The International Federation of Medical Students' Associations (IFMSA) is a non-profit, non-governmental organization representing associations of medical students worldwide. IFMSA was founded in 1951 and currently maintains 130 National Member Organizations from 122 countries across six continents, representing a network of 1.3 million medical students.

IFMSA envisions a world in which medical students unite for global health and are equipped with the knowledge, skills and values to take on health leadership roles locally and globally, so to shape a sustainable and healthy future. IFMSA is recognized as a nongovernmental organization within the United Nations’ system and the World Health Organization; and works in collaboration with the World Medical Association.
Dear National Member Organizations,

Dear Alumni, Honorary Life Members, and Board of Recommendation,

Dear Future Generations of IFMSA,

We as medical students envision a world in which all of us unite for global health and are equipped with the knowledge, skills and values to take on health leadership roles locally and globally. We aim to unite medical students worldwide to lead initiatives that impact positively the communities we serve, to represent the opinions and ideas of future health professionals in the field of global health, and to work in collaboration with external partners. IFMSA further builds capacity through training, projects and exchange opportunities, while embracing cultural diversity so as to shape a sustainable and healthy future.

The 2015-2016 term saw the 2nd year of the 2014-2017 IFMSA Strategic Plan which was faced us with many outcomes but also with many challenges. We saw the first full year of the new Leadership Structure with 7 Executive Board Members, the first full year of Implementation of the IFMSA Programs, the adoption of the Capacity Building Strategy Concept Notes, the Global External Focus Areas, the Regions Strategy to mention a few. Please see below some of the major outcomes of the 2015-2016 term. For further details on any of the topics, please approach the current IFMSA Team of Officials or look into the Minutes of the 65th March Meeting and August Meeting General Assemblies.

Warm regards,

IFMSA Team of Officials 2015-2016
Here we met:

Pre-August Meeting 2016 Workshops
Mexico City, Mexico
28 July - 01 August, 2017

65th General Assembly August Meeting 2016
Puebla, Mexico
01 August - 07 August, 2016

SRT Mexico
Queretaro, Mexico
10 August - 14 August, 2016

Pre-March Meeting 2016 Workshops
Saint Paul’s Bay, Malta
28 February - 02 March, 2016

65th General Assembly March Meeting 2016
Saint Paul’s Bay, Malta
02 March - 08 March, 2016

2nd Team of Officials Meeting
Barcelona, Spain
December, 2015

Train Your Summer (TYS)
Barcelona, Spain
01 September - 06 September, 2016

T4All
Evora, Portugal
05 September - 09 September, 2016

LACMA
Quito, Ecuador
22 July - 27 July, 2016

Pre-Americas’ Regional Meeting Workshops
Montevideo, Uruguay
14 January - 17 January, 2016

2016 Americas’ Regional Meeting
Montevideo, Uruguay
17 January - 21 January, 2016
3rd Pre-World Health Assembly Workshop
Geneva, Switzerland
14 May - 17 May, 2016

1st Polish International Workshop
Warsaw, Poland
30 October - 02 November, 2015

4th SCARP Camp
Vilnius, Lithuania
21 August - 26 August, 2016

1st Team of Officials Meeting
Bucharest, Romania
October, 2015

4th Team of Officials Meeting
Graz, Austria
May, 2016

Pre-EMR Workshops
Amman, Jordan
24 - 27 January, 2016

EMR 12
Amman, Jordan
27 - 31 January, 2016

TNT MSAKE
Nairobi, Kenya
07 May - 14 May, 2016

Pre-Asia Pacific Regional Meeting Workshops
Bangkok, Thailand
31 May - 03 June, 2016

13th Asia Pacific Regional Meeting
Bangkok, Thailand
03 June - 07 June, 2016

SRT Asia Pacific
Yogyakarta, Indonesia
03 December - 06 December, 2015

Pre-EuRegMe Workshops
Kastoria, Greece
18 April - 22 April, 2016

European Regional Meeting 2016
Thessaloniki, Greece
22 April - 26 April, 2016

Pre-African Regional Meeting Workshops
Kigali, Rwanda
15 December - 18 December, 2015

11th African Regional Meeting
Kigali, Rwanda
18 December - 22 December, 2015
During the 2015-2016 term the IFMSA Team of Officials met a total of seven times:

1. During the **Handover Meeting** with the 2014-2015 Team of Officials, immediately after the 64th General Assembly August Meeting in Ohrid, FYR of Macedonia in August 2015.

2. 1st **Team of Officials Meeting**, in Bucharest, Romania in October 2015. This is when and where the Team of Officials became a team and planned the activities of the term.

3. 2nd **Team of Officials Meeting**, in Barcelona, Spain where the TO checked on the status of the plans for the first 3 months of the term and planned the execution of the 65th General Assembly March Meeting.

