

CHILDREN HEALTH AND RIGHTS PROGRAM

This is the Annual Report of **EMA ČAUŠIĆ, IFMSA CHILDREN HEALTH AND RIGHTS PROGRAM COORDINATOR** for 2015-2016 Term.
Issued on 1st July 2016 and amended on 29th July 2016, for the 65th August Meeting General Assembly in Puebla, Mexico.

Summary of Report:

This program focuses on medical students action in two very broad subjects of children's health and children's rights. Since these topics are almost never overlapping in activities done by NMOs, for the benefit of this program topic will be separated into two areas.

The first term of Children Health and Rights Program has started with the process of creating Baseline Assessment of all the activities that have been done in the IFMSA on this topic. Created Baseline Assessment has set optimistic goals for the development of the Program with the total number of 87 NMOs working on this topic.

Since the Enrollment process has started just recently there are currently 9 activities (8 NMOs) enrolled in the Program. Overall impact of the activities is currently unknown because not all of the activities enrolled are yet finished and thus not reported.

Baseline Assessment

Executive Summary

IFMSA program Children Health and Rights is proposed to encourage medical students and NMOs to create better conditions for children. End goals of the Program are to ensure accessible healthcare to children, create communities that are able to protect children's rights, and provide medical students with sufficient knowledge of children's health and rights.

Focus of this program is medical students action in two very broad subjects of children's health and children's rights. Some themes were more frequent than others in activities done by NMOs - in children's health focus was put on healthy habits, early childhood diseases, mental health and childhood vaccine preventable diseases. While in children's rights focus was put on rights in general, and some specific rights such as the right to education, non-discrimination, and non-violence.

The topic of children's health and rights is addressed by at least 87 NMOs through various activities. Children (being the center of this program) are the most common target group in these activities.

In the future, we will aim towards activities that have smart objectives, measurable impact and evaluated and reported outcomes. This will be crucial for measuring the overall impact we have made on a national and international level.

Context

Project/programme structure

Children Health and Rights is a Program that embraces all activities organized worldwide, with the main goal to increase competencies of medical students on the topics of children's health and rights, consequently creating better conditions for children.

This program focuses on medical students action in two very broad subjects of children's health and children's rights. Since these topics are almost never overlapping in activities done by NMOs, for the benefit of this program topic will be separated into two areas. In children's health focus was put on healthy habits, early childhood diseases, mental health and childhood vaccine preventable diseases. Children's rights focus was put on rights in general, and some specific rights such as the right to education, non-discrimination, and non-violence.

This program works to encourage medical students in creating action towards improving position of children worldwide. This action is preconditioned with capacity building for medical students which is lacking on national and international level. Although there has been some capacity building internationally (eg. joint session related to children's health and rights at MM 2015 and MM2016) there is still a lot more to be done.

However many NMOs are working on local and national level, and almost every NMO with established SCOPH and/or SCORP has, at least, one activity that works on the topic of children's health and rights or they listed children and adolescent health and rights as focus of their activities in NMO reports.

Institutional arrangements

Considering the fact that activities are mostly concentrated on the local and national level, most of the collaboration noticed was done locally with schools and local institutions for children. Partnership with governments and ministries was done in several activities. There is a lot more space for collaboration in this field.

Description of program areas

The Children Health and Rights program includes, but is not limited to, activities that involve:

- children's health
 - healthy habits: healthy eating, hygiene (hand and oral), physical activity
 - early childhood diseases: pneumonia, diarrhoea, malnutrition
 - mental health
 - dangers of substance abuse

- road safety
 - early childhood vaccines, and childhood vaccine preventable diseases
- children's rights
- right to health and access to healthcare services
 - discrimination and violence against children
 - right to education
 - any other articles of the Convention on the Rights of the Child, or the Convention itself

Targeting criteria (how are participants selected)

Medical students are selected to take part in two ways: passively through capacity building like workshops, webinars, etc. and actively by participating in related activities and sharing knowledge with other participants. Children, parents, and other members of the community are selected through participation in activities.

Main goal and expected impact

Goals

Main goal

- to reduce the burden of illness by ensuring accessible healthcare to children, create well informed communities with ability to protect children's rights, and provide medical students with sufficient knowledge on children's health and rights.

