



# IFMSA General Assembly March 2019

## CFMS Delegation Report

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## EXECUTIVE SUMMARY

This year, the Canadian Federation of Medical Students (CFMS) sent 6 delegates to the International Federation of Medical Students' Associations (IFMSA) General Meeting held in Portorož, Slovenia from March 1<sup>st</sup> to 7<sup>th</sup>, also known as the IFMSA March Meeting 2019 (MM2019).

The IFMSA represents and engages with over 1.3 million medical students from 125 countries. The CFMS is one of the 135 national member organizations that make up the IFMSA. The IFMSA general assemblies are held twice a year in March and August. These meetings hope to inspire the next generation of future physicians to become leaders and advocates through exchange of ideas, networking and learning from the various programming sessions, such as:

### President and Standing Committee Sessions

The standing committee and president sessions ran in parallel, each attended by one of our CFMS delegates. During these sessions, the current issues of the IFMSA were discussed and proposals for changes (such as policy statements and bylaw changes) were made. The CFMS delegates for each of the sessions were as follows:

- Presidents Sessions: Michelle Quaye
- Standing Committee on Public Health (SCOPH): Emily Fong
- Standing Committee on Reproductive and Sexual Health and Rights Issues including HIV/AIDS: Meera Shah
- Standing Committee on Medical Education (SCOME): Vivian Tsang
- Standing Committee on Rights & Peace (SCORP): Aimée Bouka
- Standing Committee on Professional Exchanges (SCOPE): Charlotte Coleman
- Standing Committee on Research Exchanges (SCORE): Charlotte Coleman

### Regional Meetings

During the regional meetings, all delegates from the national member organizations (NMO) of the region met to discuss pertinent issues for the region. The CFMS belongs to Americas Region, which includes NMOs from both North and South America. At the regional meeting, our delegation participated in a workshop on member recruitment and engagement, which sparked many ideas for how we can engage CFMS members with the IFMSA. The Americas Regional Director can be contacted at [rdamericas@ifmsa.org](mailto:rdamericas@ifmsa.org).

### Theme Event

The theme event for MM2019 was “Gender in Health Care”, which included a panel session as well as a debate on how gender impacts health on many levels, and how gender inequity affects medical students. One of our delegates, Vivian Tsang, spoke during one of the theme event sessions on Canada's initiatives in BC addressing the gender pay gap.

### Plenary Sessions

The plenary is the highest decision making body in the IFMSA. During these sessions, all proposals related to membership, governance, by-laws, finances, reports, operations, and policies are debated and voted upon. Some of the various debates and outcomes of the plenary sessions are highlighted throughout this report.

Thank you for taking the time to read about the work done by the CFMS delegates at the IFMSA MM2019. If you have any questions, please do not hesitate to contact the CFMS global health program at [globalhealth@cfms.org](mailto:globalhealth@cfms.org).



## PORTOROŽ MARCH MEETING 2019 REFLECTIONS

*“I felt excited for the opportunities to connect with medical students around the world and learn from their advocacy initiatives.”*

*“I left the conference with much inspiration from the efforts of other medical students and also with a deep appreciation for our own medical education system. Canada’s medical school education curricula is not without flaws and there’s still much improvement that can be made, but I am thankful to be a part of and contributing to a system that is seen as an international model for many.”*

*“When I received the news that I would be attending the IFMSA March Meeting in Slovenia, I was beyond ecstatic! At CFMS meetings, I have always had enriching and eye-opening experiences. CFMS meetings also introduced me to the world of healthcare policy and taught me exactly how to go about effecting change. CFMS meetings were amazing and for me to attend an international meeting with medical students from all around the world – well that was bound to be a wonderful experience, and it was!”*

*“Attending the meeting was both an educational and socially valuable experience. As an IFMSA-naïve delegate at this meeting, my experiences involved understanding the international structure of the organization and learning what other medical schools were doing in relationship to the different standing committees.”*

*“As a learner, I retain more from active discussion than reading about a certain policy or through interactions on social media platforms of IFMSA’s work. If I had not received the chance to attend the March meeting, I would not have had the chance to engage in-person and meaningfully learn new things.”*

*“The social connections amongst the Canadian delegates was great! We had great chats about our country and the education at our different Canadian schools over tea and ice cream. We typically took our meals together and attended the plenary sessions as a group as well! It was great getting to personally know students not only from around the world but from home too! Each of the Canadian delegates were a pleasure to get to know with their different school and life experiences.*