4. 3rd **Team of Officials Meeting**, in Saint Paul’s Bay, Malta where the TO wrapped up the preparations for the General Assembly.

5. 4th **Team of Officials Meeting**, in Graz, Austria where the TO checked on the status of the outcomes for the first 7 months of the term and planned the execution of the 65th General Assembly August Meeting.

6. 5th **Team of Officials Meeting**, in Mexico City, Mexico where the TO wrapped the preparations for the General Assembly and planned the Handover for the 2016-2016 Team of Officials.

7. **Handover meeting** with the 2016-2017 Team of Officials, immediately after the 65th General Assembly August Meeting in Puebla, Mexico.
First Polish International Workshop, held in Warsaw, Poland from Oct. 30 until Nov. 11, 2015.

This event was organized by IFMSA-Poland & included two well-known training sessions – Professional and Research Exchange Training (PRET) and Training New Trainers (TNT) – both held according to IFMSA standards.

The 60 participants included 50 medical students from all over the globe and 10 from Poland, who benefited from and learnt new skills. They got to share ideas, hopes, and unforgettable experiences.

SRT Indonesia, held in Yogyakarta, Indonesia from Dec. 3 until Dec. 6, 2015.

This event was organized by CIMSA-ISMKI-Indonesia and included four workshops: Training New Trainers (TNT), Training Old Trainers (TOT), Training New Human Rights Trainers (TNHRT), and Global Health Training – all according to IFMSA standards.

Participants were all from the Asia-Pacific region, and represented 4 countries.

Pre-ARM Workshops and 11th African Regional Meeting, held in Kigali, Rwanda from Dec 15 until Dec. 22, 2015.

This event was organized by MEDSAR-Rwanda. During the Pre-ARM, 43 participants from 9 African NMOs took part in one of three workshops that were coordinated by IFMSA officials and international assistants: Women’s Reproductive Health and Access to Safe Abortion, Training of African Medical Youth Leaders, and Training New Human Rights Trainers. These workshops were vital for Capacity Building in the African region.

The 11th Africa Regional Meeting was attended by 191 participants from 14 NMOs alongside 9 IFMSA officials. The meeting had Standing Committee sessions, Presidents’ sessions, training sessions, activity presentations, and a theme event on the topic of “Post 2015 Maternal and Child Health.”

Pre-AmRM Workshops and 2016 Americas Regional Meeting, held in Montevideo, Uruguay from Jan. 14 until Jan. 21, 2016

This event was organized by IFMSA-Uruguay, the newest NMO in the region. During the Pre-AmRM, over 60 participants from 11 NMOs of the Americas region took part in one of six different workshops, coordinated by IFMSA officials and international assistants. The workshops were: LEAD, Training New Trainers (TNT), Training Old Trainers (TOT), Public Health training (PHLT), Global Health within Exchanges, and Maternal Health and Access to Safe Abortion. The presence of multiple external partners and alumni was an added benefit to the quality of workshops.

The 2016 Americas Regional Meeting had over 130 participants from 15 NMOs from the Americas region alongside several IFMSA officials. The meeting had Standing Committee sessions, Presidents’ sessions, training sessions, and activity presentations.

Pre-EMR Workshops, and 12th Eastern Mediterranean Regional Meeting, held in Amman, Jordan from Jan. 24 until Jan 31, 2016.

During the Pre-EMR, more than 60 participants from 10 NMOs in the region took part in one of four workshops coordinated by IFMSA officials and international assistants: Training New Trainers (TNT), Training Medical Education Trainers (TMET), Refugees’ Health and Rights, and Women and Adolescent Reproductive Health and Safe Abortion. All these workshops were conducted according to IFMSA standards.

The opening ceremony of the 12th Eastern Mediterranean Regional meeting was a huge celebration attended by Her Royal Highness Princess Dina Mired of Jordan and
Events and Other Meetings

several externals including the president of WONCA EMR and the president of King Hussain Foundation for Cancer and several professors who organized a simulation panel in the opening ceremony itself. The meeting had Standing Committee sessions, Presidents’ sessions, training sessions, and activity presentations.

Pre-MM Workshops, and the 65th General Assembly March Meeting, held in St. Paul’s Bay, Malta from Feb. 27 until Mar. 8, 2016.

The Pre-MM workshops saw 283 participants from 54 Countries come together and participate in one of 13 workshops coordinated by IFMSA officials and international assistants: Training New Exchange Trainers (TNET), IFMSA Team of Officials Meeting 3, Presidents’ Workshop, How and Why of External Representation, Health Systems and Human Resources for Health, International Training on Disaster Medicine (ITDM), Human Rights for Medical Practitioners, Women’s Reproductive Health and Safe Abortion, Training Medical Education Trainers (TMET), Public Health Leadership Training (PHLT), Training New Trainers, International Peer Education Training (iPET), and The Global Health Agenda and Health Budget Prioritization. These workshops were conducted according to IFMSA standards.