Medium-term objectives include:

- to involve more NMOs, with emphasis on the topics that are less frequent, and regions that are less represented
- start collecting data from existing activities to make our impact visible
- development of toolkits and educational material for capacity building and promotional purposes

Long term objectives

- sustainable support for activities done by NMOs
- strong partnerships with stakeholders who will contribute to furthering our activities
- for IFMSA to have a stronger position to stakeholders

Expected impact

From this program, we would hope to see increased involvement of medical students from all IFMSA regions, and continuous support for activities that promote better conditions for children's health and rights.

Since children health and rights are impacted by multiple different factors, this program encourages to target not only children but also people in their nearest surroundings such as parents, legal guardians and teachers.



In order to assure long term objectives, this program will aim to link the work done on the ground level with advocacy towards stakeholders on a global level.

Approach

Methods applied

- Review program proposal adopted in August Meeting 2015
- Review NMO Reports from March Meeting 2015 and August Meeting 2015
- Review NMO applications for Projects Fair/ Activities Fair competition at March Meeting 2015 and August Meeting 2015
- Review MSIs from past 2 years on ifmsa.org website
- Review IFMSA Policy Statements on ifmsa.org website relevant to the program
- Review Baseline Assessment Survey sent to NMOs

Questions that need to be answered (*these questions will be answered in the following chapters*)

- What has been done in the past by IFMSA and the NMOs in the area of children's health and rights? (*Focus areas of NMOs*)
- Which NMOs are already involved in this topic? (*NMO involvement*)
- What kind of activities are held in this topic? (*Overview of activities*)
- What are the major topics that NMOs focused on? (*Overview of activities*)
- How many children have already been reached and what kind of evaluation has been done? (*Impact of the activities*)
- What is advocacy like in these activities? (*Advocacy in activities related to children's health and rights*)

Analysis

Children's Health

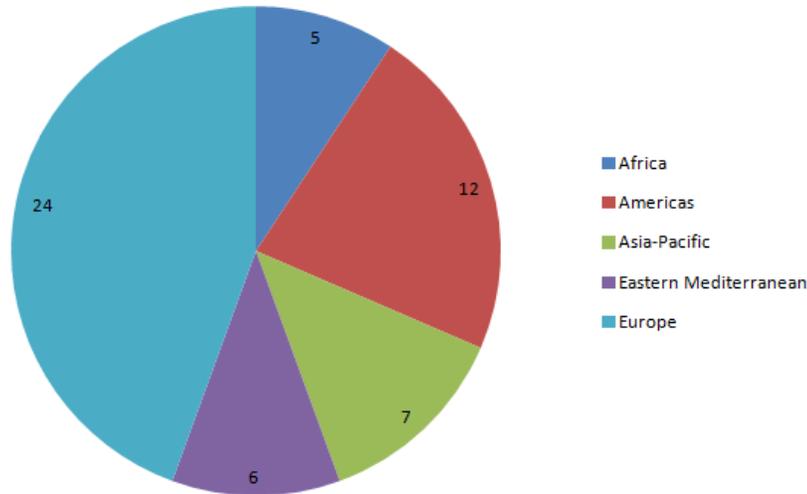
Focus areas of NMOs

- healthy habits: healthy eating, hygiene (hand and oral), physical activity
- early childhood diseases: pneumonia, diarrhoea, malnutrition
- mental health
- dangers of substance abuse
- early childhood vaccines, and childhood vaccine preventable diseases

