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IFMSA Policy Document Sustainable Development Goals

Proposed by Team of Officials

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Policy Commission

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Policy Statement

Introduction

The world has seen critical advances in human development since the beginning of the century. The 2030 Agenda for Sustainable Development perceives this and gives a valuable universal system to reinforce collective action towards common objectives, embodying an agenda that is relevant to countries at all levels of development. Responsibility for implementing the 2030 Agenda lies with countries, governments and civil society, including youth organizations such as IFMSA. It is critical that efforts are translated into concrete, time-bound action plans, partnerships and promoting synergies.

IFMSA Position

The IFMSA attests comprehensive youth engagement in pursuing the 2030 Agenda. It is of most extreme significance on all degrees of advancement, from initiatives at local level to creation of policies and high-level decision making processes. We promote and support the accomplishment of the SDGs, as medical understudies are essential partners in the course for global prosperity, which is reflected in our comprehensive work towards many SDGs' targets. The IFMSA will continue to support and direct its work to contribute to the realization of the 17 SDGs. This will be ensured by events such as global meetings, workshops, campaigns, training events, international clinical and research exchanges as well as fostering national and community-based activities performed by National Member Organizations. We are committed to motivating our members to work towards contributing to the global movement related to the SDGs and increase education around the goals and the understanding of what they are.

Call to Action:

Governments and local authorities:

1. To invest human resources, time and funds to support initiatives contributing to the implementation of the SDGs' 17 goals through its 169 targets.
2. To ensure and support youth representation and active participation in decision making, implementation processes and official delegations to SDG-related events.
3. To adopt the "Health in All Policies" approach, systematically and explicitly, taking into account the health implications of decisions.
4. To empower its residents and work towards reducing inequalities between all social groups.
5. To ensure accountable, effective, inclusive and transparent public and private institutions at all levels and foster their collaboration on the SDGs' achievement.
6. To build peaceful, just and inclusive societies that provide equal access to justice based on respect for human rights, effective rule of law and good governance at all levels.
7. To focus on developing locally calculable indicators for better monitoring of each target.
8. To voluntarily and regularly produce national reports on progress towards SDGs.
9. To partner with the private sector, civil society and governments to achieve collaborative actions on SDGs based on shared values and goals.
10. To strengthen international collaboration to encourage the implementation of strategies that are effective and sustainable at an international and local level.

NGOs and International Agencies:



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1. To create programs for volunteers to gain knowledge and experience in the field of the SDGs and the 2030 Agenda.
2. To increase the level of awareness on the significance of the SDGs and the 2030 Agenda among governments, civil society and the private sector.
3. To implement an evidence-based approach to assessing the impact of SDGs
4. To produce and share updated data and information on the progress of the 2030 Agenda.
5. To highlight the role of youth and ensure its meaningful participation in SDGs' progress.

Medical school, clinical hospitals and healthcare sector:

1. To promote multidisciplinary collaborations between professionals of the healthcare sector and other professionals to work together on the SDGs.
2. To adopt robust policies to align work and relevant investments with the UN 2030 Agenda
3. To accelerate the advocacy efforts on achieving universal health coverage.
4. To recognize and address different health needs of vulnerable populations.
5. To commit to improvement of working conditions in the healthcare sector, including the safety of jobs, decent pay, gender-sensitive policies, sufficient staffing and adequate distribution.
6. To emphasize the importance of services on sexual and reproductive health and rights, mental health and neglected tropical diseases.
7. To work towards more sustainable healthcare systems and their green transformation.
8. To promote, support and implement initiatives for the community, especially student-led campaigns, that aims to enhance the progress toward achieving the SDGs.
9. To provide financial and logistical support for healthcare students in their activities and initiatives toward achieving a sustainable world.
10. To support student-run exchange programs with the aim to promote global health orientation and advocacy among future health workers.
11. To develop the medical education system into a more sustainable and socially accountable one, aiming to build future health workers capable of tackling the global health challenges.
12. To conduct research that aims to improve the quality, accessibility, and affordability of care and reduce public health threats such as antimicrobial resistance and environmental health.

