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 125 National Member Organizations from 118 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.
Greetings from the Team of Officials 2013 - 2014

What a journey this year has been!

It is with great pleasure that we invite you to have a brief glance into this year’s activities of the International Federation of Medical Students’ Associations (IFMSA) – one of the largest global student organizations with member associations in almost 120 countries.

Established in 1951, IFMSA was created to spur international collaboration in a world torn apart by World War II. It started as a network of exchange opportunities, but it has since grown to become a groundbreaking, youth-driven, non-political organization in the realms of student exchanges, public health projects, capacity building for medical students and a voice organ for future health professionals. The IFMSA aims to create culturally sensitive medical students who are able to grasp global health problems and collaborate to address the global burdens of disease and, thereby, create healthier communities around the world.

With this annual report we hope to broadcast some of the most important highlights from the term 2013-2014, showcase the diversity of our international and regional meetings, give a glimpse of our advocacy efforts on global institutions and governance bodies, and provide an overview of the financial situation of the organization.

The IFMSA Team of Officials 2013 - 2014.
Here We Met
African Regional Meeting
Addis Ababa, Ethiopia - December 2013
The 9th African Regional Meeting was one to remember. It was rich in educative sessions and the participants were so lively and eager to learn. Participants were always in small groups discussing and learning. Amongst others, they learnt about the requirements of a five star doctor as recommended by the World Health Organization. This training sought to foster attitude change amongst the future physicians and equip them with knowledge about the responsibilities of a doctor. They also had a Co-evolution for Health workshop. These sessions were to inculcate in the future physicians a spirit of Pan-Africanism and love for their continent. The delegates made commitments to be leaders of social change and transformation of health in Africa through local action in their communities.

Americas’ Regional Meeting
Panama City, Panama - January 2014
The Americas RM2014 was definitely one for the history books! During the meeting we held very productive and successful sessions with the participation of over 150 delegates from 19 different NMOs from the region. We also had 13 Officials participating in the Regional Meeting and 14 of them in the Pre-Regional Meeting, which incidentally had 5 running workshops, including the first Training Old Trainers in the region and the IFMSA Team of Officials Meeting 2 (first one since 2006). All of these numbers set a record in our region, making this Regional Meeting an extra special one!

Eastern Mediterranean Regional Meeting
Kuwait City, Kuwait - January 2014
January 2014 was the time where more than 150 medical students from all over the EMR region met for their annual IFMSA Regional Meeting in Kuwait. Under the theme event of “Medical ethics in prospect of medical students”, participants were able to share their ideas to inspire each other. The Projects Fair included more than 20 projects along with 15 project presentations that all were very competitive. The variety of the topics addressed was impressive, and this meeting was a great starting point for a lot of achievements that took place on the regional level this term.

63rd General Assembly March Meeting
Hammamet, Tunisia - March 2014
From March 3rd to March 9th, more than 900 medical students gathered in Hammamet, Tunisia for the 63rd March Meeting General Assembly. Over the course of those few days, participants from over 100 countries were able to explore health in a post-2015 agenda, the theme of this event. The Hammamet Declaration, the outcome of several hours of debates, discussions and exchanges, was adopted unanimously by the plenary. Additionally, the national representatives of our member organizations were able to vote on the Executive Board 2014-2015, policy statements and several agreements with external partners. Joint sessions were also held between our Standing Committees so to foster collaboration. Finally, IFMSA welcomed four new National Member Organizations: AEM-Guinea, ASEM-Honduras, UNIGAMSA-Gambia and UMSA-Ukraine.

European Regional Meeting
Warsaw, Poland - May 2014
The theme of the meeting was “The Year of the Brain in Europe,” 200 medical students from about 40 European countries took part in the meeting. The meeting was hosted by IFMSA-Poland who did everything in their power to provide us with a positive working environment. Key topics that were discussed include IFMSA’s reform process, how to improve formal and non-formal medical education, and the use of peer-education as a vehicle to raise awareness on public health as well as sexual and reproductive health issues. Participants had the opportunity to present and promote their local and national projects, to disseminate best practices and foster trans-national collaboration on pressing global health issues.

