinical Nurse, that it was not his son but another relative who had undergone surgery in August 2002. He also asserted that in light of the opinion of the physicians who had examined his son, it could be concluded that his claim was fraudulent and also that he had subjected his son to unnecessary surgery to conceal the fraud. Consequently, if the allegations were proven, the complainant could be charged with misconduct and subject to disciplinary action. He invited him to reply in writing. In his response of 22 March 2003, the complainant denied having at any time confessed that the surgery was not performed on his son but on another relative. He characterised the opinions of the physician and the Consultant Surgeon as biased and requested that a medical opinion from an independent physician acceptable to both

parties be obtained. He enclosed a certificate from the Medical Director of the New Delhi hospital, in which his son was allegedly hospitalised, to the effect that a hernia operation had been performed on the latter on 20 August 2002. The complainant's request for a third medical opinion was rejected on 2 April 2003.

By a letter dated 4 April 2003 the Director of Administration and Finance informed the complainant that in the course of the investigation the Office had uncovered two other potentially fraudulent health insurance claims submitted by him on 18 October and 21 September 2000 concerning the hospitalisation of his mother and his wife, respectively, at a hospital in Noida. He stated that, according to the hospital's records, no patient had been admitted under either his mother's or his wife's name during the periods indicated in the claims, and noted with regard to the first claim that in spite of the large amount involved, namely 177,485 rupees, the complainant had not requested a letter of credit prior to his mother's hospitalisation, as is the normal practice in SEARO. He invited him to reply in writing and again drew his attention to the fact that disciplinary action might be taken against him for misconduct. In his reply dated 21 April 2003 the complainant denied the allegations of attempted fraud, maintaining the veracity of his claims with respect to both his mother and his wife and asserting that the corresponding bills and receipts had been submitted to the Office. He explained that the former claim was not entertained, but that his mother had refused to pursue the matter. He suggested that the enquiry be directed to the Noida hospital, which was solely responsible for maintaining proper records.

By letter of 30 April the Regional Director informed the complainant that he had failed to provide a credible explanation to the charges levied against him and that consequently he would be dismissed with effect from 8 May 2003 for misconduct, which consisted in the submission of fraudulent health insurance claims in respect of his son and his wife and participation in attempted fraud in respect of his mother's claim. He reiterated that the complainant

appeared to have subjected his son to unnecessary surgery to conceal the fraud. He indicated that the complainant would be paid one month's salary in lieu of notice, but no indemnity.

The complainant appealed against that decision to the Regional Board of Appeal in July 2003, on the grounds of incomplete consideration of facts and failure to observe the provisions of the Staff Regulations and Staff Rules or the terms of his contract. In its report of 2 July 2004 the Regional Board of Appeal held that there was no conclusive evidence of the alleged fraud and recommended that the decision to dismiss the complainant be quashed, that he be reinstated in his position with back pay, that he be paid costs in the amount of 1,000 United States dollars, and that his claim in respect of his son's hospitalisation be reimbursed. The Regional Board noted that as the claim for his mother was filed by her in her individual capacity, it was not related to the complainant's appeal. By letter of 17 August 2004 the Regional Director notified the complainant that he did not concur with the Regional Board's recommendation and that based on the facts surrounding his claims with respect to his son and his wife, he had decided to uphold his decision to dismiss him.

On 8 September 2004 the complainant appealed against the decision of 17 August 2004 to the Headquarters Board of Appeal, which concluded in its report of 7 October 2005 that the Administration had failed to prove fraud beyond reasonable doubt. It considered that there were still questions for which no answer had been provided, and that it could therefore not agree with the Regional Director's decision in good conscience. It thus "reluctantly concur[red]" with the recommendation of the Regional Board of Appeal and urged the Administration to adopt procedures for resolving conflicts or ascertaining the veracity of claims and to establish a committee to oversee disciplinary procedures so as to ensure due process to the staff involved. In response to a request from the Director-General for further clarification regarding the claims submitted by the complainant in respect of his mother and his wife, the Headquarters Board of Appeal stated in an addendum to its report that it had not been proven beyond reasonable doubt that the bills and receipts presented in support of these claims were fraudulent. It thus maintained its recommendation

as formulated in its report, noting that it did not have the capacity to explore the issues in sufficient depth and that any further investigation should be conducted by "more appropriate authorities".