The March Meeting was attended by 1030 participants from 98 countries, making it one of the biggest IFMSA Gas to date. For 5 days, delegates participated in Standing Committee sessions, Presidents’ sessions, NMO Management sessions, Training sessions, activity presentations, Plenary sessions, and a Theme Event on the “Present and Future of global health,” with a focus on the Sustainable Development Goals. The theme event hosted multiple high level speakers, such as Mr. Diego Cimino (UNOY), Dr. Natasha Azzoradi Muscat (EPHA) and Mr. Cristopher Dekki (UN-MGCY). As well, several NMO delegates presented how they aim to reach the SDGs through their projects.

During this meeting, we also had the honor to meet with Her Excellency Marie Louise Coleiro Preca, the President of Malta, who congratulated IFMSA for the work it is doing for medical students and communities worldwide.

Pre-EuRegMe Workshops, held in Kastoria, Greece from Apr. 18 until Apr. 22, 2016 and the 2016 European Regional Meeting, held in Thessaloniki, Greece from Apr. 22 until Apr. 26, 2016.

During the Pre-EuRegMe, 63 medical students took part in one of five workshops coordinated by IFMSA officials and international assistants: Training New Trainers (TNT), Policy Writing and External Representation, Training New Medical Education Trainers (TMET), Preventive Medicine Workshop, and Using Simulation Games on Human Rights (Peer) Education. These workshops were conducted according to IFMSA standards.

The XIII European Regional Meeting saw 286 participants coming together from across Europe to discuss the present and future of the region. The meeting had Standing Committee sessions, Presidents’ sessions, training sessions, and activity presentations and we had the pleasure to welcome representatives of a few external partners, including the European Public Health Alliance (EPHA), the European Youth Forum (YFJ) and the European Students’ Union (ESU).

SRT MSAKE, held in Nairobi, Kenya from May 7 until May 14, 2016.

This Sub-Regional Training aimed at providing capacity building skills, knowledge, and tools for medical students within the African region. It saw the organizations of five workshops: Maternal Health and Access to Safe Abortion, Training New Trainers (TNT), Global Health workshop, Soft Skills training, and International Peer Education Training (iPET) with increased participation from the African region.
IFMSA Pre-World Health Assembly Workshop, held in Geneva, Switzerland from May 19 until May 22, 2017.

This yearly IFMSA event aimed to (1) provide a venue for youth health leaders to prepare for the World Health Assembly and harmonize advocacy efforts to strengthen the voice of youth during negotiations, (2) equip them with tools and skills in the areas of advocacy, healthcare leadership and policy engagement to enable them to take action on global health issues, and (3) empower youth participants to take on further advocacy projects, creating a snowball effect for youth education and empowerment in the realms of global health advocacy.

The 49 participants of the Youth Pre-WHA, coming from 25 countries, were split into four streams: Universal Healthcare Coverage, Nutrition and NCDs; Substandard, Spurious, Falsely-Labeled, Falsified, Counterfeit Medical Products; and Sexual and Reproductive Health and Rights, all of which were topics relevant to the agenda of the 69th WHA. In addition to stream-specific sessions there were skills-oriented trainings on topics such as policy brief writing and elevator sales pitches.

The Youth Pre-WHA received generous organizational and financial support from the Global Health Workforce Alliance and the Graduate Institute Geneva, without which the event would not have been the success it was.

Pre-APRM Workshops, and the 13th Asia-Pacific Regional Meeting, held in Bangkok, Thailand from May 31 until Jun. 8, 2016.

During the Pre-APRM workshops, 33 medical students took part in one of four workshops coordinated by IFMSA Officials and international assistant: Maternal Health and Safe Abortion, Global Health within Exchanges, Training for Human Rights Trainers (TNHRT) and Training New Trainers (TNT). These workshops were conducted according to IFMSA standards.

The Asia-Pacific Regional Meeting spanned over a period of four (working) days and was attended by approximately 200 delegates from 12 NMOs in Asia Pacific alongside several IFMSA officials. The meeting had Standing Committee sessions, Presidents’ sessions, training sessions, and activity presentations.

Latin American Cooperation on Maternal Health and Access to Safe Abortion, held in Quito, Ecuador from Jul. 22 until Jul. 28, 2016

LACMA is an international IFMSA event that brings together American NMOs for discussions regarding maternal health and safe abortion in the respective countries. This edition consisted of a 5-day IFMSA training of 29 new Trainers on Maternal Health and Access To Safe Abortion. Participants hailed from Ecuador, Colombia, Peru, Mexico, Brazil and Canada.