NMO involvement



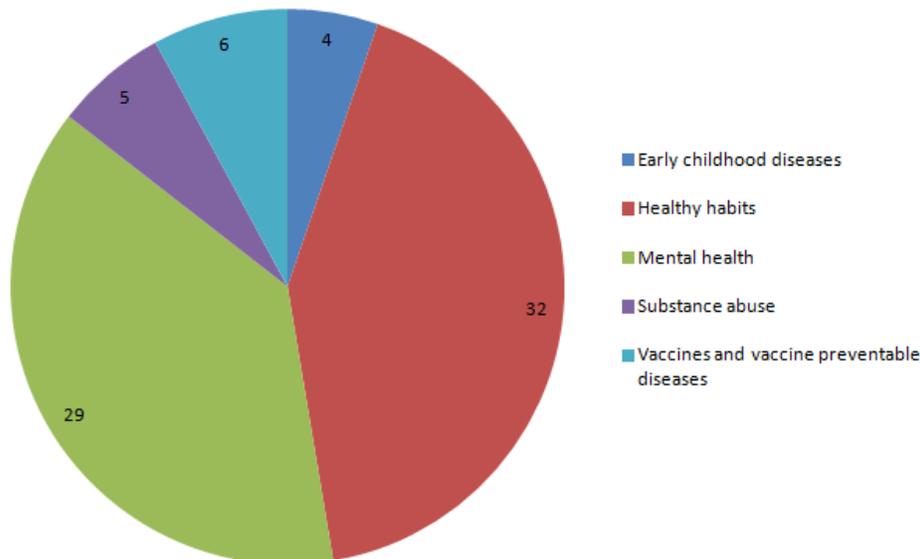
NMO involvement per IFMSA region



According to data collected from previously mentioned sources, there are 54 NMOs involved in topics of children's health. Every IFMSA region is represented, but not equally. NMOs of European region appear to be most active with 52% of NMOs (24 NMOs out of 46) involved in this topic, while African region has 25% of NMOs (5 NMOs out of 20) active in this field. There is a possibility that some NMOs did not provide information about activities in this field in their NMO Reports or did not apply for Activities Fair.

Overview of activities

Overview of the different activities



Number of activities conducted in the past two years was 76.

Biggest number of activities was made on the topic of healthy habits (32 activities out of 77).

- 52% of these activities combined healthy habits such as healthy eating and physical activity under same campaign.
- 35% of these activities dealt with hand and oral hygiene.
- Other 13% of activities approached healthy habits with highly specific topics that concerned their communities.

Children's mental health was approached with 29 activities

- 20 out of 29 (or 69%) of these activities was role playing activity with children and medical students.
 - This activity is specific because these 20 activities all share the same name (Teddy Bear Hospital). While some of them have slightly different approach, all share same objectives to reduce children's fear of doctors and to help medical students develop their skills with pediatric patients.
 - Number of the activity done per region:
 - Africa 0 (0%),
 - Americas 4 (20%),
 - Asia-Pacific 2 (10%),
 - Eastern Mediterranean 3 (15%),
 - Europe 11 (55%).

Other 9 activities were conducted as peer education and awareness campaigns, addressing taboos of mental disorders in general in high schools, and awareness about autism.

Early childhood vaccines and vaccine preventable diseases were topic of 6 activities.

- Activities targeted medical students while other targeted general public.
- There was one research activity done on this topic to determine reasons for refusing immunization of children.

Substance abuse was topic of 5 activities

- Mainly targeting adolescents with topics of alcohol, and tobacco.

4 activities about early childhood diseases

- Approached topics that concern that specific country such as malnutrition diarrhoea and pneumonia.

There are only a few activities that directly target medical students through debates, seminars and weekend trainings. But medical students are indirectly targeted in numerous activities when they spend time with children who are main target group of activities.

Impact of the activities

In general, activities that are being conducted are lacking (or did not report) indicators and measures of success. A small amount of activities have measures of success (and this was usually number of participants reached) and evaluations of the impact of the activities.

Currently, it is not possible to say how many children have been reached, because there were not enough activities that made this kind of assessment.

Because above mentioned reasons, it is not possible to measure the overall impact of these activities.