By letter of 5 May 2006 the Director-General notified the complainant that he had requested the Office of Internal Oversight Services to review all available documents, to conduct a further investigation if necessary and to advise him on the outcome of its review. On 26 January 2007 the Director of the Office of Internal Oversight Services forwarded to the complainant the information gathered and the allegations formulated in the course of the investigation and invited him to respond in writing. In a letter to the Director-General dated 27 February the complainant categorically denied the allegations against him of fraudulent conduct as unsubstantiated. Emphasising the hardship caused to his family by his dismissal, he requested that the appeal proceedings be concluded without delay and that a decision be taken. He reiterated that request on 20 April and 1 July 2007. In his complaint with the Tribunal, which was filed on 4 October 2007, he indicated that the Director-General had failed to take a decision on his appeal. By letter of 4 January 2008 he was informed that the latter had decided to reject his appeal in its entirety.

B. The complainant submits that the decision to dismiss him was arbitrary and abusive. He asserts that the Organization did not establish beyond reasonable doubt its allegations of fraudulent conduct, and that it thus failed to discharge the burden of proof.

He accuses the Administration of bias, arguing that it refused to take into account the certificate issued by the Medical Director of the New Delhi hospital and the various bills, receipts and prescriptions he submitted in support of his claims, or to seek the opinion of an independent physician mutually agreed to by both parties. Instead, it based its allegations on questionable evidence, namely a note for the record prepared on 8 January 2003 by the Clinical Nurse and the statements from the Chief Executive of the Noida hospital, which, he argues, cannot be taken at face value in light of the press reports concerning that hospital's alleged involvement in an organ-trading

racket in which hospital records appeared to have been forged. Moreover, he holds that the Administration had no right to launch an investigation into long-settled claims, such as the claim in respect of his mother, which have no relevance to the charges brought against him.

Relying on the Tribunal's case law, the complainant asserts that he was not afforded due process because of the Organization's failure to comply with WHO Manual provisions. In particular, the charges against him were imprecise and he could not prepare his defence properly. He argues that, insofar as he was dismissed on the basis of unsubstantiated charges, he was not given the benefit of the doubt. Furthermore, he was not notified of the Administration's intention to terminate his appointment, neither was he given the opportunity to plead against the envisaged penalty. He points to a number of procedural flaws and contends that the Organization is responsible for the inordinate delay in the internal appeal proceedings.

The complainant requests that the decision to dismiss him be set aside and that he be reinstated effective 8 May 2003 with retroactive payment of salary and other entitlements, together with interest. He also requests that his claim of 49,240 rupees in respect of his son's hospitalisation be reimbursed. He seeks 18,000 United States dollars in moral damages for the Administration's delay in concluding the internal appeal proceedings, 6,500 dollars in legal costs and such other relief as the Tribunal considers fair.

C. In its reply the Organization submits that the complaint raises issues of receivability, because instead of challenging the implicit rejection of his appeal, the complainant challenged the fact that the Director-General had taken no decision at the material time. It nonetheless declares that it will not object to the complaint's receivability, if the Tribunal considers it as being directed against the Director-General's express decision of 4 January 2008.

On the merits WHO asserts that the decision to dismiss the complainant was based on a thorough assessment of the evidence and that it was fully justified given the seriousness of his offence. It

considers that it was entirely appropriate for the Administration to rely on the note for the record prepared by the Clinical Nurse as well as the opinions of the Regional Staff Physician and the Consultant Surgeon, both of whom examined his son, and to reject the request for a third medical opinion. It denies that it failed to discharge the burden of proof, arguing that it was for the complainant to prove the authenticity of his claims, following the Noida hospital's denial that his wife and mother had been admitted there.