Pre-AM Workshops, and the 65th General Assembly August Meeting 2017, held in Puebla, Mexico, from Jul. 28 until Aug. 7, 2016.

The Pre-AM workshops saw 250 medical students from 43 countries come together and take part in 15 different workshops, coordinated by IFMSA officials and international assistants. These workshops were: Training New Trainers (TNT), Training New Exchange Trainers (TNET), 7 Habits Workshop, Adolescent Sexual and Reproductive Health Young Leaders Summit, Diplomacy: from local to global, Disaster Medicine, Financial Essentials 1.0, Access to Safe Abortion workshop, Public Health Leadership Training (PHLT), Presidents’ Workshop, Project and Activity Management, Rural Health, Training Medical Education Trainers (TMET), Training New Human Rights Trainers (TNHRT), and the Team of Officials Meeting 5. These workshops were conducted in line with IFMSA standards.

The August Meeting was attended
by 800 participants from 88 countries, and marked the end of our term. For 5 days, delegates participated in Standing Committee sessions, Presidents’ sessions, NMO Management sessions, Training sessions, activity presentations, Plenary sessions, and a Theme Event on the “Global Vaccine Action Plan,” in which participants were asked to send in pictures showing the important link between vaccination and the social determinants of health.

During this meeting, the General Assembly elected the Team of Officials for the term 2016-2017.

SRT Mexico, held in Queretaro, Mexico from Aug. 10 until Aug. 14, 2016.

This Sub-Regional Training aimed at providing capacity building skills, knowledge, and tools for medical students. It saw the organizations of four workshops: Training New Trainers (TNT), Training Experience Trainers (TET) focused on Communication Skills, Leadership, Empowerment, Advocacy and Development (LEAD) workshop, and International Training on Disaster Medicine (ITDM). A total of 38 participants from 6 countries benefited from this experience. All of these workshops were conducted according to IFMSA standards.


The SCORP Camp is IFMSA’s largest international summer school on Human Rights and Peace. Of four host candidates, Lithuania was selected for host this year’s edition. Medical students from 12 countries got together and participated in five different workshops: Training New Human Rights Trainers (TNHRT), Human Rights for Medical Practitioners, Human Rights Advocacy Training, International Training on Disaster Medicine (ITDM), and Training New Trainers (TNT). All of these workshops were conducted according to IFMSA standards.

T4All, held in Evora, Portugal from Sep. 5 until Sep. 9, 2016.

Training for All, or T4All in short, is a subregional training organised by ANEM Portugal, over a period of 5 days. This year, medical students had the chance to participate in one of five workshops: Training New Trainers (TNT), Training Medical Education Trainers (TMET), Training New Human Rights Trainers (TNHRT), Public Health Leadership Training (PHLT), and Global Health Training. All of these workshops were conducted according to IFMSA standards.

Train Your Summer (TYS), held in Barcelona, Spain from Sep. 1 until Sep. 9, 2016.

This subregional training (SRT) was organised by AECS-Catalonia over a period of 6 days, and gathered over 50 medical students from around the world to take part in four different workshops: Training Mental Health Trainers (TMHT), International Peer Education Training (iPET) on healthy relationships, Training New Trainers (TNT), and Professional and Research Exchange Training (PRET). All of these workshops were conducted according to IFMSA standards.
Standing Committees

Standing Committee on Medical Education (SCOME):
In order to improve the involvement of national member organizations, several actions were taken for the first time: voting of SCOME Regulations and Strategic and SCOME candidates’ debate during AM2016, establishment of the SCOME Activities Database, opening SCOME sessions team for newcomers, etc.

One of the biggest achievement in this term is the collaboration with the coordinators of SCOME-related Program. Both in MM16 and AM16, the PCs were invited to introduce SCOME members to programs, which not only encouraged the Program Coordinators to get involved in Standing Committees’ work, but also presented a professional and accessible image of Programs for participants.

Additionally this year, we had 9 TMETs worldwide, 5 of them organized by NMOs. We’re glad to now have more than 100 new TMET trainers across 5 regions. As the training resources was re-organized and updated for trainers, and the database for TMET trainers and TMETs was well developed, we believe the capacity building in SCOME can grow rapidly in the following terms based on the Program and TMET structure that we changed and built this term.

Standing Committee on Professional Exchange (SCOPE):

The term 2015-16 was a really good one for SCOPE, as it saw the adoption of the first, three-year Strategic Plan, following consultations held at the African, Americas’, and Eastern Mediterranean Regional Meetings, as well as during the March Meeting 2016.

We were also able to further increase the quality of our exchange program by developing the new Student Handbook, which meets the needs and expectations of the students and universities. We even had the handbook adapted to specific specialties and endorsed by several external partners. The Academic Quality Manual, Upon Arrival Training Manual, and the SCOPE promo flyers were also all updated and distributed to members worldwide. This year saw the development and implementation of the first two Training New Exchange Trainers (TNET) workshops, which aims to train students to conduct Professional and Research Exchange Trainers (PRET) workshops.