NMOs and IFMSA members:

1. To implement strategy and the Standing Committee's framework that tackles SDGs.
2. To educate its members on the importance of the SDGs and the ways of its implementation in all levels of IFMSA work.
3. To recognize the crucial role of youth in achieving SDGs and foster youth inclusion in spaces, activities and decision making that works on sustainable development.
4. To establish monitoring mechanisms that evaluate the NMOs' internal and external work based on SDGs' contribution.
5. To initiate and develop shadow reporting structures that aim to receive credible national data.



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Position Paper

Background information

The 2030 Agenda for sustainable development is an established plan adopted by all the United Nations Member States in the year of 2015, with the purpose to achieve peace and prosperity for the people and the planet. To achieve these objectives, 17 Sustainable Development Goals (SDGs) were established, serving as an urgent call for action by all countries, organizations and citizens (1).

In a historical context, in September of 2000 at UN Headquarters the Millennium development goals (MDGs) were firstly adopted, as measurable goals to reduce extreme poverty by 2015 (1). In 2012, at the United Nations Conference on Sustainable Development (Rio+20) in Brazil, member states adopted the document "The Future We Want" that decided to develop a number of SDGs to increase the reach of the MDGs to a universal level, increasing intersectionality and reach, as well as to establish the High Level Political Forum on sustainable development (1).

In a general sense, the 17 SDGs and 169 targets seek to scale an ambitious universal agenda to build on the MDGs, seeking to integrate an indivisible balance of economic, social and environment to fully achieve sustainable development for all (2).

Discussion:

Youth Involvement in SDGs

According to the UN, Youth are those persons who are between 15 and 24. Today the number of youth is close to 1.2 billion (3). In SDGs, young people play an important role as 65 out of 169 targets directly refer to young people, including the emphasis on empowerment, participation and their well-being (4). In SDG 2 (Zero Hunger) special attention was given to the needs of adolescent girls. SDG 4 (Quality Education) focuses on access to school, equal participation and developing skills among youth. SDG 5 (Gender Equality) specifically targets early marriages but all targets in this goal encompass young people in it. In SDG 8 (Decent Work and Economic Growth) working conditions, unemployment of youth and global strategy for youth employment is tackled. SDG 10 (Reduce Inequalities) promotes social, economic and political inclusion of young people and SDG 13 (Climate Action) draws attention to youth-sensitive mechanisms of raising capacity for climate change-related management. Young people are not only beneficiaries of achieved SDGs but are also active actors in its development and continue to be contributors in building the frameworks, its implementation, follow-up and evaluation. Young people's involvement is also crucial in the call for participation, inclusion, accountability and revitalized global engagement outlined in SDG 16 (Peace, Justice and Strong Institutions) and 17 (Partnerships for the Goals) as collective efforts drive sustainable, inclusive and effective change (5). IFMSA as a leading youth organization, is also involved in the SDGs internally through its standing committees and national/local activities as elaborately explained in the following sections and monitored in its SDGs report; And externally by sending delegations to the HLPF, ECOSOC Youth Forum and assisting willing members and NMOs in contributing to drafting their national shadow reports.

Public Health

The Standing Committee on Public Health (SCOPH) aims to bring together medical students globally to learn, build capacity, cooperate, explore and exchange ideas pertaining to public health issues, global health issues, policies related to health, health promotion, and educational activities (6).

Over six decades, SCOPH has carried out, sustained, and improved a wide range of community-based initiatives on a local, national, regional and international scale. A spectrum of public health issues



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including but not limited to communicable diseases, antimicrobial resistance, vaccination, non-communicable diseases with mental health, healthy lifestyle promotion, environment and health, health systems, and social and environmental determinants of health.