*“I felt proud once again of our country and our medical students in their passion in optimizing healthcare for our citizens. Seeing medical students come together in their free time to advocate for strong and accessible healthcare systems across the world is truly astounding!”*

*“Insightful, humbling, visionary— these words best describe the week that was the IFMSA General Assembly. Situated on the beautiful Slovenian coast midway between Italy and Croatia, the setting reflected the bringing together of delegations from around the world. As individuals arrived from such far-flung places as the frontier of the Australian Outback, the boreal forests of Finland, and the sprawling metropolis of Singapore, I realized what a unique opportunity it was to hear firsthand the nuances in global medical education and how different curricular formats and implementation methodology are received by students.”*

*“Although I was familiar with the scope of IFMSA as an organization, I became more aware of the extent of its reach. Over 800 delegates representing 80 nation member organizations (NMOs) were in attendance and the participants were visibly excited to be among peers from all over the world. The effervescence was palpable. Some attendees were first timers just like me; others were attending their 9th general meeting!”*

*“Thank you to the CFMS for entrusting me with this responsibility and thank you to all members of the organizing committee for their sleepless week. Thank you to the five strong women who I shared this experience with and thank you to the other delegates for their honesty and reflections. I look forward for future opportunities to represent the CFMS at this level and promise to continue the important discussions and partnerships I made this week.”*

## PRESIDENT'S SESSIONS REPORT

Michelle Quaye, CFMS Director Global Health, *Schulich School of Medicine and Dentistry M.D.*

Candidate (2020)

[globalhealth@cfms.org](mailto:globalhealth@cfms.org)

During these sessions all representatives from NMOs (referred to as NMO Presidents) come together to discuss the documents that will be tabled during the plenary session; the plenary is the highest decision-making body in IFMSA. Many different types of documents are tabled including policy statements, program proposals, committee reports, financial reports, bylaw changes, and candidatures. Additionally, the management of the organization is discussed at these meetings (eg. strategic directions, financial sustainability, urgent issues).

### Agenda Highlights

#### Day 1

- Question and Answer period with the Team of Officials
- Update of the IFMSA August Meeting 2019 in Taiwan
- Met with buddy group (including delegates from Honduras, Luxembourg, Zimbabwe and Catalonia)

#### Day 2

- Discussion of bylaw change proposals & committee reports
- Update on the IFMSA Strategic Plan
- Food and Drinks Fair

#### Day 3

- Exchanges Fair
- Results of NMO Reports
- Discussion of more controversial bylaw change proposals including IFMSA non-medical student members and regulations regarding suspension of NMOs

#### Day 4

- Discussion on Informed Decision-Making within IFMSA
- Review of Finance Report

#### Day 5

- Discussion on Collaboration between NMOs
- Discussion on Safe Spaces for all
- External Representation Strategy for IFMSA

### Selected Topics in Depth

#### Bylaw Change Proposals

At each IFMSA meeting, the Executive Board, Team of Officials and NMOs are able to put forward bylaw change proposals for adoption. At this meeting, several bylaw change proposals to adopt a gender-neutral stance in the wording of the bylaws were approved. Furthermore, a bylaw change proposal to amend the name of SCORA was approved, and is now known as the Standing Committee and Reproductive and Sexual Health and Rights Issues, including HIV/AIDS, to reflect the more recent language being used in the international sphere.

## Involvement of Non-Medical Students in IFMSA

The most contentious bylaw change proposal at this meeting was one hoping to expand the involvement of non-medical students in the IFMSA. As a global health-oriented student organization, IFMSA attracts interest from students from many fields including pharmacy, nursing, public health, and more. Currently, the IFMSA limits the leadership positions non-medical students are able to hold. The movers of this bylaw change proposal wanted to give non-medical students the opportunity to serve as Program Coordinators, which was only available to medical students. Those opposed to the motion felt NMOs should wait upon the report being prepared by the “Task Force on Involvement of Non-Medical Students” prior to making a decision on the issue, in case there existed unforeseen implications that could result from approving the bylaw change, such as how external stakeholders might perceive such a decision. The bylaw change proposal ultimately did not pass.

## Food and Drinks Fair

The national food and drinks party on the 2nd night of the meeting saw over 100 delegations bringing traditional foods to share with delegates. This was a great opportunity to form relationships with the other delegations in attendance, and so we did! It proved to also be a great bonding opportunity between the CFMS-Canada and IFMSA-Quebec delegations in attendance at the meeting. In addition, an activities fair arranged mid-meeting allowed each country’s delegation to highlight the initiatives they have put on in their country, and Emily Fong presented a poster on behalf of the CFMS.