The SCOPE family welcomed its newest members (India, South Africa, Ireland, Algeria, Zimbabwe, Kazakhsthan, and Azerbaijan), to reach 100 SCOPE-active national member organizations. Finally, we managed to ensure proper implementation of the new exchange database, with new features and fewer bugs.

Standing Committee on Public Health (SCOPH):

Many were the achievements of SCOPH during this year, thanks to the efforts of a highly dedicated international team. We managed to develop and distribute the World Diabetes Day (WDD) and Zika Virus toolkits, and launch, in collaboration with the World Health Organization, the Training Manual on Climate and health.

We started the term in October by collaborating with the Standing Committee on Sexual and Reproductive Health incl. HIV/AIDS (SCORA) on the Pink October campaign for breast cancer awareness. We then concentrated our efforts on capacity building throughout the term, and re-launched the Public Health Leadership Training (PHLT), with a revised agenda and multiple possible streams. Several PHLTs were held at General Assemblies, Regional Meetings, and Subregional Trainings.

Finally, we created and published in the SCOPH newsletter in order to keep our members updated about the work of our Standing Committee, as well as the opportunities available for them to benefit from.
Standing Committees

Standing Committee on Sexual and Reproductive Health including HIV/AIDS (SCORA):
Throughout the term, SCORA divided its work into three main sections. We organised several campaigns to mark Breast Cancer Awareness Month, Movember, International Day for the Elimination of Violence Against Women, World AIDS Day, HPV Awareness Campaign, International Women’s Day, International Day Against Homophobia and Transphobia, Candlelight Memorial Day, International Day of Action for Women’s Health, and the Campaign to Decriminalise abortion.

Our Capacity Building efforts saw us organise successful SCORA sessions during all General Assemblies and Regional Meetings, with many workshops also extending to Subregional Trainings. A total of 3 International Peer Education Training (IPET), 6 Ipas, and 3 other SCORA-related workshops (NECSE, SECSE, and LACMA) were held.

Finally, our efforts aimed at increasing sustainability of administration, by creating and archiving extensive reports for all activities. We also created the IPET Regulation and the NECSE and SECSE Regulation Manuals.

Standing Committee on Research Exchange (SCORE):
The highlight of the term for SCORE was, without a doubt, the development of the first-ever, three-year Strategic Plan, which will run for the period of 2016-2019.

Much was developed this term, starting with the double-level Capacity Building model, based on exchange trainers who partake in Training New Exchange Trainers (TNET) workshops, to be able to later on conduct Professional and Research Exchange Training (PRET) workshops. We started a new collaboration with the International Association of Dental Students (IADS), opening up SCORE exchange programs to dentistry projects.

Academic Quality was further improved by revising the Evaluation Forms as a first step toward impact assessment, and through the development of Pre-Departure and Upon Arrival training sessions.

In order to support National Officers in their work, we developed several new documents, such as: incoming attribution guideline, explanation about insurances, frequently asked questions, projects guidelines, NORE tutorial, database manuals, etc. We also completed a thorough revision of the SCORE regulations.

Finally, 9 new national member organizations joined the SCORE family, bringing the total number to over 70, for the first time ever!

Standing Committee on Human Rights and Peace (SCORP):
During this term, we aimed to do right by SCORP, and achieve the great potential it truly has. With this in mind, the SCORP international team set out to ensure a structural reform and sustainability of administration, by creating and adopting the first-ever, three-year Strategic Plan. Further, we updated the SCORP manual, the last edition of which was released in 2006, and launched the new NORP manual.

As for our Capacity Building efforts, we created the first edition of the TNHRT Regulation manual, and organised several international campaigns to celebrate Human Rights Day, Refugee Day, and Peace Day.

We adopted creative means of communication, and relied heavily on videos and infographics, to engage as many members in our work as possible. We noticed a 50% increase in the membership of the SCORP Facebook group.
Programs

The term 2015-2016 was the first full term of implementation of the IFMSA Programs. A total of 17 program proposals were adopted between MM2015 and AM2015, and this lead to the challenge of establishing 17 new leadership roles within the Federation, in the form of Program Coordinators.

Throughout the term, we saw close collaboration between many Programs and the relevant Standing Committees, with an aim of achieving their mutual goals of capacity building for medical students worldwide, through the creation of toolkits, sessions, and workshops. By April 2016, all 17 Programs had published their Baseline Assessments, and were on their way toward measuring the impact of all enrolled activities. On the first of July, 14 out of 17 programs submitted their Annual Reports, consisting of the Baseline Assessment, the Impact Report, and recommendations for future generations. 12 of the 14 submitted annual reports were adopted by the General Assembly during AM2017. These reports can be found on ifmsa.org.
Global External Focus Areas:

In order to have a more strategic approach to our advocacy and external representation efforts, the team of officials proposed a new framework called the “Global External Focus Areas” (GEFAs), to guide the external work during the term 2016-2017.

