

CFMS Annual General Meeting – September

# CFMS Global Health Strategic Plan 2019-2022



**CFMS FEMC**

Canadian Federation  
of Medical Students

Fédération des étudiants et des  
étudiantes en médecine du Canada

**Global Health Program  
Programme de santé mondiale**

Michelle Quaye

2018-2019 DIRECTOR OF GLOBAL HEALTH

# Table of Contents

<b>CFMS GHP Strategic Plan 2019-2022</b> .....	2
<b>WHO WE ARE</b> .....	2
<b>MISSION</b> .....	2
<b>VISION</b> .....	2
<b>ORGANIZATION</b> .....	2
<b>PROCESS</b> .....	3
<b>STRATEGIC DIRECTIONS 2019-2022</b> .....	4
<b>APPENDIX A: SWOT ANALYSIS</b> .....	5
<b>APPENDIX B: TOWS ANALYSIS</b> .....	6
<b>APPENDIX C: ABBREVIATIONS</b> .....	7

# CFMS GHP Strategic Plan 2019-2022

## WHO WE ARE

Within the Canadian Federation of Medical Students (CFMS), which represents over 8 000 medical students from 15 Canadian medical student societies, the CFMS Global Health Program (GHP) was developed in response to a growing need for coordinated programming and collaboration focused specifically on global health. The program is based on the following principles:

## MISSION

In the spirit of responsible and sensitive global collaboration, we will facilitate ethical global health education, advocacy, action, and experiences through coordinated national programming.

## VISION

Recognizing that its members, as future physicians, are uniquely and strategically placed to promote the values of health equity and social responsibility, the CFMS GHP will strive to empower students with all the tools they may need to grow as global health leaders and global citizens.

## ORGANIZATION

The GHP is composed of a diverse team of student leaders from across the country:

*Director of Global Health (Dir GH):* The CFMS Director of Global Health is responsible for overseeing global health projects that develop at a national level, and supporting projects at the local level. The Director of Global Health is also the CFMS representative to the International Federation of Medical Students' Associations (IFMSA). The Director of Global Health shall, in addition to the person's other duties within the Board, direct the delivery of the Global Health Program (GHP) and support the activities of the constituency on matters pertaining to global health, international development, and public health.

*National Officers (NOs):* Provide specific services and/or representation on behalf of Canadian medical students.

- National Exchange Officers (NEOs)
- National Officer of Reproductive and Sexual Health (NORSH)
- National Officer of Partnership (NOP)
- National Officer of Human Rights and Peace (NORP)
- National Officer of Global Health Education (NOGHE)
- National Officer of Indigenous Health (NOIH)

*Global Health Liaisons (GHLs):* 1-2 students at each member university who act as the official link between the CFMS GHP and students at their medical school.

*Global Health Advocates (GHAs):* 1-2 students at each member university who carry out local and national advocacy initiatives around a chosen theme for the year.

*Local Exchange Officers (LEOs):* 1-2 students at each member university who work specifically on coordinating CFMS international clinical and research exchange programs.

*Local Officer of Reproductive and Sexual Health (LORSHs):* 1-2 students at each member university who carry out educational and advocacy initiatives around the theme of reproductive and sexual health.

*Local Officer of Global Health Education (LOGHEs):* 1-2 students at each member university who work on educating their peers about global health.

*Local Officer of Indigenous Health (LOIHs):* 1-2 students at each member university who carry out educational and advocacy initiatives around the theme of indigenous health.

In addition, the CFMS is an official National Member Organization (NMO) within the International Federation of Medical Students' Associations (IFMSA), which is an independent, non-governmental and non-political organization representing over 1.3 million medical students in over 130 countries worldwide. The IFMSA is recognized internationally by and collaborates with organizations such as the World Medical Association (WMA), the World Health Organization (WHO), and United Nations agencies including UNICEF and UNHCR. The CFMS GHP Director of Global Health acts as the NMO President of the CFMS to the IFMSA.

## PROCESS

### *Brainstorming*

The strategic plan development process began in early 2019, as the Global Health Portfolio imagined its future. Seeing the need for future directions development, brainstorming occurred around what was envisioned for the next three years of the Global Health Portfolio.