## Safe Spaces for All

IFMSA-Quebec led an open space for discussion at the meeting on the pervasiveness of what was termed “alcohol culture” and the association of this culture with harassment. The discussion was very fruitful, with several NMOs, including the CFMS, resolving to dissuade delegates from bringing alcohol to meetings, and specifically to the food and drink event that occurs at every meeting. We also discussed the great work that the IFMSA had done in creating the Code of Conduct Committee, which allows delegates attending IFMSA meetings to know who to approach in the event that they feel the IFMSA code of conduct is being violated by a delegate.

## Successful candidates

### **Newly Elected Executive Board Members**

President: Nebjosa Nikolic (Serbia)

VP Activities: Saniya Sahasrabudhe (India)

VP Finance: No valid candidatures

VP Members: No valid candidatures

VP External Affairs: Tarek Ezzine (Tunisia)

VP Capacity Building: No valid candidatures

VP Public Relations and Communication: Saad Chaibi (Morocco)

### **New IFMSA Full Members**

Kosovo (KOMS-Kosovo)

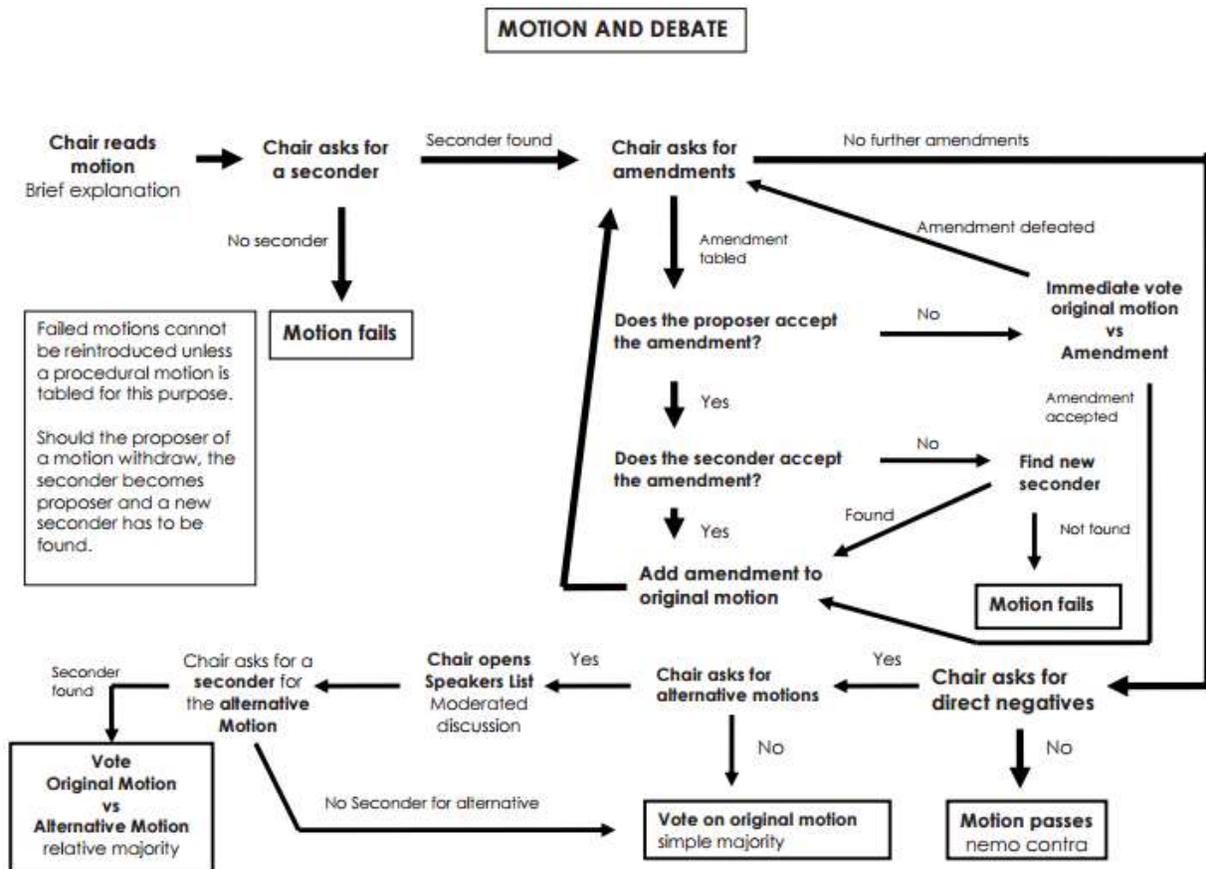
### **New IFMSA Candidate Members**

Dominican Republic (IFMSA-Dominica)