Communicable diseases are an extensive group of diseases that are prevalent worldwide and pose a significant challenge to health systems, healthcare students, and communities in general. SDG Target 3.3 specifically talks about reducing the burden of communicable diseases, particularly tuberculosis, malaria and neglected tropical diseases. Tuberculosis caused by *Mycobacterium tuberculosis* is the leading cause of death by a single infectious agent. One in four people globally are infected by *M. tuberculosis* and the lifetime risk of developing TB disease for them is about 5-10%. Several high TB burden countries and the WHO European region are making good progress in reducing TB cases and deaths, however, decided milestones and targets are not on track to be met globally (7). The IFMSA targets healthcare students, the general population and specific exposed groups through peer education to improve understanding of TB disease and reduce the associated stigma. Neglected tropical diseases (NTDs) affect more than 1 billion people worldwide, predominantly in tropical and subtropical areas among the most vulnerable and marginalized population groups. Interventions against NTDs contribute to the achievement of multiple SDGs. While target 3.3.5 is exclusively related to the number of people requiring interventions against NTDs, progress on SDGs 6,9,11, and 13 can help achieve the NTD goal, and successful interventions against NTDs can contribute to SDGs 1,2,4,5,8, and 10 (8). Many National Member Organisations (NMOs) under IFMSA have been implementing activities and projects related to NTDs.

Antimicrobial Resistance (AMR) is a pressing issue that has the potential to cause 10 million deaths globally with a projected economic impact of US\$100 trillion by 2050; hence it is a dangerous threat to the attainment of the SDGs related to health, poverty, economic growth and food security (9) (10) Moreover, there are no specific indicators in the SDGs for AMR. IFMSA acknowledges the increasing danger of AMR and has been involved in initiatives like Innovate4AMR, engaged in interprofessional collaborations with the International Veterinary Students' Association (IVSA) and International Pharmaceutical Students' Federation (IPSF), has interacted with various stakeholders in infectious diseases in AMR and was a part of the first global AMR Youth Summit in 2020. Furthermore, IFMSA has been advocating for actions against AMR in WHO meetings, building capacity in members and working on campaigns locally, nationally and internationally.

IFMSA also works on advocating for an increased rate of vaccination, thereby leading to the attainment of SDG target 3.8 and 3.b (11). Additionally, immunization contributes directly or indirectly to 13 SDGs apart from SDG 3 (12). Through developing policy documents, training manuals, campaigns e.g. World Immunization week, on-ground and online activities pertaining to vaccine-preventable diseases and vaccine hesitancy, the IFMSA strongly emphasizes the role of youth in working towards a holistic as well as an interprofessional approach to achieve the immunization agenda (13). In the context of the COVID-19 pandemic, vaccination represents a fundamental tool to fight against this burden, however its rates are not yet fulfilled worldwide and between countries, resulting in a diminishing of progress of above mentioned SDG targets. (14)

Noncommunicable diseases (NCDs) claim 41 million lives yearly, which is equal to around 71% of all deaths worldwide (15). Amongst the NCDs, Cardiovascular diseases account for 17.9 million deaths, followed by cancers (9.3 million), respiratory illnesses (4.1 million) and diabetes (1.5 million). These NCDs are governed by non-modifiable risk factors and modifiable/behavioural risk factors, which include tobacco consumption. Roughly 1 person's life is lost every 6 seconds to tobacco-related



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diseases, which sums up to 6 million deaths yearly (16). Moreover, more than 1.3 million lives are lost per year as a result of road traffic injuries (17). To tackle these issues, IFMSA aims to emphasize the focus on NCD risk factors, social determinants of health and the importance of engaging youth in the NCDs agenda, as both a vulnerable and a powerful group by fostering collaborations with diverse stakeholders. IFMSA is a part of the WHO Global Coordination Mechanism on NCDs. IFMSA has also been a part of external meetings and initiatives including, the Norwegian Launch of the NCDs strategy, Budva youth declaration and the Youth Task Force for the World Youth Assembly for Road Safety prior to the Ministerial Conference. Furthermore, IFMSA has drafted policy documents on NCDs and road safety, celebrated campaigns internationally and regionally related to NCDs and tobacco consumption and has highlighted the local and national efforts by mapping existing activities and initiatives by NMOs, working towards the fulfilment of SDG indicator 3.4.1, target 3.6 and 3.a.