Baseline assessment survey

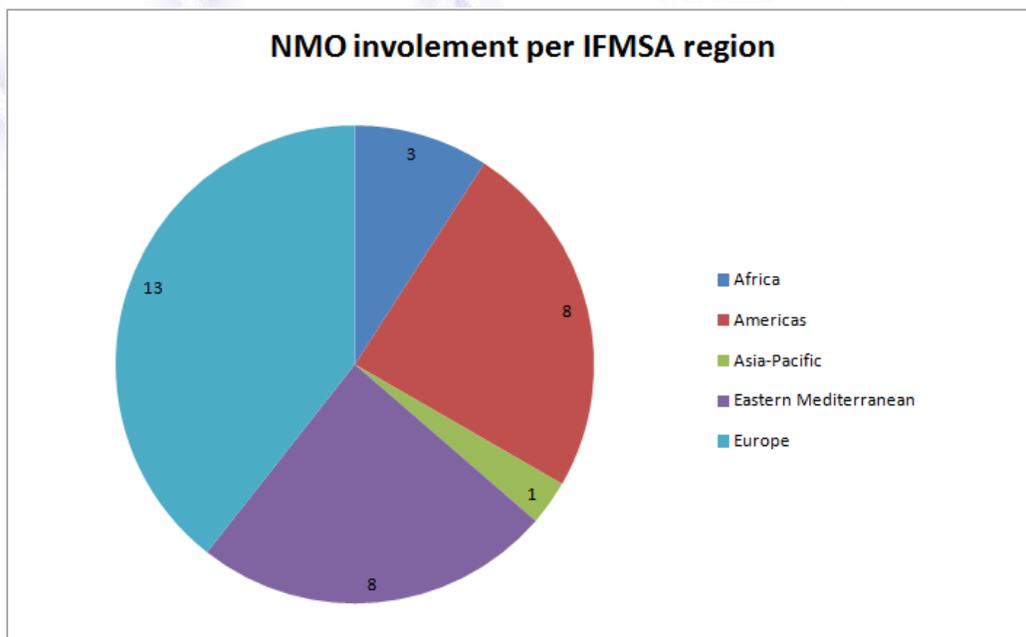
- 6 new activities (out of 10) which weren't mentioned in NMO reports or in applications for activities fair.
- 2 of them were role playing activity about mental health, and 4 activities on the topics of healthy habits.

Children's Rights

Focus areas of NMO's

- Children's rights in general, or combining multiple rights under one activity
- Right to health
- Right to be protected from discrimination
- Right to be protected from violence and child abuse
- Right to education
- Improving living conditions for children in hospitals, orphanages and other institutions
- Charitable events for children in need

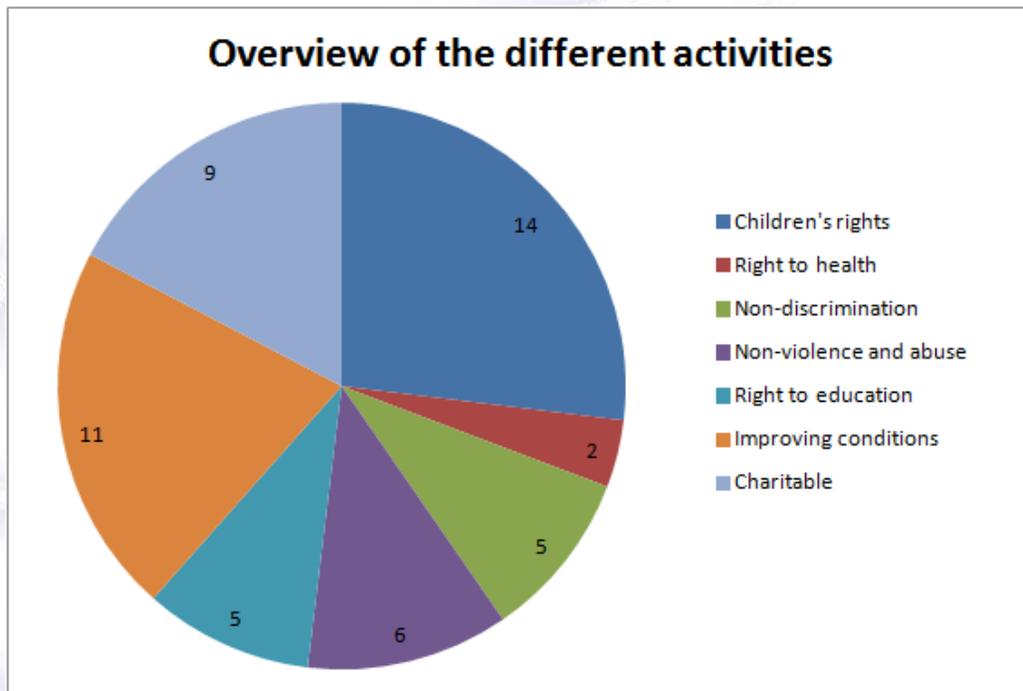
NMO involvement



According to data collected from previously mentioned sources, there are 33 NMOs involved in topics of children's rights. Every IFMSA region is represented, but not equally. NMOs of

European region appear to be most active with 28% of NMOs (13 NMOs out of 46) involved in this topic, while Asia-Pacific region has 6% of NMOs (1 NMO out of 18) active in this field. There is a possibility that some NMOs did not provide information about activities in this field in their NMO Reports or did not apply for Activities Fair.