The Organization emphasises that the complainant was formally informed not only of the charges brought against him, but also of the potential consequences in the event that he was found to have committed misconduct. He was given ample opportunity to reply before being dismissed and the evidence submitted in his defence was duly considered. Furthermore, it asserts that the charges levied against him were clearly worded and supported by all available documentation. It considers the question of the benefit of the doubt irrelevant, since there is no doubt, in its view, that the complainant committed fraud. WHO submits that it fully complied with all procedural requirements, and that the delay in the internal appeal proceedings is not attributable to a lack of interest or diligence on its part, but rather to objective difficulties encountered in the course of the proceedings.

D. In his rejoinder the complainant presses his pleas. Drawing attention to the unanimous conclusions of both the Regional and the Headquarters Boards of Appeal, he reiterates that the charges of fraudulent conduct were never established in an adversarial procedure or proven beyond reasonable doubt.

E. In its surrejoinder the Organization maintains its position.

## CONSIDERATIONS

1. The complainant was dismissed for misconduct on 30 April 2003 with effect from 8 May 2003. An internal appeal to the Regional Board of Appeal resulted in a recommendation that the decision

to dismiss the complainant be quashed, that he be reinstated and that other consequential relief be granted. The Regional Director rejected that recommendation on 17 August 2004 and the complainant then appealed to the Headquarters Board of Appeal which, in its report of 7 October 2005, "reluctantly concur[red]" with the recommendation of the Regional Board of Appeal. As the Headquarters Board addressed only one of the allegations upon which the charge of misconduct was made, it reconvened at the request of the Director-General. In an addendum to its report it maintained its earlier recommendation, expressed the view that it did not have the capacity to explore the issues in sufficient depth and recommended that any further investigation should be conducted by more appropriate authorities.

2. On 5 May 2006 the Director-General notified the complainant that he had requested the Office of Internal Oversight Services to review all available documents and, if necessary, to conduct a further investigation. On 26 January 2007 the Director of the Office of Internal Oversight Services provided the complainant with various documents relating to the issues not dealt with by the Headquarters Board of Appeal and asked for his written response. The complainant provided his response to the Director-General in a letter of 27 February and, having heard nothing further, he requested on 20 April and, again, on 1 July that the appeal proceedings be concluded without delay and that a decision be taken. On 4 October 2007 he filed his complaint. Finally, on 4 January 2008 the Director-General informed the complainant of her decision to reject his appeal in its entirety and to confirm his dismissal. WHO suggests that the complaint is irreceivable but raises no objection to it being considered as directed against the decision of 4 January 2008.

3. Before turning to the substance of the complaint, it is appropriate to note that, as WHO did not reply to the complainant's enquiries of 20 April and 1 July 2007, it clearly appeared by 4 October of that year that a decision would not be taken within a reasonable time and thus, in accordance with the Tribunal's case law, the complaint is receivable (see Judgments 408, under 1, 451, under 8, 499 and 1243,

under 16). For the sake of convenience, however, the Tribunal will consider the complaint as directed against the express decision of 4 January 2008.

4. The misconduct alleged against the complainant in the letter of 30 April 2003 was that he submitted two fraudulent health insurance claims, one with respect to his son and the other with respect to his wife, and that he colluded in the submission of a fraudulent health insurance claim in respect of his mother. Although last in point of time, it is convenient to deal first with the claim concerning his son.