Mental health remains a significantly neglected area of health across the globe, especially in the context of the COVID-19 pandemic, increasing its burden (18). It is not only directly related to SDG indicator 3.4.2 but is also an integral part of the SDGs. Poverty (Goal 1), complex emergencies and human rights violations (Goal 5,10,16) not only threaten both human development and sustainable economic development but also constitute an important context for global mental health (19). IFMSA has worked in the Mental health arena through capacity building sessions and workshops (Mental health essentials), advocacy in external events, and activities focusing on Mental health promotion and prevention, integration of mental health in primary healthcare, the mental health of medical students, healthcare workers, children and vulnerable groups (people living with chronic diseases, survivors of gender-based violence, elderly, migrants and refugees, LGBTQIA+ community, commercial sex workers, survivors of natural and man-made disasters) and substance-related mental health illness (target 3.5) (11).

Our health is inextricably associated with the environment we live in, from rural areas to dense cities, the food we consume, from the places we live to our workplaces, and thus damage to our natural environment also leads to damage to human health. SDG Target 3.9 is directly related to reducing deaths from hazardous chemicals and air, water and soil pollution and contamination. However, this target can only be achieved through combined action in goals 1, 2, 6, 7, 8, 9, 10, 11, 12, 13, 14 (20). IFMSA has contributed to working in environment and health as well as climate change through campaigns including but not limited to World Environment Day, Planetary health and Environmental Migrants (target 13.1), capacity building on initiatives on climate change and working on the integration of climate change in the medical curriculum (target 13.3), Policy documents which focus on Goal 2, Target 12.5 and 12.5. There have been local, national and international activities and initiatives related to water sanitation (Goal 6), fossil fuel divestment (target 7.a), Health sustainability and green hospitals, biodiversity preservation and climate change (21) (22) (23) (24) (25).

In adherence to target 3.8 regarding Universal Health Coverage (UHC), IFMSA has worked on launching international campaigns (UHC Campaign), capacity building initiatives, policies, interventions in relevant WHO and high-level external meetings. Several initiatives have also been launched related to health workforce planning, rural/community health, organ, stem-cells and tissue donation, and primary healthcare (11).

Medical Education

The Standing Committee on Medical Education (SCOME) works on many issues including Social Accountability in Medical Schools, Interprofessional Education and Global Health Workforce.



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Global Health Workforce

The 2030 Agenda for sustainable development recognizes Universal Health Coverage (UHC) as key to achieving all health targets. Moreover, it is acknowledged that UHC is dependent on an adequate, equitable distributed and motivated health workforce to improve health outcomes, addressing issues - such as preventable deaths, maternal mortality, HIV & AIDS prevalence - and directly impacting the achievement of many of the Sustainable Development Goals (SDGs), such as SDG 5 (Gender Equality), SDG 10 (Reduced Inequalities) and SDG 3 (Good health and well-being) (26) (27) (28) (29).

Despite being recognized the important role of health workers and the existence of a specific target in SDG 3 urging countries to “substantially increase health financing and the recruitment, development, training and retention of the health workforce”, many countries at all levels of socioeconomic development still face difficulties in the education, training, deployment, retention and performance of their human resources for health. In fact, the WHO projects a shortfall of 18 million health workers by 2030, mostly in low- and lower-middle-income countries (30). Key actions to tackle these workforce challenges include activating the power of youth through their engagement in identifying and implementing strategies (31).

As a result of 18 million health worker shortfalls and the critical investment needed for the attainment of UHC and of the health SDGs, important documents such as the Global Strategy on Human Resources for Health: Workforce 2030 (GSHRH) were developed (32). Other important steps towards health for all: global health movement include the adoption of WHA69.19 Resolution (33), urging the Member States to progressively implement National Health Workforce Accounts to support national policy and planning as well as to consolidate a core set of Human Resources for Health data with annual reporting to the Global Health Observatory.

Since health workers can unleash significant socioeconomic gains and contribute towards achieving the 2030 Agenda for Sustainable Development, it is crucial to scale up efforts in all its forms and dimensions to promote the recruitment and retention of skilled health workers, ensuring equitable distribution (34).