63rd General Assembly August Meeting
Taipei, Taiwan - August 2014
FMS-Taiwan was the host of the IFMSA 63rd August Meeting General Assembly, held in Taipei from August
5th to August 11th. The President of Taiwan, HE Ma Ying-Jeou addressed a few inspiring words to the participants during the Opening Ceremony of the event. The meeting itself was rich in culture, and gave delegates the opportunity to taste and experience Taiwan with daily cultural activities. During August Meeting 2014 IFMSA also chose the definitive path to concluding our reform process, by adopting leadership structure changes, implementing our new programs, our first three-year strategy and establishing a permanent secretariat. The Team of Officials for the term 2014-2015 was also elected in Taiwan. Furthermore, a successful contracts fair allowed national member organizations to sign contracts to send 13,000 students on life changing clinical and research exchanges throughout the following exchange season. Finally, IFMSA cheerfully welcomed seven new national member organizations: AEMB-Benin, FJMSA-Fiji, IFMSA-Uruguay, KazMSA-Kazakhstan, AMSI-Ireland, AMSA-Singapore and ZIMSA-Zimbabwe.

Asia Pacific Regional Meeting
Dhaka, Bangladesh - September 2014

The Asia-Pacific Regional Meeting (APRM) 2014 was held in Dhaka, Bangladesh between the 15th and the 21st of September 2014. Through this event, the participants were delivered skills and knowledge on the theme of Disaster Risk Management, as well as other pertinent global health topics. Some of the highlights of the APRM include the Pre-APRM workshops; the research poster and projects’ fair; small working groups on disaster risk management; and of course, social events such as the National Food and Juice Party and the Bengali cultural night. All the participants who represented 14 countries from around the Asia-Pacific had fun and an informative time during this meeting.
Medical Education (SCOME)

If someone would say that SCOME has seen a great term this year it would be an understatement. The group has never felt so alive. The General Assemblies and Regional Meetings were huge successes. We have developed a brand new capacity building program called Training Medical Education Trainers to ensure no knowledge or skills are lost. And we have expanded our capacity building efforts greatly at the sub-regional levels. The International Team did its best to bring SCOME to the local and national levels through interactive (video) reporting and regional online meetings, and we doubled our Social Media outreach. We witnessed the adoption of a Global Policy in Medical Education that reaffirms our stance on medical education. We worked side by side with the World Health Organization on transformative education.

Our work to empower medical students to become leaders in health care is as important as ever, and we are confident that the incoming International Team will take up the gauntlet and continue the amazing work that was done this term.

Professional Exchange (SCOPE)

SCOPE is the first standing committee that was built by the founders of IFMSA back in 1951 in Denmark. It had the aim to reach the international level and to work with people all around the world. Since then and until now, SCOPE is growing bigger as IFMSA is. With over 11000 medical students all over the world participating per year and exchanging their university, city, and country to get a broader perspective on the differences in medical health care, SCOPE in many countries represents the largest medical students exchange program. The main purpose is to promote the cultural understanding and cooperation among medical students and other health professionals through the international exchanges. And amazingly it is organized entirely by medical students with the help of their medical faculties to provide wonderful experiences to any students who are involved in the program, ultimately making them more sensitive to the differences in healthcare across the globe. Another goal is to emphasize the work of SCOPE officers all around the world to get the recognition from their universities. A good news that happened a while ago is that the SCOPE and SCORE Programs are now endorsed by the World Federation for Medical Education (WFME), which increases our motivation to work more on the recognition on the exchanges within the country and local committee areas.

Public Health (SCOPH)

To build future public health leaders, SCOPH this year created its own International Workshop on Developing Leadership, which was given as pre-March Meeting and pre-Asia Pacific Regional Meeting workshops. Internal regulations for the standing committee were crafted to provide the International Team and our national officers a sound framework that defines task descriptions and expectations from the elected and appointed leaders in SCOPH. We hope this leads to transparency and accountability in our work. The dedicated SCOPH Facebook Group grew by a whopping 133% and now has more than 7,000 members, and we are certain that our regular communication via printed and electronic publications has underpinned our efforts to engage, inspire and empower local volunteers to be local agents of public health improvement. SCOPH members have organized hundreds of local and national events, workshops and projects, and it is by supporting their hard work on the ground that IFMSA has a real impact. Internationally, key achievements include the celebration of World Tuberculosis Day, working with the European Federation of Psychology Students’ Associations on reducing stigma of mental illness, and the joint efforts of IFMSA and the International Veterinary Students Association on increasing rabies control around the world. Being a large and diverse standing committee in IFMSA and covering thirty-seven basic health issues, we will work hard to ensure that IFMSA will have relevant Programs that reach out to and empower our members, as well as their local and national activities.