5. The complainant submitted the claim in respect of his son on 30 October 2002, along with supporting documents. The claim was for surgery performed in a New Delhi hospital in August 2002. Suspicion was aroused because the complainant had asked for neither a letter of credit nor immediate reimbursement. Attempts were made by the Administration in December 2002 to discuss the matter with the Medical Director of the New Delhi hospital, but without success. On 2 January 2003 the Regional Staff Physician wrote to the complainant requesting a meeting with him and his son on 7 January. Neither the complainant nor his son attended the meeting and a further meeting was arranged for 8 January. The complainant reported to the Medical Services alone on 8 January and allegedly confessed that the surgery had not been performed on his son but on another relative. The physician maintained his request to see the son who, eventually, attended for a medical examination on 28 January. Following that examination, the physician reported that, although there was a surgical incision, he could "categorically state that the surgical wound did not appear to be more than 10 to 14 days old". With a view to obtaining a second medical opinion, the complainant's son was examined on 31 January by a Consultant Surgeon who concluded that the surgical site was "of recent origin and definitely not more than two to three weeks old". Soon afterwards, the complainant was suspended from duty.

6. On 14 March 2003 the Director of Administration and Finance notified the complainant that he could be charged with misconduct leading to disciplinary action by reason of his submitting a fraudulent health insurance claim and subjecting his son to unnecessary surgery to conceal the fraud. The complainant replied on 22 March, denying that he had confessed that his son had not undergone surgery and that it was another relative who had done so. He claimed that he had been misunderstood when he asked the physician "if not [his] son d[id] he consider that another relative of [his] had been operated upon". At the same time he provided a certificate from the Medical Director of the New Delhi hospital stating that:

> "[a] hernia operation was performed […] on [V. D.] age 14 years on 20.8.02 at [the New Delhi hospital]. He was admitted [from] 19.8.02 to 28.8.02. This is confirmed as per the documents held in this [hospital]."

The complainant also requested that further medical opinion be obtained from "an independent source acceptable to both […] parties". His request was rejected.

7. The events relating to the complainant's son prompted investigation of other health insurance claims. By letter of 4 April 2003 the complainant was notified of two other matters which could result in his being found guilty of misconduct leading to disciplinary action as set out in Staff Rule 1110.1. It was alleged that on 18 October 2000 the complainant had submitted a health insurance claim on behalf of his mother, an independent beneficiary of the Organization's Staff Health Insurance, for hospitalisation at a hospital in Noida from 18 July to 2 August 2000 and had thereby actively participated in an attempted fraud. Attached to this letter was a statement by the Chief Executive of the Noida hospital that there had

been no admission under the name of the complainant's mother during the stated period. The second matter concerned a claim for the hospitalisation of his wife at the same hospital from 8 to 15 July 2000. Again, there was attached a statement from the Chief Executive stating that there had been no admission under his wife's name in the relevant period and that no bill or receipt had been issued to her. The complainant replied on 21 April 2003, denying that the claims were fraudulent and asserting that it was for the Noida hospital to explain why it had no records for the admissions in question. As earlier indicated, the complainant was informed on 30 April that it had been determined that he had committed misconduct in relation to all three claims and that he would be dismissed. However, the Regional Director's decision of 17 August 2004 rejecting the complainant's appeal to the Regional Board of Appeal was based only on the claims with respect to his wife and son. As that was the decision that was appealed to the Headquarters Board of Appeal, which appeal was later rejected by the Director-General, it is not necessary to deal with the merits of the issue concerning the health insurance claim submitted by the complainant on behalf of his mother.

8. The complainant advances several arguments in support of his contention that the decisions to dismiss him and, later, to reject his appeals should be set aside. It is necessary to consider only two, namely, absence of satisfactory proof and failure to observe the requirements of due process. The latter argument encompasses both the process by which he was initially found guilty of misconduct and the referral to the Office of Internal Oversight Services of the matters relating to his wife and mother, after the Headquarters Board of Appeal had made its recommendation.

9. In relation to the question of satisfactory proof, it is to be noted that, in cases of dismissal, the staff member must be given the benefit of the doubt (see Judgment 635, under 10). Further, when misconduct is denied, it is for the Administration to prove it and to prove it beyond reasonable doubt (see Judgment 969, under 16).