## Plenary sessions

The plenary sessions run in a similar manner to other worldwide decision making bodies such as the World Health Organization and its various sub committees. It is also an opportunity for countries to make formal, documented statements on issues pertinent to them. For example, at this meeting's plenary session we heard from the medical student societies of Australia, regarding the cultural appropriation of Maori ceremonial practices in IFMSA session. CFMS delegate Aimée Bouka delivered a statement on behalf of CFMS in support of Australia, calling for IFMSA to change its practices.

For those interested, please see the diagram below explaining the voting process for motions tabled in the IFMSA plenary sessions:



The next IFMSA general assembly will be hosted in Taipei, Taiwan in early August 2019. Applications to be a part of the CFMS delegation will be available in spring 2019. Please contact Michelle Quaye at [globalhealth@cfms.org](mailto:globalhealth@cfms.org) if you have any further questions.

## ACTIVITIES FAIR

The IFMSA activities fair is a well known event at each of the general assemblies.

Several presenters from the various NMOs brought posters, leaflets, brochures, PowerPoint presentations stickers and any other kind of promotional material about the activities, events, campaigns, and other initiatives taking place in their countries. This provides an opportunity to showcase impact of an activity to other motivated IFMSA members as well as to get feedback, improvement suggestions, and new collaboration opportunities.

The CFMS submitted one poster to the fair on the “Healthcare for Migrants” campaign spearheaded by a CFMS member and McMaster medical student. There was a lot of interest from other NMOs on this initiative. This poster was presented by Emily Fong, CFMS National Officer of Partnerships.



# SCOPH SESSIONS REPORT

Emily Fong, *University of Alberta, M.D. Candidate (2020)*

## Agenda Highlights

- Mental health in the Digital age
- Addressing anti-vaccination movements
- Tobacco and alcohol use
- Sustainable development goals

I have had the privilege of representing the Canadian Federation of Medical Students (CFMS) for the second time at the International Federation of Medical Students Association (IFMSA) March Meeting in Slovenia. For this meeting, I sat on the public health standing committee. There were also joint sessions with the other standing committees that explored global health in exchanges training, mental health in LGBTQ communities, health as a human right, and medical student burnout.

During a session on substance use, I shared Canada's policies in the legalization of marijuana. This ultimately led to other students asking about the effect of legalization of marijuana and whether it has led to increases in consumption. From there, we started a discussion on harm reduction and how cultural and religious factors play a role on the perception of harm reduction. From this session alone, I realized how Canada in many ways can be seen as an international leader in medical education and health policies. As a product of this education there is a role for me to be an active contributor to shape these discussions drawing on Canadian initiatives and policies. Thus, whether it be during formal environments such as sessions or informally such as speaking to the person behind me while waiting for lunch, I began to seek opportunities to create space for more dialogue in comparing health policies and advocacy initiatives.

## SCORA SESSIONS REPORT

Meera Shah, *Schulich School of Medicine, M.D. Candidate (2021)*

### Agenda Highlights

- Sexual Orientation and Gender Identity
- Mental Health in the LGBTQI+ Community
- Comprehensive Sexuality Education
- Queer Theory



I represented Canada on the Sexual and Reproductive Health including HIV and AIDS (SCORA) standing committee. Through my committee sessions, I was able to improve my understanding of sexual and reproductive health and rights (SRHR) issues through workshops, training sessions and discussions with other delegates of SRHR challenges and initiatives in their countries. Looking back, small conversations held a lot of educational value. It was in one-on-one conversations with other delegates that I was able to learn the most about their country's medical education or healthcare system or about, the work they were doing to improve healthcare for their citizens.

The biggest lesson or realization that occurred in this trip was that as Canadian citizens and Canadian medical students, we are extremely privileged. A lot of countries are struggling with SRHR issues that fortunately we have overcome. Our SRHR education is markedly improved compared to those of other countries; in one of the SCORA sessions we role-played clinical interviewing with sensitive clinical scenarios, and I was surprised at how many students had not received formalized training on conducting a sexual history. Many of the students learned these skills on the wards during rotation or struggled to appropriately conduct and address the sexual history resulting in inappropriate management. One medical student even mentioned the difficulty in asking patients sexual history questions because there wasn't a common phrase/word to describe sex in their language. This was so surprising to me because without the right communication tools, it can be difficult to connect with the patient. In other countries, managing LGBTQ+ patients was difficult because of the legalities of the issue and once again I was so thankful for being in Canada where such patients are supported.