Reproductive Health incl. HIV/AIDS (SCORA)

This year has been full of changes and successes in SCORA. We have created and voted in the SCORA
Research Exchange (SCORE)

SCORE enables more than 2600 medical students from all around the globe to partake in a 4 week high quality research project in a foreign country. Starting in October 2013 with 60 SCORE active NMOs, SCORE welcomed this term five new members to its program. Quality was the key word for the term. A lot of effort was invested by all IT members to improve the Academic Quality of the Research Exchange program, having the GAs, RMs and Exchanges Workshops sessions focused on this topic. The SCORE internal Documents were available to all members, including the updated MoRE-Manual on Research Exchange. The SCORE Regulations were deeply revised, being now more simple and in line with the needs of the Standing Committee. One important achievement was the newly implemented evaluation tool, the SCORE Logbook, which is being used as a quality assurance method. Additionally SCORE managed to update all its 1479 Research Projects in the database and new platforms were created to enhance the promotion of the Research Exchange. Finally, the endorsement of the World Federation for Medical Education (WFME) boosted the motivation of SCORE Officers to foster the efforts to have our Research Exchange program recognized locally, nationally and internationally.

Human Rights & Peace (SCORP)

We, in SCORP, celebrate Human Rights Day every December, with advancing freedom and human rights is our daily work, but year 2013 was very special for us. IFMSA celebrated the 20th anniversary of the 1993 World Conference on Human Rights. To express its gratitude, we organized an online photo campaign for the Human Rights Day 2013, titled “The world is changed by your example”, which was dedicated to those who, through and action, have made a difference and changed our world. This has gained a huge success and attention all over the globe! Part of this campaign was also a creation of our own video format declaration of human rights with its thirty articles. We promise to keep up our work for human rights and peace at least for the next 20 years. We no longer have to seek for an answer to the question raised by Eleanor Roosevelt “Where, after all, do human rights begin?”, because daily we are convinced by actions of IFMSA members that it is true that they begin at homes, by acting your example for promotion, protection and respect of human rights. We want to highlight and share this success with you, because thanks to the worldwide participation we cannot fall out of love with our standing committee.
A New Way for IFMSA

This term IFMSA took a quantum leap. Through an internal reform process fundamental structures in the organization were re-invented to give way for creativity, new ideas and much-needed organizational strengthening. The new Programs give our activities a novel, simplified and outcome-oriented structure. It will provide a flexible framework for National Member Organizations’ activities, no matter if they are one-day events, long-term projects or somewhere in between. The Programs model will hopefully take the Federation to a whole new level as a service provider for our members. After years of brainstorming and consultations involving countless former, current and future IFMSA leaders, it finally happened: at August Meeting 2014 our member organizations agreed on a new leadership structure that will ensure rounded, responsive and representative decision making. Our International Secretariat was also finally established, with the financial, moral and organizational support of Academic Medical Center in Amsterdam, The Netherlands. The aim is to have professional staff that can support our volunteers, and make their work less strenuous and more fun. Finally, the Federation’s three-year Strategy 2014-17 was adopted, to guide the annual work plans for future Teams of Officials. This way, the strategy seeks to ensure continuity, transparency and accountability in the work of the Federation.

e-Health

Health care has been deeply transformed by digital revolution at every level and many new paradigms allowed by the application of Electronic Health Records (EHR) and Information and Communication Technologies (ICT) in medicine are already mainstream in the everyday medical practice. The young students and doctors are expected to have a deep understanding of e-Health and its implications. e-Health topic do not receive the deserved attention by the average medical student, and this is not acceptable in a generation of future doctors that is going to be deeply influenced by these technologies. The IFMSA decided to advocate this year to increase the awareness about e-Health among medical students from all over the world and has tackled the topic with four main initiatives: 1) a policy statement about e-Health has been approved in MM14; 2) a 3 days workshop about e-Health was run twice before MM14 in Tunisia; 3) a participation at the Med-e-Tel Conference in Luxembourg in April 2014, organized by the International Society for Telemedicine and e-Health and 4) the creation of a Small Working Team on e-Health composed of more than 20 members from 13 countries. The efforts on making e-Health an important topic to take care of by medical students are not going to stop, and hopefully we may be able to see an IFMSA Program on e-Health soon.