The pandemic situation of COVID-19 raised a light in long lasting challenges for the global health workforce, with difficult situations, such as inadequation of Personal Protective Equipments (PPE) in under resourced systems, resulting in strikes and worsening health conditions in an unprecedented, however foreseeable condition. (35)

IFMSA recognizes the importance of a strong, well-distributed workforce. As such, many activities have been conducted throughout these years. During IFMSA meetings, many sessions were held related to this topic (for example:- Global Mobility of Health Workforce, MM21 Session; Gender Bias in Medical Education and the Health Workforce - MM21 European Session). Other initiatives include campaigns like the medical students' take on the Global Health Workforce crisis and IFMSA #Health Workforce 2030 Campaign, which included two webinars: 1) Health Workforce Global Mobility; 2) Youth and Decent Working Conditions in Healthcare. Moreover, IFMSA has a policy document addressing the Global Health Workforce, which showcases the importance given by the organization advocacy-wise.

Social Accountability

In 1995, the WHO defined Social Accountability in Medical Schools as the commitment to coordinate their education, research and administration exercises towards focusing on the health concerns of the local area, district, and additionally country they have an order to serve (36). The 21st century gives



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clinical schools and healthcare frameworks a significant quantity of difficulties: to guarantee the nature of medical care conveyance, to establish equity in healthcare, to guarantee cost-efficient use of facilities and to build powerful coordination between the society and medical education. All these challenges are relevant towards addressing SDG 4 target 4.5, which states "By 2030, wipe out disparities regarding gender in education and guarantee equitable access to all degrees of education and professional training for the helpless, incorporating people with disabilities, native individuals and children in helpless circumstances". Thus, for medical schools to become more socially accountable, there is the need to improve and reform curricula to respond to current and future health challenges in society, reorient their education, strengthen partnerships with other stakeholders and use evaluation and accreditation to assess performance and impact.

IFMSA recognizes the importance of directing medical education towards the needs of the community, region, and/or nation they serve. As such, many activities have been conducted throughout the years. Examples include:- IFMSA Social Accountability Week (with two webinars addressing 1) How can medical schools become more socially accountable, and What is the role of medical students in the process? 2) What does a socially accountable medical school look like?); Social Accountability Workshops. Other initiatives include the development of the IFMSA Social Accountability Toolkit (37); IFMSA Social Accountability Quartet Game; IFMSA Manual Building Holistic Action towards a Socially Accountable Medical Education (38). Regarding advocacy efforts, IFMSA adopted a policy document addressing Social Accountability in Medical Schools and released a joint Student Declaration on Social Accountability in Health Professions Education (39)

Sexual and Reproductive Health and Rights

Standing Committee on Sexual and Reproductive Health and Rights including HIV and AIDS (SCORA) works on many emerging issues including access to safe abortion, maternal health, gender-based violence, LGBTQIA+ rights, sexually transmitted infections prevention, comprehensive sexuality education and many other SRHR-related issues (40)(41).

HIV prevention is one of the indicators and worldwide is still a challenging health matter. In 2019, the newly detected HIV cases rate was 0.37 per 1000 uninfected adults, which is a significant decrease when comparing this rate from 10 years before. Despite the decline, it was still 8 times higher than 2020 global estimates (11). While the UNAIDS strategies for 2020 were not met, in 2021 there was a new agenda released projected for 2030 that aims to reduce inequalities in accessing life-saving services, focusing on the role of communities in building resilient and people-centered activities. This strategy was adopted to accelerate the actions towards SDGs, which aim to end the AIDS pandemic by 2030 (42). IFMSA contributes to these goals and strategies' fulfilment by conducting numerous activities on HIV prevention on a national level tackling the target 3.3.1. On the international level, IFMSA annually celebrates World AIDS Day and organizes multiple educational opportunities on the topic such as HIV Education and Advocacy Training, workshops and open spaces.

As medical students, we advocate for universal access to safe abortion and contraception as well as for humanized childbirth. All of these matters contribute to both - Gender Equality and Good Health and Well-Being as both of them set a goal for ensuring universal access to sexual and reproductive health services. Nowadays, 71% of women of reproductive age have their family planning needs satisfied with huge disparities between regions, 83% of births had skilled birth attendants and data from 2014 shows that 45% of abortions were unsafe, mostly due to lack of access to high-quality care or restrictive laws (11)(43) (44). All of these facts brought us to advocate for improving these persisting issues by



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organizing workshops (Ipas workshops), campaigns (International Safe Abortion Day), numerous training sessions as well as many community-based activities.