As part of my SCORA involvement, I also presented a poster about the work Canadian medical students were conducting in advocating for free coverage of Mifegymiso in the provinces of Manitoba and Newfoundland. I highlighted how students on their provincial lobby days brought forth the idea of free providing coverage for this pill in use for medical abortions to improve access to abortion services. This poster, which I had made the night previously, won the second prize in the SCORA poster fair. This highlighted how valuable sharing Canadian medical student initiatives and work was! Many other delegates were super excited and interested in hearing about what we did in Canada, and I was more than happy to have these conversations with them! Such discussion would not be possible had there been no Canadian delegation at these meetings.

Returning to Canada with this experience, I can confidently say it has inspired me to take a more active role in the CFMS organization particularly related to SRHR since that is what I am passionate about. Additionally, I would also contemplate taking on an SRHR role in the IFMSA. I believe by adding Canadian representation to the IFMSA, we can share our advances in this field with other students.

# SCOME SESSIONS REPORT

Vivian Tsang, *University of British Columbia M.D. Candidate (2021)*

## Agenda Highlights

- Medical Education Systems Around the World
- How to Prevent Burnout in Medical Students
- Are Exchanges Socially Accountable?

Having been involved in medical education for a number of years through curriculum design as well as in research and advocacy, and being part of the Standing Committee on Medical Education (SCOME), I saw how well-developed Canada is in medical education and the role we should have on the world stage as an example for others to follow. A particular realization was the extensive training Canadian medical students have in counselling patients. Thanks to exposure to this difficult area early-on in training, students are more confident approaching patients, building rapport, and asking thorough questions during sensitive history taking.

A theme of this year's IFMSA was gender equity. I had the privilege to speak on behalf of CFMS-Canada on the progress we have made as a country and our future areas of focus, including Canada's plans for International Women's Day, and ongoing research I was conducting investigating gender-related pay gaps and opportunities for leadership, especially in surgery. Other delegations from Rwanda and India also shared progress from their countries and how they have taken preliminary steps to encourage more women to participate in their student delegations for the IFMSA GA. Despite existing injustice in areas such as financial remuneration, Canada is at the forefront in tackling gender-equity, both in advocacy and research efforts. These examples also speak to the important position Canadians have to be pioneers in the field – to work towards a fair and equitable world for everyone including our trans and non-binary colleagues.

An area that can be further expanded in Canada is to enhance surgical teaching prior to clerkship surgical rotations. Proposed ideas resourced from around the world include introductory lectures in surgery to accompany themed anatomy classes or similarly grouped pathologies. A related though complex topic which could be introduced into the curriculum is the ethics of global surgery and what it means for students wanting meaningful involvement in any health-related project abroad. As future physicians and researchers, it is imperative that medical students have an understanding of what is appropriate to partake in as current trainees as well as how to approach global health research and health care projects in a way that acknowledges and respects the situation and abilities of local clinicians and researchers with the ultimate goal of empowerment and capacity building. These topics should be confronted and discussed not only at the national but international level.

Gender equity, surgical training and global ethical care—these three highlighted opportunities and so many more as potential additions and revisions to medical school curricula should not be overlooked but seriously considered. As medical students we can push for such change enhancements. Canada is a world leader in medical education and if we help address these identified areas of educational deficiencies it will help lay the foundation for medical students and medical schools in other countries to do the same.

## SCORP SESSIONS REPORT

Aimée Bouka, *Centre de Formation Médicale du Nouveau-Brunswick (Université de Sherbrooke) M.D.*  
(2019)

### Agenda Highlights

- SCORP Activity Fair
- Right to Development
- Nuclear Warfare and Peace-Building

I was honoured to be part of the CFMS delegation of IFMSA March Meeting in Slovenia this year. I was even more thrilled to be assigned the Standing Committee of Human Rights and Peace (SCORP) and to act as proxy for our NORP.

I paid close attention to the dynamics of the event that spanned across 5 activity-packed days. Standing committee sessions, regional sessions, joint sessions, training sessions... Everyday spent teaching, learning and exchanging was rewarded by amazing social or cultural event. NMO roll call before each plenary was definitely entertaining. When it came to policy documents discussions, I believe that our delegation's skills were well used. We also managed to squeeze in a few statements during plenaries.