10. Both the Regional and Headquarters Boards of Appeal were of the view that the allegation in respect of the complainant's son had not been satisfactorily established, it being said by the Headquarters Board of Appeal that it was left "with unanswered questions and doubts" and, thus, "could not in good conscience agree with the decision of the Regional Director". It is not disputed that, as stated in the certificate of the Medical Director of the New Delhi hospital, surgery was performed at that hospital at the time specified in the health insurance claim on a male person, aged 14, who answered to the same name as the complainant's son. Because an incision was later observed on the body of the boy, the claim of misconduct as propounded by WHO included the claim that he subjected his son to unnecessary surgery to conceal his fraud. Leaving aside, for the moment, the evidence on which WHO relies, that hypothesis requires examination. It would require the complicity of the son, possibly also of his mother, and that of a surgeon prepared to perform the unnecessary operation and, presumably, that of an anaesthetist. Moreover, as it is to be accepted that surgery was performed on a young male who must have been known to the complainant, it would have been much easier for him to produce that person and pass him off as his son than to engage in the elaborate deception asserted.

11. Although WHO relies on the complainant's alleged confession and the opinions of the Regional Staff Physician and the Consultant Surgeon, there are problems with that evidence. As regards the alleged confession, the complainant offers a different version of what was said from that reported by the physician and the Clinical Nurse who was then present. It is clear from the accounts of those two persons that, at the time, the complainant was in a highly agitated state – a state that, in the circumstances, is not necessarily evidence of guilt. Given his state, it is at least possible that, as he said in his response of 22 March 2003 to the Director of Administration and Finance, his question was misconstrued as a statement. Further, the accounts of the alleged confession did not reproduce verbatim what was said and the complainant was not given an opportunity to test the

evidence before the Regional Director determined that he was guilty of misconduct.

12. So far as concerns the findings of the physician and the Consultant Surgeon, the complainant was not given an opportunity to test whether there were explanations for the appearance of the wound consistent with earlier surgery. Nor was he given an opportunity to test the opinions expressed, as the Administration rejected his request for a third medical opinion on the basis that there was "no reason whatsoever to doubt the authenticity of [the] findings". The Administration noted in that respect that it had "full trust in the integrity and judgment" of the Regional Staff Physician, that the Consultant Surgeon was "an independent senior surgeon who [was] not associated with WHO" and that it was too late to request a third opinion. So to state was to assume the guilt of the complainant without giving him an opportunity to test the medical opinions proffered against him.

13. Due process requires that a staff member accused of misconduct be given an opportunity to test the evidence relied upon and, if he or she so wishes, to produce evidence to the contrary. The right to make a defence is necessarily a right to defend oneself before an adverse decision is made, whether by a disciplinary body or the deciding authority (see Judgment 2496, under 7). As indicated above, the complainant was not given a proper opportunity to defend himself with respect to the claim in relation to his son before the Regional Director found him guilty of misconduct in that regard. It is no answer, contrary to what is argued by WHO, to point out that the complainant elected to have his appeals determined on the available documents. He was entitled to make a defence before he was found guilty of misconduct, not afterwards.

14. Having regard to the complainant's entitlement to the benefit of the doubt and the finding that he was not given a proper opportunity to make a defence in relation to the claim made in respect

of his son, the Director-General's decision of 4 January 2008 must, to that extent, be set aside, as must the earlier decisions by the Regional Director.

15. As earlier indicated, it is not necessary to deal with the merits of the issue concerning the claim made by the complainant on behalf of his mother. However, it is appropriate to note that the Director-General's request resulting in the reconvening of the Headquarters Board of Appeal was so that it could "review claims of alleged fraud related to the [complainant's] mother and wife". It was as a result of that review that the Office of Internal Oversight Services was asked to conduct a further investigation into those claims. It is not appropriate to consider the results of that investigation. The question raised by the complainant's internal appeals was whether the decision to dismiss him for misconduct involved reviewable error warranting the setting aside of that decision. That is a question to be decided in the light of the facts as known at the time of the decision and the reasons given for that decision. It is not open to an international organisation to justify a decision by conducting further enquiries after the internal appeal proceedings have been concluded, much less by conducting enquiries into a charge of misconduct that was not relied upon as the basis for rejecting an internal appeal. So to do is not only to deprive a person of his/her right to be heard in answer to a charge of misconduct, including by testing the evidence against him/her, but also to render the appeal proceedings futile.