World Health Assembly 2014

Every year, the World Health Organization (WHO) gathers its member states, non-governmental organizations (NGOs), civil society groups and other affiliated parties at the World Health Assembly (WHA). The WHA is the highest decision making body of the WHO. Here, member states gather annually to discuss key global health issues. IFMSA has sent a delegation of over 25 students, who executed a full advocacy strategy, contacted member states and NGOs, wrote and delivered interventions, and distributed policy briefs. Key issues addressed by IFMSA were meaningful youth participation, Youth and adolescent health, NCD’s, Post 2015 & Universal Health Coverage and Access to essential medicine. Another highlight were the side events: One side-event organized with the World Medical Association, where keynote speaker Sir Michael Marmot addressed Violence Against Women, and one side-event was hosted by IFMSA on meaningful youth participation. Prior to the WHA, IFMSA organized a four-day youth-led capacity building event, together with PMNCH and Geneva Graduate Institute. It was a great opportunity for young, motivated students, passionate about global health equity, to learn about global health diplomacy and to gain skills to influence decision makers. It sounds like us students, let loose into the halls of the palace of nations, have a lot of power to change.
WFME Endorsement

The Executive Council of the World Federation for Medical Education agreed, at its meeting in Istanbul in April 2014, to endorse the student exchange programs that have been managed by the IFMSA continuously since 1951. The WFME agreed that these programs are very professionally organised, with good academic outcomes, and are commended to medical schools worldwide. The exchange programs for professional and research exchange involve national member organizations of IFMSA in near 100 countries worldwide and 990 local student organizations. Every year more than 12,000 students participate making the exchange program one of the largest student-run exchange programs in the world. IFMSA is deeply thankful for this endorsement and we commit to continue improving the quality of our exchange programs.

Finances

We would like to sincerely thank our financial partners and funders. Without their support many of our activities this year would not have been possible. IFMSA received over €50,000 from Ipas, PMNCH and Norad to carry out capacity building and advocacy activities. We are very happy that the partnership with Academic Medical Center (AMC) in Amsterdam, The Netherlands, was re-launched this year. AMC is hosting IFMSA’s International Secretariat, and they provide funding for our secretariat staff. The secretariat will be given an increasingly central role to render IFMSA a professionally run volunteer organization that offers medical students a platform to play, learn and meet, while carrying out activities with a positive impact on our communities. We hope that the new IFMSA Programs will render national and local activities in our member organizations visible to international and regional grant makers. We believe they will open the door to new funding opportunities from international and regional sources to our member organizations. As a rapidly growing organization expanding its funding from external sources, and in an effort to further professionalize its management, IFMSA has as of the beginning of financial year 2014-15 commissioned MTH Accountants and Advisers to be in charge of its daily financial management, in collaboration with the Executive Board.
Team of Officials 2013 - 2014

The Executive Board

Joško Miše, President
Fredrik Johansson, VPE
Dimitris Stathis, VPI
Salma Hassan, Sec-Gen
Benjamin Skov Kaas-Hansen, Treasurer

The Regional Coordinators

Gerald Makuka, Africa
Elias Ortega, Americas
Bronwyn Jones, Asia Pacific
Mona Faramawy, EMR
Ashley Wills, Europe

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Farhan Mar’i Isa, SCOPE-D
Petar Velkov, SCOPH-D
Joe Cherabie, SCORA-D
Sara Cedras, SCORE-D
Monika Szamosova, SCORP-D
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Waruguru Wanjau, WHO
Agostinho Morreia de Sousa, Medical Education issues
Ivana di Salvo, Research & Medical Associations
Altagracia Mares de Leon, Public Health issues

Kelly Thompson, Sexual & Reproductive Health issues
Pedro Correia de Miranda, Student Organizations
Moa Herrgard, Rights & Peace issues

The Support Division Directors

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Omar Cherkaoui, New Technologies
Karim Abu Zied, Projects
Diogo Martins, Publications
Ahmed Reda, Trainings