Overview of activities



Total number of activities conducted was 52.

Most of activities were on the topic of children's rights in general.

- These activities were conducted in different ways: targeting children in orphanages and educated them on basic rights, different games for children or debates for medical students.
- Some activities target both children and medical students.

Activities on the topic of protection from discrimination

- Mainly focused on children with disabilities and target both children and medical students.
- There is also activity that targets primary and secondary school children when teaching them about racial discrimination.

10 NMOs with 11 activities are visiting children in hospitals and orphanages

- These activities are focused on providing some short term solutions for children in institutions.
- Mainly conducted during religious holidays in form of charity events.

Impact of the activities

In general, activities that are being conducted are lacking (or did not report) indicators and measures of success. Only 6 (out of 52) activities have measures of success, and that is a number of participants reached, and one of them conducted an evaluation of the impact of the activity.

Currently, it is not possible to say how many children have been reached, because there were not enough activities that made this kind of assessment.

Because above mentioned reasons, it is not possible to measure the overall impact of these activities.

Baseline assessment survey

- 7 new activities (out of 10) which weren't mentioned in NMO reports or in applications for activities fair
- 3 activities were visits to hospitals and orphanages of charitable nature, 4 had a goal to educate children on various topics such as violence, or providing a service of education in areas where it is lacking.

Advocacy in activities related to children's health and rights

Very few activities involved advocacy efforts towards local and national stakeholders. This was mainly done as a part of a bigger event that consisted of several types of activities.

Advocacy efforts done by IFMSA on the international level was during pre-World Health Assembly in 2015, where Adolescent Health was one of four streams conducted.

For advocacy efforts on international level IFMSA is using Policy Statements and publications in MSI. These international advocacy efforts currently do not have a measurable impact.

IFMSA Policy Statements:

- Abolishing Child Marriage (AM 2014.)
- Early Childhood Development (AM 2014.)
- Decade of Action for Global Road Safety (AM 2015.)

Publication - Medical Students International (MSI)

- MSI 32 (August 2015)
 - In Reflection (SloMSIC - Slovenia)
 - Let's Learn About Bullying (AECS - Catalonia)
 - ROTATION Rotavirus Promotion and Prevention (CIMSIA - ISMKI Indonesia)

MSI 31 (March 2015)

- Little Doctors (FASMR - Romania)
- Applying Nutritional Education for a Proper Child Development (IFMSA - Brazil)
- Global Hand Washing Campaign (BMSS - Bangladesh)
- Being Different is Normal (IFMSA - Brazil)

MSI 30 (August 2014)

- Healthy Generation (AssociaMed - Tunisia)

MSI 29 (March 2014)

- The Egyptian Educational System (IFMSA - Egypt)

Summary

IFMSA program Children Health and Rights is proposed to encourage medical students and NMOs to create better conditions for children. The end goal is to reduce the burden of illness by ensuring accessible healthcare to children, create well informed communities with ability to protect children's rights, and provide medical students with sufficient knowledge of children's health and rights.

The topic of children's health and rights is addressed by at least 87 NMOs through various activities. Children (being the center of this program) are the most common target group in these activities.

Considering the number of NMO interested in topics of this program we can conclude that this program has a solid basis and possible major impact on children's health and rights. Through empowering NMOs with the appropriate tools and skills to regularly evaluate all organized activities, we will be able to measure the end term impact of this program.

Recommendations

In the future, we need to aim towards activities that have smart objectives, measurable impact and evaluated and reported outcomes. This will be crucial for measuring the overall impact we have made on national and international level, on the topic of children's health and rights.

There is a need to focus on capacity building with clear outcomes on national and international level. This would result in NMO activities that are more outcome oriented with clear objectives, and therefore, measurable impact, which is currently lacking in majority of activities.

Upcoming challenge that we will need to find a solution for is how to measure the impact we made with advocacy activities, Policy Statements, and articles in MSI. We currently do not have measurable impact for these actions but this should be improved in order to determine did the Program implement all its objectives, and how can we connect work done on the ground level with international advocacy efforts.