Comprehensive Sexuality Education is a many-sided aspect that touches upon multiple SDGs such as Quality Education, Good Health and Well-Being and Gender Equality (45). As indicated in International Technical Guidance on Sexuality Education, a document created by international stakeholders that serves as a role model for CSE programs, it touches upon not only sexuality and sexual health but also on health awareness in general, gender, boundaries and violence. Therefore, it serves as a multifactorial strategy towards SDGs (46). In IFMSA we work on CSE in capacity building opportunities such as campaigns, sessions and workshops with the most prominent examples of Northern European Conference on Sexuality Education, International Peer Education Training conducted also online and Training on Advanced Comprehensive Sexuality Education.

Gender-Based Violence is tackled SDG number 5 - Gender Equality. It encompasses physical or psychological violence but also practices like female genital mutilation (FGM) and child marriage. While the number of 1 in 3 women experiencing domestic violence remains unchanged, the number of FGM and child marriage cases are gradually declining (43) (47). However, all of these incidents need action and IFMSA joins forces to contribute to this by organizing workshops (From Violence to Victory), training sessions and campaigns such as International Women's Day or International Day for the Elimination of Violence against Women as well as 32 national activities enrolled under Gender-Based Violence program.

In this case, IFMSA also advocates for SDG 10's fulfilment, especially those targeting abolishment of discriminatory laws and policies, by conducting activities on gender equity, LGBTQIA+ community and implementing the intersectoral approach in many actions undertaken (48).

Human Rights and Peace

The Standing Committee on Human Rights and Peace (SCORP) unites students who strive to create an equal and peaceful world and believe in international, intercultural as well as interpersonal solidarity. The mission of SCORP is to empower and motivate medical students to actively promote and protect human rights and peace through advocacy, capacity building, and awareness-raising, and by supporting the students in carrying out activities and projects that contribute to creating a fair and peaceful world (49).

At the core of the 2030 Agenda lies Human Rights. It directs us to the world where human rights are universally respected, where everyone is equal and not discriminated against, where justice and the rule of law prevail and where diversity is cherished. In the world that SDGs lead us to, everyone has equal opportunities, space to realize their full potential and everyone's needs, including the most vulnerable, are met (50).

The main topics we work on in SCORP are Refugees, Human Rights and Ethics, Disasters and Vulnerable Populations. These topics are addressed through various SDGs, but the ones the most related to are Goal 10: Reduce inequality within and among countries and Goal 16: Peace, justice and strong institutions.

In IFMSA the Goal 10 is tackled through the topic of Migration, especially through target 10.7. and Indicator 10.7.2. IFMSA believes that each individual paying little heed to their lawful status has the right to the best feasible norm of health. In like manner, migrants ought to have the option to get to a similar



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norm of medical care services as any other individual, and proactive measures ought to be taken to meet the particular health-related needs of this vulnerable group of population. Therefore the NMOs and medical students in our Federation actively work on the topic, raise awareness of the current situation of migrants' health, invest time and resources into projects and activities on this topic and participate in processes in creating more equitable health policies for migrants (51).

Peace is fundamental and in fact, non-negotiable, to guarantee a sound, efficient worldwide population. Without peace, it will be difficult to completely accomplish the other 16 SDGs, especially SDG 3: Good health and wellbeing. Persistent and intense clash, blockade, and occupation can cultivate conditions that challenge healthcare frameworks, infrastructure, and the accessibility of life-saving drugs and supplies (52).

This is especially visible in violent conflicts that are affecting all parts of the world, while at the same time it's also visible in regimes that disrespect human rights and undermine international and national norms which ultimately leads to restricted fundamental rights and freedoms.

Therefore the IFMSA through its work on SDG 16 and its targets shows the importance of healthcare workers in promoting peace through the provision of care, promotion of community health and shaping equitable policies (53).