The Supervising Council

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Luka Kovac
Elizabeth Wiley
Steen Fagerberg
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Algeria (Le Souk)
Argentina (IFMSA-Argentina)
Armenia (AMSP)
Australia (AMSA)
Austria (AMSA)
Azerbaijan (AzerMDS)
Bahrain (IFMSA-BH)
Bangladesh (BMSS)
Belgium (BeMSA)
Benin (AEMB)
Bolivia (IFMSA-Bolivia)
Bosnia and Herzegovina (BoHeMSA)
Bosnia and Herzegovina - Rep. of Srpska (SaMSIC)
Brazil (IFMSA-Brazil)
Bulgaria (AMSB)
Burkina Faso (AEM)
Burundi (ABEM)
Canada (CFMS)
Canada-Quebec (IFMSA-Quebec)
Catalonia - Spain (AECs)
Chile (IFMSA-Chile)
China (IFMSA-China)
China-Hong Kong (AMSAHK)
Colombia (ASCEMCOL)
Congo, Democratic Republic of (Masa-DRC)
Costa Rica (AcEM)
Croatia (CrOcMISc)
Cyprus (CyMSA)
Czech Republic (IFMSA-CZ)
Denmark (IMCC)
Dominican Republic (ODEM)
Ecuador (AFEMPP)
Egypt (IFMSA-Egypt)
El Salvador (IFMSA-El Salvador)
Estonia (EstMSA)
Ethiopia (EMS)
Fiji (FJMSA)
Finland (FiMSIC)
France (ANEMF)
Gambia (UniGaMSA)
Germany (BFVMD)
Ghana (FGMSA)
Greece (HelMSIC)
Grenada (IFMSA-Grenada)
Guatemala (ASOCEM)
Guinea (AEM)
Guyana (GuMSA)
Haiti (AHEM)
Honduras (ASEM)
Hungary (HuMSIRC)
Iceland (IMSc)
Indonesia (CiMSA-ISMKI)
Iran (IMSA)
Iraq (IFMSA-Iraq)
Ireland (AMSI)
Israel (IFMS)
Italy (ISM)
Jamaica (JAMS)
Japan (IFMSA-Japan)
Jordan (IFMSA-Jo)
Kazakhstan (KazMSA)
Kenya (MSAKE)
Korea (KMSA)
Kuwait (KuMSA)
Kurdistan - Iraq (IFMSA-Kurdistan/Iraq)
Latvia (LaMSA-Latvia)
Lebanon (LeMSIC)
Libya (LMSA)
Lithuania (LMSA)
Luxembourg (ALEM)
Malaysia (SMAMMS)
Mali (APS)
Malta (MMSA)
Mexico (IFMSA-Mexico)
Montenegro (MoMSIC-Montenegro)
Morocco (IFMSA-Morocco)
Namibia (MESANA)
Nepal (NMSS)
New Zealand (NZMSA)
Nigeria (NMSA)
Norway (NMSA)
Oman (SQU-MSG)
Pakistan (IFMSA-Pakistan)
Palestine (IFMSA-Palestine)
Panama (IFMSA-Panama)
Paraguay (IFMSA-Paraguay)
Peru (APEMH)
Philippines (AMSA-Philippines)
Poland (IFMSA-Poland)
Portugal (PorMSIC)
Romania (FASMR)
Russian Federation (HCCM)
Rwanda (MEDSAR)
Sierra Leone (SLEMSA)
Singapore (AMSA-Singapore)
Slovakia (SloMSA)
Slovenia (SloMSIC)
South Africa (SAMSA)
Spain (IFMSA-Spain)
St. Kitts & Nevis (IFMSA-SKN)
Sudan (MedSiS-Sudan)
Sweden (IFMSA-Sweden)
Switzerland (SwimSA)
Taiwan (FMS-Taiwan)
Tatarstan-Russia (TaMSA-Tatarstan)
Tanzania (TAMS)
Thailand (IFMSA-Thailand)
The Former Yugoslav Republic of Macedonia (MMMSA-Macedonia)
The Netherlands (IFMSA-NL)
Tunisia (ASSOCIA-MED)
Turkey (TurkMSIC)
Uganda (FMUSA)
Ukraine (UMSA)
United Arab Emirates (EMSS)
United Kingdom of Great Britain & Northern Ireland (Medsin-UK)
United States of America (AMSA-USA)
Uruguay (IFMSA-URU)
Venezuela (FEVESOCEM)
Zambia (ZAMSA)
Zimbabwe (ZIMSA)

medical students worldwide

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