Program Impact Report

Program Structure

Considering that children and adolescents are vulnerable groups that need special care and assistance, the IFMSA program 'Children Health and Rights' is proposed to encourage medical students and NMOs in protection of children's health and rights. In order to achieve the end goals, medical students will need to be equipped with the proper skills to educate and advocate on behalf of children on local, national and international level.

Assuming that communities and civil societies are not aware enough of the importance and complexity of the problem, medical students need to take a leading role in education of general public. Considering that children's health and rights are usually affected by their surroundings, education needs to be aimed to adults (including families and teachers) as well as children. Taking into account that children and adolescents are the center of these activities we should involve them in every possible way and value their opinions if they can form one.

Main goal

- to reduce the burden of illness by ensuring accessible healthcare to children, create well informed communities with ability to protect children's rights, and provide medical students with sufficient knowledge on children's health and rights.

Expected impact

From this program, we would hope to see increased involvement of medical students from all IFMSA regions, and continuous support for activities that promote better conditions for children's health and rights.

Since children health and rights are impacted by multiple different factors, this program encourages to target not only children but also people in their nearest surroundings such as parents, legal guardians and teachers.

In order to assure long term objectives, this program will aim to link the work done on the ground level with advocacy towards stakeholders on a global level.

Description of program areas

The Children Health and Rights program includes, but is not limited to, activities that involve:

- children's health
 - healthy habits: healthy eating, hygiene (hand and oral), physical activity
 - early childhood diseases: pneumonia, diarrhoea, malnutrition
 - mental health
 - dangers of substance abuse
 - road safety
 - early childhood vaccines, and childhood vaccine preventable diseases
- children's rights
 - right to health and access to healthcare services
 - discrimination and violence against children
 - right to education
 - any other articles of the Convention on the Rights of the Child, or the Convention itself

Approach

Methods applied

- Review program proposal adopted in August Meeting 2015
- Review Program Baseline assessment
- Review submitted Activity Enrollment Forms
- Review submitted Activity Reports
- Review MSI from March Meeting 2016 on ifmsa.org website
- Review new IFMSA Policy Statements on ifmsa.org website relevant to the program

Questions that need to be answered (*these questions will be answered in the following chapters*)

- What has been done in the past by IFMSA and the NMOs in the area of children's health and rights? (*Focus areas of Enrolled Activities*)
- Which NMOs are already involved in this program? (*NMO involvement*)
- What kind of activities are enrolled in this program? (*Overview of activities*)
- What are the major topics that NMOs focused on? (*Overview of activities*)
- Based on the Report Forms of the Activities, how successful were the actions taken? (*Impact of the activities*)
- What is advocacy like in the areas of this Program? (*Advocacy related to children's health and rights*)

Analysis of Activity enrollment Forms and Activity Report Forms

Number of activities enrolled in the Program: 9

Number of activities submitted the Report Form: 4

Children's Health

Focus areas of Enrolled Activities

- healthy habits: healthy eating, hygiene (hand and oral), physical activity
- early childhood diseases: diarrhoea, malnutrition
- dangers of substance abuse
- mental health

NMO involvement

According to data collected from Activity Enrolment Forms, there are 3 NMOs involved in topics of children's health:

- CIMSA - ISMKI Indonesia
- IFMSA Pakistan
- IMCC Denmark
- MSA India

Asia-Pacific region is represented with 3 NMOs, and European Region is represented with 1 NMO.

From the Baseline Assessment: total of 54 NMOs involved in this topic, with all IFMSA regions represented.

Compared with the Baseline Assessment it is evident that regions are not properly represented with the number of NMOs working on these topics.

Overview of activities

Number of activities enrolled: 5.

- 2 activities with the main focus on healthy habits and hygiene. One targeted school children, and other children in orphanages.
- One activity with focus on diarrhoeal disease in children up to 1,5 years of age, targeted mothers (caregivers) as primary caretakers of children.
- One activity focused on tobacco abuse and targeted adolescents.
- One activity focuses on children's mental health with objectives to reduce children's fear of doctors and to help medical students develop their skills with pediatric patients.

80% of activities (4 activities) enrolled targeted children, 20% (1 activity) targeted medical students, and 20% (1 activity) targeted parents/caregivers. But medical students and/or children are indirectly targeted in all activities.

All of the enrolled activities (100%) are projects, or a planned set of interrelated tasks and activities to be executed over a fixed period and within certain cost and for a certain group.