### *SWOT Analysis*

Recognizing the importance of methodically assessing the strategic priorities for the CFMS Global Health Portfolio, a SWOT Analysis was carried out, which can be found in Appendix A. Following the SWOT analysis, the various factors that were identified were synthesized into a TOWS analysis, found in Appendix B. These served as the basis for the proposed CFMS GHP strategic directions.

### *Internal Stakeholder Consultation*

To ensure the strategic priorities were in line with CFMS members' shared vision of the future of the CFMS GHP, consultation was carried out with internal CFMS stakeholders. The proposed strategic directions were first shared with the 2018-2019 Global Health National Officers, the Global Health Attaché and the President-Elect on July 24, 2019. Following their feedback, the strategic directions were then shared with the 2019-2020 Global Health National Officers, whose terms will coincide with the first year of the 2019-2022 Global Health Strategic Plan, on August 12, 2019. Finally and most importantly, the strategic directions were shared with the Global Health Liaisons across the country, who act as their medical school's representatives to the CFMS Global Health Program, on August 25, 2019. There was overwhelming agreement throughout the consultation process that these strategic priorities well-represented a positive way forward for the CFMS GHP.

## STRATEGIC DIRECTIONS 2019-2022

In alignment with the CFMS Global Health Program Mission and Vision, the GHP believes that each global health strategic direction must be grounded in health equity, social justice, and ethics, and that all global health discussions occurring within the CFMS must carry an equity and justice lens.

### *Optimize portfolio structure through expansion of CFMS member participation within the portfolio*

1. Expand opportunities for involvement with the Health and Environment Adaptive Response Task Force (HEART)
  2. Establish a social media and website assistant position to advertise global health opportunities to members
  3. Fortify IFMSA Exchanges Task Force by recruiting experienced and interested members
  4. Develop collaborative task forces and small working groups where relevant to further CFMS member participation and minimize additional NO workload
  5. Encourage the creation of new groups wherever possible to respond to relevant global health topics that arise in a timely fashion
- 

### *Strengthen IFMSA involvement through improved alignment of the GHP with the IFMSA structure, and increasing CFMS member representation in IFMSA opportunities*

1. Amplify opportunities for involvement with IFMSA
  2. Improve partnership with IFMSA Standing Committees through NO's and Partnerships Committee Liaisons
  3. Broaden advertising for IFMSA opportunities in order to incorporate all NO's in dissemination of information
  4. Reinvent the process by which CFMS members are made aware of IFMSA opportunities
- 

### *Focus on building and maintaining partnerships that will benefit our members who are interested in global health*

1. Prioritize the development and maintenance of relationships with key external partners including IFMSA-Québec
  2. Maximize existing organizational structure to engage with existing and prospective external partners who can add value to the CFMS GHP
  3. Encourage innovative partnership development for all National Officers
  4. Build upon CFMS website as conduit for communicating with CFMS membership about GH opportunities
- 

### *Highlight global health initiatives of CFMS members and support members to become global health leaders*

1. Highlight local and global initiatives of CFMS members within the GHP through CFMS social media and website
2. Reimagine the way in which CFMS members who participate in international opportunities are able to share their experiences with GH-interested CFMS members