16. The only evidence against the complainant concerning the claim with respect to his wife was a statement from the Chief Executive of the Noida hospital that there was no record for her admission to the hospital during the period specified in the claim and that no bill or receipt had been issued to her. The complainant replied to that evidence, saying that he was in no position to explain why no records had been kept and suggesting that, perhaps, the hospital was not maintaining records so as to conceal income or for some similar purposes. In finding the complainant guilty of misconduct in relation to this claim, the Regional Director stated that he found his

explanations "lacking in substance" and that he had the burden of proving that his wife had been hospitalised, as claimed. This was not so. The charge against the complainant was "fraud". As the charge was denied, it was for the Organization to establish that the complainant had knowingly made a false claim. The documents, which the complainant had presented in support of the claim, were neither brought into question nor investigated at that stage. That being so, the statement from the Chief Executive of the Noida hospital was insufficient to establish the misconduct alleged. Particularly is that so where, as explained above, the complainant was entitled to the benefit of the doubt.

17. Should it be thought relevant, exactly the same considerations dictate that the complainant should not have been found guilty of misconduct in relation to the claim submitted on behalf of his mother. Again, the documents presented in support of the claim were neither questioned nor investigated at the time and the only evidence in support of the claim of fraud was another statement from the Chief Executive of the Noida hospital attesting that there was no record for her admission during the period stated in the claim.

18. As earlier concluded, the decision of the Director-General of 4 January 2008 must be set aside, as must be the earlier decisions of the Regional Director. However, in view of the time that has now elapsed, through no fault of the complainant, it is not practical to order reinstatement. As there was no proper basis for the termination of the complainant's contract, he must be paid salary and other entitlements from 8 May 2003 until the expiry of his then current contract together with any indemnity or other allowance that would then have been payable by reason of the non-renewal of his contract, with interest at the rate of 8 per cent per annum from the date of expiry of his contract until the date of payment. He is also entitled to material damages in the amount of 5,000 United States dollars for the wrongful termination of his contract. Additionally, the complainant is entitled to moral damages in the amount of 3,000 dollars for the delays involved in making a final decision with respect to his appeal and for the irregular

procedure involved in the conduct of a further investigation after his appeal had been considered by the Headquarters Board of Appeal. WHO should also pay the complainant the sum of 49,240 rupees in respect of the claim made concerning his son, together with interest at the rate of 8 per cent per annum from 1 December 2002 until the date of payment. The complainant is also entitled to costs in the amount of 500 dollars.

## DECISION

For the above reasons,

1. The decision of the Director-General of 4 January 2008 is set aside, as are the decisions of the Regional Director of 30 April 2003 and 17 August 2004.

2. WHO shall pay the complainant salary and other entitlements for the period from 8 May 2003 until the expiry of his then current contract, together with any indemnity or other allowance that would then have been payable by reason of the non-renewal of his contract, with interest at the rate of 8 per cent per annum from the date of expiry of his contract until the date of payment.

3. WHO shall pay the complainant material damages in the amount of 5,000 United States dollars and moral damages in the amount of 3,000 dollars.

4. It shall pay him the sum of 49,240 Indian rupees in respect of the health insurance claim made concerning his son, together with interest at the rate of 8 per cent per annum from 1 December 2002 until the date of payment.

5. WHO shall also pay the complainant 500 dollars by way of costs.

6. The complaint is otherwise dismissed.

In witness of this judgment, adopted on 30 October 2008, Mr Seydou Ba, President of the Tribunal, Ms Mary G. Gaudron, Vice-President, and Ms Dolores M. Hansen, Judge, sign below, as do I, Catherine Comtet, Registrar.

Delivered in public in Geneva on 4 February 2009.

Seydou Ba
Mary G. Gaudron
Dolores M. Hansen
Catherine Comtet