In the Baseline Assessment total number of activities conducted was 76. Activities were conducted in all 6 areas of the program listed above.

Compared with the Baseline Assessment there is significantly smaller number of Activities enrolled. Activities that are enrolled are working on 4 out of 6 areas of the Program (healthy habits and hygiene, early childhood diseases, dangers of substance abuse, mental health); each activity in one of the areas.

Impact of the activities

One activity enrolled in the Program has submitted Mid-activity Report due to the duration of the activity of 2 years. The activity is a project that targeted mothers and healthcare workers. From that Report we can see the impact as follows:

- Educated 30 healthcare workers and 20 mothers about diarrhoeal disease and the management

Other 4 activities enrolled in the Program are ongoing. This is the reason why Activity Coordinators have not yet submitted activity Report forms, thus impact of the activities is unknown.

Because above mentioned reasons, it is not possible to measure the overall impact of these activities.

Children's Rights

Focus areas of Enrolled Activities

- Children's rights in general, or combining multiple rights under one activity
- Right to be protected from discrimination
- Right to be protected from violence and child abuse

NMO involvement

According to data collected from Activity Enrolment Forms, there are 2 NMOs involved in topics of children's rights:

- CIMSA - ISMKI Indonesia
- CroMSIC Croatia
- IFMSA Poland
- IFMSA Serbia

Asia-Pacific region is represented with 1 NMO, and European Region is represented with 3 NMOs.

From the Baseline Assessment: total of 33 NMOs involved in this topic, with all IFMSA regions represented.

Compared with the Baseline Assessment it is evident that regions are not properly represented with the number of NMOs working on these topics.

Overview of activities

Number of activities enrolled: 4.

- One activity with focus on children's rights in general that targeted medical students and general public.
- 2 activities focused on rights to be protected from discrimination and violence that mainly targeted children with disabilities, but also their parents and general public. One of these activities also put in focus medical students and their skills in regards to special needs of disabled children.
- One activity targeted children in hospitals with the aim to better their wellbeing while staying in hospital.

All activities targeted children, directly or indirectly. 50% (2 activities) of activities primarily targeted medical students and 75% (3 activities) primarily targeted children. Parents and general public were indirectly targeted in 50% (2 activities) of activities.

Activities enrolled are different types. 2 of the enrolled activities are projects, or a planned set of interrelated tasks and activities to be executed over a fixed period and within certain cost and for a certain group. One of the enrolled activities is a conference, or a formal meeting in which many people gather in order to talk about ideas or problems related to a particular topic usually for several days. One of the enrolled activities is a event, or something that happens or is regarded as happening, especially something important or notable.

In the Baseline Assessment total number of activities conducted was 52. Activities were conducted in all 4 areas of the program listed above.

Compared with the Baseline Assessment there is significantly smaller number of Activities enrolled.

Impact of the activities

3 out of 4 activities enrolled in the Program have submitted Report form. From the Reports we can see the impact as follows:

- 70 participants of the conference from 7 different countries gained knowledge about children's rights in general and about certain specific rights (right to health, non discrimination, education). Lectures/workshops were interactive and provided participants with new set of skills.
- The goal achieved was to reduce stigma of disability with general public and help the families with the stigma they are facing. 56 children with special needs and their parents attended the sessions prepared. 200 people of general public were reached with the campaign.
- The goals to improve the wellbeing of intellectually disabled children and to teach medical students how to communicate with disabled children were achieved trough 2

activities with children and a workshop for medical students. Participants were 40 children and 6 medical students.

Advocacy related to children's health and rights

For advocacy efforts on international level IFMSA is using Policy Statements and publications in MSI. These international advocacy efforts currently do not have a measurable impact.

IFMSA Policy Statements adopted during March Meeting 2016:

- Vaccination

Publication - Medical Students International (MSI)

- MSI 33 (March 2016)
 - Little Doctors on Action (CIMSA-ISMKI Indonesia)
 - Let's Move! A childhood Obesity Awareness Event (EMSS - United Arab Emirates)
 - IFMSA-Iraq SCORP (IFMSA - Iraq)
 - Abundant Life Ministries Orphanage (MSAI - India)

Work done by the Program Coordinator during March Meeting General Assembly 2016

IFMSA Programs in general

Since the IFMSA General Assembly is the most suitable place to approach the largest number of medical students who will organize activities in their NMOs, focus of advocacy done by the Program Coordinator was done during the March Meeting General Assembly. This was done by facilitating Programs workshops on SCOPH and SCORP sessions, evaluating activities during the Activities Fair and Scientific Poster Fair, and organising Programs Table where anyone could approach a Program Coordinator and ask questions.