Research and Research Exchanges

Through the facilitation of international student mobility programs, the Standing Committee on Research Exchange (SCORE), future physicians have the opportunity to expand their knowledge on research, improve their cultural competence and enhance their understanding of the global health concept (54).

Research isn't just a device to accomplish health for all but it is a need currently. Quite possibly the most notable instance of the consistent communication among research and UHC is the 1990 landmark report from the Commission on Health Research for Development. According to the findings of this study, less than 10% of the research spending was directed toward diseases accounting for more than 90% of the global burden of ill-health, initiating new recommendations and thorough monitoring processes (55).

SCORE is committed to building the capacity of its members regarding research and research education through the Research Exchange program which mobilizes more than 3000 students annually, organizing the Research Camp which is a five-day international research-based workshop aimed to gather research enthusiasts from all over the world. Additionally SCORE organizes educational activities which aim to increase the scientific value of the Research Exchange Program while also promoting an inclusive and safe platform to develop innovation and creativity. The educational activities include basic principles in medical research, critical appraisal, research methodology and study design. Working in these fields SCORE works on SDG4 (Quality Education) with specific emphasis on target 4.7 as it promotes cultural exchange and gaining skills necessary to work towards SDGs (56).

Having free of burden access to the knowledge and skills needed by people to promote sustainable development is essential. Open Science is an important factor in achieving the SDGs, as evidenced by advances in Science Technology and Innovation (STI) and the importance of immediate access to international research outputs. As these critical human challenges are developed and solutions discovered, the UN requires a method to advance progress and collect output from each of the SDG programs. As a result, they have launched the UN Connect 2030 Platform which will serve as a portal for information on STIs within and outside the UN, including access to open access publications (57).

SCORE is working on SDG number 10 by bridging health inequities and advancing health outcomes by advocating for Open Science and its components, participating in relevant international meetings such as Open Education Conference 2020, organizing the International Open Access Week and creating educational activities about open science. However, it also works on SDG 9 (Industry,



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Innovation and Infrastructure) while it encourages conducting research, promotes innovation and boosts up the progress towards sustainable development through it (58).

Professional Exchanges

Student Mobility programs have an essential role in exposing medical students to the challenges they will face as physicians in a multicultural society. It does not only improve their ability to deal with complex cultural aspects of health, but it also prepares them to deal with other challenges as an essential part of the healthcare system, such as language barriers and providing culturally inclusive treatment choices. And thus, those electives contribute to preparing more globally-minded future doctors to meet the needs of the increasingly interconnected health systems (59).

Most medical schools in high-income countries, such as the United Kingdom, Australia, and Canada, have international medical electives programs as part of their curricula. Many schools encourage their students to take advantage of these opportunities, allowing them to learn about new cultures, health systems, and disease burdens (60).

Structured and overseen medical mobility programs in which students receive strong support from their faculties through offering pre-departure preparations, financial support, and recognition of their internships may be a way forward to minimize the logistical and financial burdens of mobilities in host countries, as well as providing students with the opportunity to learn about global health and medical ethics in an organized manner (61).

The Standing committee on Professional Exchange program coordinates a full educational program offering clerkships to medical students from all over the world. After World War II in 1951, the professional exchange program was established with a vision and mission to give the opportunity for medical students from all over the world to experience clinical, cultural and global health experiences in a different healthcare setting. Back to the launching of the professional exchange program and as early as 1952, a total of 463 students spent a period of practice abroad, and as the program continued to offer its opportunities as the federation and the program continued to grow. Today, Annually, more than 13.000 students from more than 100 countries travel around the world to discover new health systems, new cultures and to enhance their global health and intercultural understanding (62).

IFMSA Professional Exchanges is a 4-week or 8-week clerkship in a clinical or a pre-clinical department at a Medical School or Hospital in more than 106 IFMSA National Member Organizations worldwide, offering clinical, cultural and Global Health experiences for medical students through internships and training in several medical departments, educational activities which includes but not limited to: Global Health activities, Medical skills training, human rights and public health campaigns (63).