## APPENDIX A: SWOT ANALYSIS

<b><u>STRENGTHS</u></b>	<b><u>WEAKNESSES</u></b>
<p>Interest: There remains a strong interest in global health from many medical students, who continue to apply for positions and for opportunities in great numbers.</p> <hr/> <p>Autonomy: Individual medical schools carry out their own global health initiatives independent of the CFMS GHP. Even when Director GH or NO is unable to support local schools as strongly, the schools remain very active in terms of their global health advocacy.</p> <hr/> <p>Overlap: There is plenty of overlap between our National Officer Portfolios and other Director Portfolios (e.g. Education, Government Affairs and Advocacy). In addition, there is overlap between the national officer portfolios that perhaps can be leveraged.</p>	<p>Workload: Director GH and NO positions are seen as work-heavy positions and may be deterring great candidates for these positions. Burnout amongst NOs and Director GH is also a threat that needs to be considered.</p> <hr/> <p>Email fatigue: IFMSA opportunities are many, however the frequency of emails about the opportunities and the often short turnaround time for deadlines makes it difficult to inform our members of these opportunities.</p> <hr/> <p>Siloed: The National Officer Portfolios are quite distinct (despite the overlap that exist in the advocacy topics within the portfolio), so there is often little collaboration between NO portfolios.</p>
<b><u>OPPORTUNITIES</u></b>	<b><u>THREATS</u></b>
<p>IFMSA: The IFMSA is an enormous organization that partners with some of the leading international organizations such as the UN and the WMA. There are endless opportunities for medical students to get involved.</p> <hr/> <p>Environment: Climate Change and health is a huge topic in medicine right now, and also for the general public. The HEART committee is very strong and has the ability to make the CFMS GHP really shine in the work that is being done.</p> <hr/> <p>IFMSA-Québec: They are a very active organization within the IFMSA, and they have been keen to partner with the CFMS.</p>	<p>Exchanges: Exchanges are a valuable source of engagement for CFMS. However, there has been increased scrutiny and dropoff from Canadian universities who are declining to accept incoming exchange students, thus minimizing the number of outgoing exchange students that the CFMS can send.</p> <hr/> <p>Partnerships: Former partnerships that have existed have lapsed. Workload makes it difficult to reach out to new potential partners.</p>

**APPENDIX B: TOWS ANALYSIS**

	Opportunities (IFMSA, Environment, IFMSA-Québec)	Threats (Partnerships, Exchanges)
Strengths (Interest, Autonomy, Overlap)	<p>Strength-Opportunities strategies</p> <ul style="list-style-type: none"> <li>• Expand opportunities for involvement with IFMSA and HEART</li> <li>• Have National Officers work directly with IFMSA Standing Committees</li> <li>• Develop a position specifically focused on furthering relationship with IFMSA-Quebec</li> <li>• Work with all NO's to advertise IFMSA opportunities rather than just NOP</li> <li>• Creation of a social media and website assistant to advertise opportunities</li> </ul>	<p>Strength-Threats strategies</p> <ul style="list-style-type: none"> <li>• Strengthen IFMSA task force by recruiting an experienced chair and several interested members</li> <li>• Consider expansion of partnerships committee to re-establish or build partnerships</li> <li>• Showcase positive student exchange experiences</li> <li>• Encourage partnership development for all NO's, not just NOP</li> </ul>
Weaknesses (Siloed, Email fatigue, Workload)	<p>Weakness-Opportunities strategies</p> <ul style="list-style-type: none"> <li>• Encourage CFMS members to sign up for IFMSA listservs to minimize emails being sent</li> <li>• Establish task forces and small working groups where relevant to address current topics for NO's and avoid adding additional workload, and where needed have all relevant NOs working with the task force</li> </ul>	<p>Weakness-Threats strategies</p> <ul style="list-style-type: none"> <li>• Regular teleconferences to keep National Officers updated on the status of portfolios</li> <li>• Avoid addition of work for NO's/Portfolio Director/Dyad partner and instead encourage creation of new positions wherever possible</li> <li>• Use CFMS website to advertise GH opportunities; needs to be kept up to date</li> </ul>

## APPENDIX C: ABBREVIATIONS

- AFMC* – Association of Faculties of Medicine of Canada
- AGM* – Annual General Meeting
- CFMS* – Canadian Federation of Medical Students
- Dir GH* – Director of Global Health
- GH* – Global Health
- GHA* – Global Health Advocate
- GHL* – Global Health Liaison (at each CFMS medical school)
- GHP* – Global Health Program within the CFMS
- IFMSA* – International Federation of Medical Students' Associations
- LEO* – Local Exchange Officer
- LO* – Local Officer
- LOGHE* – Local Officer of Global Health Education
- LOIH* – Local Officer of Indigenous Health
- LORSH* – Local Officer of Reproductive and Sexual Health
- NEO* – National Exchange Officer
- NMO* – National Member Organization
- NO* – National Officer
- NOGHE* – National Officer of Global Health Education
- NOIH* – National Officer of Indigenous Health
- NOP* – National Officer of Partnerships
- NORP* – National Officer of Human Rights and Peace
- NORSH* – National Officer of Reproductive and Sexual Health