The proposal was developed based on assessments of the internal capacities as well as external opportunities and highlights in global health. Thereby, the GEFAs for the term 2016-2017 are: Social Accountability in Medical Schools, Primary Healthcare, Non-Communicable Diseases, Sexual and Reproductive Health and Rights, Climate Change and Health, Humanitarian Action, Refugees and Migrants Rights and Health, Health in All Policies, Health Workforce, Meaningful Youth Participation.

IFMSA Policy Making:

During the August Meeting 2015, in Macedonia, the General Assembly opened the Task Force on Policy and Representation (TF PS) to implement the conclusions of the small working group (SWG) on IFMSA policy making changes from the Team of Official Meeting 4 (TOM4) in May 2015. 9 months later, a proposal was submitted and adopted in AM2016 with simple majority including several changes, based on the SWG outcomes and additional NMO/TO input: These include but are not limited to:

- The creation of a policy commission that should review the quality of the policy documents before submission
- The format in which documents should be submitted: Policy Statement and Position Paper
- The deadlines that allow more time for consultation to have an inclusive discussion before and during the GA specially when it comes to amendments

The exact process can be reviewed in chapter 15 “Policy” and annex 1 of IFMSA Constitution and Bylaws.

IFMSA Secretariat:

The term 2015-2016 saw the 2nd year of Implementation of the IFMSA Secretariat in its current form. The secretariat currently consists of the International Secretary (Ms. Iris Tomlow) and the representatives of our Bank, Bookkeeping Company, and Website administration.

The Secretariat is based at the Academic Medical Center in Amsterdam, the Netherlands.

Capacity Building Strategy:

In the light of the vision and mission of IFMSA, Capacity Building can not simply be overlooked at as one of the working fields in which the Federation works, but should rather be considered the backbone of all that we are.

IFMSA has undergone huge changes in its Leadership Structure with the aim to highlight the importance of the Capacity Building in the Federation and the importance of having a strategic overview of the work done in such a field. In order to tackle this issue, a SWG was created during TOM 4, whose work was to accomplish the following goals:

- To conduct a needs assessment about Capacity Building in IFMSA;
- To have the Final analysis by August Meeting;
- To approve the Capacity Building Strategy Concept Note in the next August Meeting;

The Concept Note approved at AM2016 will be the basis for the IFMSA Capacity Building Strategy, mandating the next TO to properly vote/decide on the priorities for IFMSA and to develop the Strategic Plans for each priority according to the Strategic Plan Framework included in the document. The goal would be to discuss and vote on the IFMSA Strategy for 2017-2020 in August Meeting 2017.
The IFMSA General Assembly adopted a new set of Bylaws regarding investigations as a result of the outstanding work of the Task Force on the IFMSA Investigating Mechanisms. This new way of approaching investigations aims at improving the framework of the investigations as well as at stressing the idea that investigations are last resorts that should not be focused with the perceived wrongdoings of IFMSA Officials, but on issues that will in the end improve our Federation.

In summary, the major changes can be summarized by:

- Definition of an investigation: “An investigation is a formal process in which the Supervising Council inspects an issue raised by an NMO or an Official with the goal of clarifying how actions of individuals, groups and other circumstances led to the issue raised. If the issue has caused harm or still has the potential to cause harm to the Federation, both internally and/or externally, the Supervising Council is expected to advise the Federation on how the issue can be avoided in the future and take action to minimise or avoid harm immediately”.

- How to request an investigation:
  - The form for the request shall be stamped and signed by the NMO President and sent to supco@ifmsa.org, unless requested by a member of the Team of Officials in which case the request must be made through the Officials@ifmsa account;
  - A request of an investigation shall be done through the Google form.
Ipas grant:
The IFMSA and Ipas partnership was initiated in 2010 when the Nigerian Medical Students’ Association, and Medical Students for Choice in North Carolina paved the way for an invitation to Ipas’ Youth Program to lead a workshop at IFMSA General Assembly. After this invitation, Ipas continued leading sessions on sexual and reproductive rights and abortion at General Assemblies and Regional Meetings, providing financial support to members to participate in these workshops. In 2012, IFMSA adopted a policy statement on sexual and reproductive rights including the right to safe abortion. Later in 2013, the IFMSA Standing Committee on Reproductive Health including AIDS (SCORA) adopted access to safe abortion as one of its five focus areas for the next two years. That same year, IFMSA and Ipas formalized the partnership with a Memorandum of Understanding.