Moreover, to keep track of students' clinical, behavioural or fieldwork, and to ensure a high academic quality of the program. The students and tutors must fill a SCOPE handbook which includes Learning objectives, Global Health outcomes and skills. Those handbooks include mid-exchange and final evaluation assessment tools to ensure the quality assessment process of the students' performance and improvement throughout the exchange period; those handbooks are endorsed by worldwide medical education organizations such as WFME, IPA, WFSA, etc (64).

As SCOPE program possesses comprehensive objectives which aim to prepare not only clinically well-prepared future physicians, but also globally-oriented healthcare professionals who are able to take the lead of the global health, through organizing diverse educational activities and campaigns throughout



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the exchange period, and this includes SDGs education at which the exchange students and teams work toward promoting and advocating for the seventeen SDGs.

Having mentioned that SCOPE works toward empowering the future physicians and medical sciences learners with the “appropriate information and abilities expected to promote sustainable development, including, among others, through all forms of education for sustainable development and lifestyles, sexual orientation, human rights, advancement of a culture of non-violence and peacefulness, worldwide citizenship and appreciation for social variety and culture's commitment to sustainable development.”, SDG 4, target 4.7 (56).

In addition to that, SCOPE aims to enhance the competencies and exposures of the students who came from a lower quality healthcare system by giving them the opportunity to learn and share experiences through exchanges in a higher quality exchange country and vice versa, with the affordable financial expenses, via the bilateral type of IFMSA exchanges (63).

In this case, the SCOPE program is advocating and working toward SDG 4, 11 and 17, and at the same time, empowering more than 13.000 future physicians annually to become advocates for the seventeen SDGs.

Partnership in achieving the goals

The United Nations' definition of partnership for the SDGs as follows:

“A continuous synergistic connection between or among associations from various stakeholder categories adjusting their inclinations around a common vision, consolidating their integral resources and capabilities and sharing risk to amplify creation of values towards the Sustainable Development Goals and provide advantage to each of the accomplices.” Our planet has limited resources. resources whether money, natural or manpower and as we all share this world we must optimize their use. The essential core of partnerships for SDGs is their ability to bring together varied resources in ways that can together achieve more: more impact, greater sustainability, increased value to all (65)(66).

The International Federation of Medical Students' Associations connects over 1.3 million students from 141 national member organizations in 130 countries worldwide; IFMSA brings these students together through physical and online conferences and events to exchange, discuss and initiate projects to achieve the different SDGs goals to create a healthier and better world.

IFMSA is also an officially registered non-governmental organization in consultative status with the UN Economic and Social Council since 2003, sending yearly delegations to the High-Level Political Forum; With collaborations and partnerships with several UN agencies such as WHO, UNAIDS and others. IFMSA shares along with the partners the responsibility to promote and achieve the SDGs (51).

Few examples for partnerships for goals :

- IFMSA contributed with Pan American Health Organization (PAHO) to deliver a webinar focused on mental health services in emergency settings tackling SGD 3 (67).
- Through IFMSA partnership with UNHCR AND IOM, IFMSA has participated in the Intergovernmental Conference on the Global Compact for Migration to adopt a global compact for safe, orderly and regular migration tackling SDG 10 (68).
- The collaboration with the World Medical Association (WMA) has been one of the most successful and rewarding and includes internships of IFMSA students in WMA and joint advocacy work for SDG 4.
- IFMSA has also different partnerships outside the UN in the different committees as :
 1. Medical Education:



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- Western Pacific Association for Medical Education (WPAME)
 - South East Asia Regional Association for Medical Education (SEARAME)
 - Association of medical education in EMR (AMEEMR)
 - 2. Public Health:
 - NCD Child
 - Young Professionals – Chronic Disease Network (YP-CDN)
 - YOUNGO
 - The Union
 - 3. Human Rights and Peace:
 - The COMPACT FOR YOUNG PEOPLE IN HUMANITARIAN ACTION
 - End Child Detention
 - Safeguarding Health in Conflict Coalition
 - 4. Sexual and Reproductive Health and Rights including HIV and AIDS:
 - Y Peer
 - WPATH
- (69)



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