I particularly enjoyed the SCORP activity fair where I was able to appreciate the wonderful human rights-based initiatives launched by NMOs. I was impressed by the creativity and ingenuity of some projects. Being able to exchange ideas and opinions was invigorating, but also very humbling. I was constantly reminded of my privilege as a medical student, as a future health practitioner but also as a Canadian citizen enjoying my rights and freedoms.

During one of the SCORP sessions, we examined the "right to development". It gave space for very profound discussions about the need for privilege individuals to adjust their living standard to make room for the development of lower income and vulnerable populations while striving for the sustainability of our planet. During another activity, we explored the reasons contributing to poor mental health among medical students. We discussed stigma within our own profession and other barriers preventing access to quality mental health care.

I have to say that one of my favourite sessions were about nuclear warfare and peace building. I learned about an unfamiliar topic and what are physicians doing in terms of advocacy to achieve worldwide nuclear disarmament. I also participated in an interesting scenario-based session on the consequences of a hypothetical nuclear explosion and the limits of even the most robust health systems. It was quite a sobering experience.

As a 4th year medical student, I have to say that the overall experience was bittersweet, knowing that my short relationship with IFMSA was coming to an end. The opportunities to get involved within IFMSA are numerous and I believe CFMS members have a lot to offer. At the end of the week, I felt motivated to continue my advocacy efforts beyond my official "student" title. I came home and actively sought new avenues to do so. I sincerely believe this March meeting has somewhat changed outlook on the professional trajectory. Finding myself at a crossroad, it reminded me that I have knowledge, I have skills and I am ready for what comes next.

## SCOPE SESSIONS REPORT

Charlotte Coleman, *Queen's University M.D. Candidate (2021)*

### Agenda Highlights

- Exchanges Fair
- SCOPE Regulations Changes



For the first week of March 2019, I was honoured with the ability to leave the snowstorms of Ontario and travel to Portoroz, Slovenia. I represented Canada on a team of six incredible women for the IFMSA General Assembly. As my role of National Exchange Officer, I attended meetings for the Standing Committee of Professional Exchanges (SCOPE). Further, I attended trainings, speakers, and plenaries for topics of policy, peer training, gender equity, and more.

The most profound benefit of this week was the ability to share ideas with other delegates. As our exchange program mirrors those implemented in other countries, discussions with delegates from around the world allowed me to share our ideas and bring new thoughts and innovation to the CFMS program. More importantly, as the ethics of exchanges is a growing concern at our own General Meetings, I brought the complexity of our conversations to an international audience. The honesty of these conversations was impressive and productive. I believe this transparency was possible due to the environment provided at the March Meeting.

Outside of exchanges, the entire delegation wrote amendments to motions, discussed policy documents, and shared statements advocating for the values of CFMS. Although they often extended into the early hours of the morning, these plenary sessions gave me treasured experience in policy writing and politics. I was especially proud of our delegation for working as a team to critique and respond to motions, in real time. Specifically, my proudest moment this week was in our final plenary. After an unfortunate comment in a plenary session, we drafted, edited and presented a statement in support of our Australian colleagues to recognize and discourse cultural appropriation.

There were two takeaways from this meeting that I want to highlight for CFMS members. First, that we have a lot to offer. For example, at the Activities Fair various programs are shared by different groups within the attending countries. Although CFMS presented one, some countries presented several. Throughout the week, the Canadian delegation found ourselves sharing resources and facts to other participants. Considering our delegation of six people, the fact that we took home two awards for contribution and a presentation speaks to the level of engagement we fostered.

Secondly, I want to highlight the value that cross-cultural conversations on complex issues can provide to CFMS. For instance, in the past few years, CFMS has advocated for the homeless population in our country. At the conference, representatives from the World Health Organizations spoke to us about how they will listen to the youth population, specifically within IFMSA. The size, breadth, and history of IFMSA make connections with multi-national conferences and organizations, such as the WHO, possible. Policy papers that Canadian students put forward are often mirrored by other countries. I would love to see a future in which we, the CFMS, collaborate with our nations and present our shared documents to the IFMSA. Using their global partnerships, the IFMSA could then pass these documents on at high-level tables. Our students are already dedicated to these important topics and I believe we should utilize this avenue to allow our impact to reach beyond our country's borders.