This year has been yet another example of our fruitful cooperation with many examples of new ideas such as the collaboration in high level meetings and the mutual support during advocacy efforts.

Activities conducted using the Ipas grant:
1. African Regional Meeting
2. SCORA International Team Meeting
3. Americas Regional Meeting
4. Eastern Mediterranean Regional Meeting
5. Pre General Assembly workshop (March Meeting)
6. Asia Pacific Regional Meeting
7. Pre General Assembly workshop (August Meeting)
8. FMSA Delegation for 60th Session on Conference of Status of Women
9. IFMSA Delegation for 49th Session on Population and Development

New Challenges and Lessons learnt:
1. Trainings during Regional Meetings and pre General Assemblies have very good feedback from participants.
2. The number of participants has decreased. However, we believe that by further enhancing our promotion tools and supporting them more financially this can be efficiently tackled.
3. Expanding our cooperation to include some other women’s and adolescents’ reproductive health issues in the workshop’s agenda gave some new insights to the participants on women’s health issues.

WHO Grant for Youth Pre-WHA:
IFMSA signed a financial agreement with the WHO Global Health Workforce Alliance (GHWA) to receive US$10,000. The objectives were to inform and disseminate HRH deliberations at the 69th WHA, to create a group of GHWA/IFMSA Student Ambassadors to cover HRH at the 69th WHA, and to provide social media coverage of the HRH deliberations. The deliverables from the IFMSA side were the development and active dissemination of a position statement in support of the Global strategy on HRH, the mainstreaming of HRH issues in all Pre-WHA sessions, with a comprehensive social media coverage at WHO key events and a final report summarizing HRH activities at the 69th WHA.

UNESCO Grant for TAMYL:
Training African Medical Youth Leaders (TAMYL) was a pilot project designed by IFMSA and endorsed by UNESCO through its Participation Programme to empower African members with the skills and knowledge to develop their own activities on the national and local levels, create local agents of change in the global public health arena, and foster networking and collaboration within the region.

This 3-day event took place during
the IFMSA African Regional Meeting (ARM) 2015 in Rwanda, and gathered 17 medical students from Rwanda, Kenya, Burundi, Sudan, Ethiopia and Gambia. Participants were exposed to a wide range of topics, such as communication strategy, leadership, project and financial management, strategic planning, and partnerships. In the future, these medical students are expected to continue expanding their personal leadership, managing and coordinating abilities as they replicate similar workshops in their local and national committees.

UNESCO Grant for Bioethics Conference:

IFMSA coordinated an international Student Task Force, composed of 12 medical students from all over the globe, at the 11th World Conference of Bioethics, Medical Ethics & Health Law held under auspices of the UNESCO Chair in Bioethics, Haifa and in collaboration with the World Medical Association (WMA). The meeting brought together researchers, experts, health professionals, students and others working on the topics of health law and bioethics.

This specific cooperation with UNESCO with the goal of increasing student participation in the Conference was the first of its kind and also regarded highly successful both by the organizers, several participants and the Student Task Force. Our members were present and visible in all the sessions, whether presenting oral sessions or posters, asking questions in the various sessions, or searching for opportunities for future collaboration. IFMSA will continue working with the Chair for the two upcoming Conferences as well as looking into opportunities to support ongoing local national and international initiatives by students to improve Bioethics and Medical Education, including through the recently adopted Programme on Ethics and Human Rights in Health.

Academic Medical Center (AMC):

As part of the continuous collaboration between IFMSA and AMC on establishing the IFMSA Secretariat, AMC contributed with 5000 Euro towards the IFMSA Budget Item on the IFMSA Secretariat. Furthermore, AMC provides IFMSA with the office. Recently, it was agreed that a new expansion of the Secretariat will be developed, incl. Hiring of an additional staff member and including a new intern to work directly with the IFMSA Team of Officials.

AMEE student initiatives grant:

This year, the first call for the newly established AMEE student initiatives grant was launched, counting for an annual 2000 GBP financial award. The grant is coordinated by the two student representatives of the AMEE Executive Board (the IFMSA Liaison Officer for Medical Education issues and the EMSA AMEE representative) and the Immediate past president of AMEE. After a review of many inspiring activities that hope to improve medical education worldwide, the winners of the first round of applications are the Disaster SISM project (SISM Italy) and the DREEM project (HelMSIC Greece). The criteria have been re-reviewed this September during the AMEE Executive meeting after this pilot edition, and the new call will be released shortly.
The position of Vice-President for Finance was first occupied by Mr. Murat Askoy (Turkey) until March 2016, then by Mr. Stefan Vasilevski (Macedonia) until May 2016. It remained vacant until the interim appointment of Mr. Joakim Bergman happened in August 2016.
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Armenia (AMSP)
Australia (AMSA)
Austria (AMSA)
Azerbaijan (AzerMDS)
Bangladesh (BMSS)
Belgium (BeMSA)
Bolivia (IFMSA-Bolivia)
Bosnia & Herzegovina (BoHeMSA)
Bosnia & Herzegovina – Republic of Srpska (SaMSIC)
Brazil (DENEM)
Brazil (IFMSA-Brazil)
Bulgaria (AMSB)
Burkina Faso (AEM)
Bulgaria (bvmd)
Burundi (ABEM)
Cameroon (CAMSA)
Canada (CFMS)
Canada – Québec (IFMSA-Québec)
Catalonia (AECs)
Chile (IFMSA-Chile)
China (IFMSA-China)
China – Hong Kong (AMSAHK)
Colombia (ASCESCMI)
Costa Rica (ACEM)
Croatia (CroMSIC)
Czech Republic (IFMSA-CZ)
Democratic Republic of the Congo (MSA-DRC)
Denmark (IMCC)
Dominican Republic (ODEM)
Ecuador (AEMPI)
Egypt (IFMSA-Egypt)
El Salvador (IFMSA-El Salvador)
Estonia (EstMSA)
Ethiopia (EMSA)
Fiji (FJMSA)
Finland (FiMSIC)
France (ANEMF)
Gambia (UniGaMSA)
Georgia (GMSA)
Germany (bvmd)
Ghana (FGMSA)
Greece (HelMSC)
Grenada (IFMSA-Grenada)
Guatemala (IFMSA-Guatemala)
Guinea (AEM)
Guyana (GuMSA)
Haiti (AHEM)
Honduras (IFMSA-Honduras)
Hungary (HuMSC)
Iceland (IMSA)
India (MSAI)
Indonesia (CIMSA-ISMKI)
Iran (IMSA)
Iraq (IFMSA-Iraq)
Iraq – Kurdistan (IFMSA-Kurdistan)
Ireland (AMSI)
Israel (IMSS)
Italy (SISM)
Jamaica (JAMS)
Japan (IFMSA-Japan)
Jordan (IFMSA-Jo)
Kazakhstan (KazMSA)
Kenya (MSAKE)
Korea (KMSA)
Kosovo (KOMS)
Kenya (MSAKE)
Kuwait (KuMSA)
Latvia (LaMSA)
Lebanon (LeMSC)
Lesotho (LEMBA)
Libya (LMSA)
Lithuania (LMSA)
Luxembourg (ALEM)
Malawi (UMMSA)
Mali (APS)
Malta (MMSA)
Mexico (IFMSA-Mexico)
Mongolia (MMLA)
Montenegro (MoMSC)
Morocco (IFMSA-Morocco)
Namibia (MNSA)
Nepal (NMSS)
The Netherlands (IFMSA NL)
Nicaragua (IFMSA-Nicaragua)
Nigeria (NMMS)
Norway (NMSA)
Oman (MedSc)
Pakistan (IFMSA-Pakistan)
Palestine (IFMSA-Palestine)
Panama (IFMSA-Panama)
Paraguay (IFMSA-Paraguay)
Peru (IFMSA-Peru)
Peru (APEM)
Philippines (AMSA-Philippines)
Poland (IFMSA-Poland)
Portugal (ANEM)
Qatar (QMSA)
Republic of Moldova (ASRM)
Romania (FASMR)
Russian Federation (HCCM)
Russian Federation – Republic of Tatarstan (TaMSA)
Rwanda (MEDSAR)
Saint Lucia (IFMSA-Saint Lucia)
Senegal (FNESS)
Serbia (IFMSA-Serbia)
Sierra Leone (SEMSA)
Singapore (AMSA-Singapore)
Slovakia (SloMSA)
Slovenia (SloMSC)
South Africa (SAMS)
Spain (IFMSA-Spain)
Sudan (MedSIN)
Sweden (IFMSA-Sweden)
Switzerland (SwimSA)
Syrian Arab Republic (SMASA)
Taiwan (FMS)
Thailand (IFMSA-Thailand)
The Former Yugoslav Republic of Macedonia (MMSA)
Tanzania (TaMSA)
Togo (AEMP)
Trinidad and Tobago (TTMSA)
Tunisia (Associa-Med)
Turkey (TurkMSC)
Turkey – Northern Cyprus (MSANC)
Uganda (FUMSA)
Ukraine (UMSA)
United Arab Emirates (EMSS)
United Kingdom of Great Britain and Northern Ireland (SIGH)
United States of America (AMSA-USA)
Uruguay (IFMSA-URI)
Uzbekistan (Phenomenon)
Venezuela (FEVESOCEM)
Yemen (NAMS)
Zambia (ZaMSA)
Zimbabwe (ZiMSA)