Program specific capacity building

Capacity building more specific to the Program was done by facilitating joint session 'Child Abuse - The Role of Healthcare Workers in Ensuring Children's Rights'. This joint session connected human rights and public health with clinical settings. Throughout this session, emphasis was on the importance of human rights and medical ethics in approaching patients who were victims of child abuse.

Outcomes of this joint session are that participants are:

- Provided with basic knowledge of different types of child abuse.
- Able to identify the most common signs of abused child and understand basic principles of treating child abuse victims.
- Sensitized about inequalities that abuse victims face in everyday life.
- Introduced to different approaches we as medical students can take in order to reduce and/or help children who are victims of abuse.

Summary

The first term of Children Health and Rights Program has started with the process of creating Baseline Assessment of all the activities that have been done in the IFMSA on this topic. Created Baseline Assessment has set optimistic goals for the development of the Program with the total number of 87 NMOs working on this topic.

Since the Enrollment process has started just recently there are currently 9 activities (8 NMOs) enrolled in the Program. Impact of the activities is currently unknown because the activities enrolled are not yet finished and thus not reported. Furthermore, there is a substantial number of activities done by the NMOs that are not evaluated by the NMOs and enrolled in the Program.

Work of the Program Coordinator during the General Assembly was mostly focused on the promotion of IFMSA Programs in general. Apart from general promotion of the Programs, capacity building specific to this program was done by facilitating joint session 'Child Abuse - The Role of Healthcare Workers in Ensuring Children's Rights'.

According to the Baseline Assessment, there is substantial number of NMO interested in topics of this program. We can conclude that this program has a solid basis and possible major impact on children's health and rights. Through empowering NMOs with the appropriate tools and skills to regularly evaluate all organized activities, we will be able to measure the end term impact of this program.

Direction of future work of the Children Health and Rights Program

Future work needs to aim to better promotion of Programs with our members. This will be crucial for higher number of enrolled activities and subsequently measurable impact of this Program. Promotion needs to be done in two directions. First is the general promotion of IFMSA Programs with the emphasis on the benefits of enrolling activities in the Programs. Second is specific promotion of topics of this Program and the work done so far. This can be done through social media campaigns on specific international days and share the most impactful activities enrolled in the program.

There is a need to focus on capacity building with clear outcomes on national and international level. Capacity building will benefit both the awareness of medical students towards the inequalities and health risks that affect children, and the quality of activities conducted. This would result in NMO activities that are more outcome oriented with clear objectives, and therefore, measurable impact.

The upcoming challenge that we will need to find a solution for is how to measure the impact we made with advocacy activities, Policy Statements, and articles in MSI. We currently do not have measurable impact for these actions but this should be improved in order to determine did the Program implement all of its objectives, and how can we connect work done on the ground level with international advocacy efforts.



Annex 1: Photo album.

In this link you can find Photo Album of activities that have been enrolled and reported in this term:

<https://drive.google.com/folderview?id=0B7qUk0TdvmUEMU9KLTZzQndJR1U&usp=sharing>

Annex 2: List of enrolled and reported activities.

Children Health and Rights Program Activities for the 2015 - 2016 term			
	Name of the Activity	NMO	Type of the Activity
CHILDREN'S HEALTH			
	Bamsehospital (Teddy Bear Hospital Denmark)	IMCC Denmark	Project
	Be Smart, Don't Start	FMSA-Pakistan	Project
	Health is Orange	IFMSA-Pakistan	Project
	ROTATION	CIMSA - ISMKI Indonesia	Project
	Orphanage Health and Hygiene Camp	MSA India	Project
CHILDREN'S RIGHTS			
	3rd Symposium on Human Rights: Children's Rights	CroMSIC Croatia	Conference
	DOODLE (different but we are friend with disable)	CIMSA - ISMKI Indonesia	Project
	Embracing Diversity- Children Edition	IFMSA Poland	Project
	Sweet Party - Candy for a Smile	IFMSA Serbia	Event