IFMSA-Japan: Creating a network of medical students in Japan



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The International Federation of Medical Students' Associations Japan (IFMSA-Japan) is the Japanese National Member Organization (NMO) of the International Federation of Medical Students' Associations.

The International Federation of Medical Students' Associations (IFMSA)

The IFMSA is a non-political and non-governmental organization representing medical students worldwide which is officially recognized as an NGO by the United Nations (UN) and as an international forum for medical students by the World Health Organization (WHO). It also has official relationships with other UN agencies and the World Medical Association.1 The structure comprises medical students' associations-NMOs -in different countries and regions. As of August 2009, the IFMSA has 97 member organizations. Its mission is to offer future physicians a comprehensive introduction to global health issues. Through the IFMSA, students undertake various kinds of projects, conferences, and workshops. Activities address issues concerning public health, reproductive health including AIDS, human rights, peace, and medical education. The IFMSA also runs student exchange programs, both for research and clinical clerkships, which are the largest student-run exchange programs in the world. Each of these 6 activity areas are managed by an exclusive Standing Committee. To develop future human resources in terms of taking a key role in the improvement of health systems, the IFMSA provides students with training sessions on various topics, such as leadership, project management, and communication, which are also helpful to students in managing IFMSA activities.

IFMSA-Japan

As mentioned above, the IFMSA-Japan is the IFMSA's NMO in Japan. The association currently comprises local committees (LCs) from 52 medical faculties in Japan. It is a non-political and non-governmental organization and has interactions with the Japan Medical Association (JMA), with its general secretariat located in the JMA Office. The mission of the IFMSA-Japan is to create a better society by nurturing health professionals with a broad perspective through contributions to society and international relationships. Our activities basically follow the structure of the IFMSA. It undertakes projects concerning public health, reproductive health including AIDS, human rights, peace, and medical education. We are also active in IFMSA exchange programs, having more than 120 students exchanging to and from Japan every year. In 2007, the IFMSA-Japan received the Public Health Award, which is presented by Daiichi Mutual Life Insurance Company and regarded as the most prestigious award in the field of public health. The association celebrates its 10th anniversary this year.

Having a Network of Medical Students

There are some advantages in having a network of medical students in Japan. Currently, no medical school student organization in Japan has sufficient numbers of faculty or student members. However, especially in the fields of medical education and post-graduate clinical training, there is a need for input from students. In fact, the IFMSA-Japan was consulted by the Ministry of Health, Labour and Welfare this year. Feedback from appropriate student organizations can be useful

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NMO presidents in the IFMSA General Assembly (Tunisia 2009)



Clinical clerkship in Sweden

in improving curricula of medical schools.

Internationally, the IFMSA can give Japanese members ideas on how medical students in other countries are studying medicine. The projects raise awareness of global health issues, which cannot be overlooked in this era of globalization, and the exchange program can be incorporated into clinical clerkships in the curricula of participating faculties, as the program takes academic quality seriously.

Structural Strengths and Challenges

In Japan, there are various student-run organizations of medical students, each focusing on its own area of special interest, but only the IFMSA-Japan has local student organizations or clubs as local member committees. This helps the IFMSA-Japan to establish good contacts with local medical students with continuity in terms of administration, and this is the basis of our efforts to create a nationwide network of medical students in Japan.

However, there are some disadvantages and obstacles with this structure. Firstly, there are students who do not belong to clubs which are LCs of the IFMSA-Japan. As the IFMSA-Japan respects the autonomy of LCs, an LC is free to choose which activities it will participate in. For example, if an LC chooses to be active only in student exchanges, there may be students interested in one of the IFMSA-Japan's public health projects who do not wish to be members of the LC because they are not interested in exchanges. It is true that the IFMSA-Japan is



Peer education on reproductive health in high school

open to all students, even if they are not members of an LC, but this situation can be contradictory. To resolve this situation, we provide LCs with promotional materials for our activities and encourage them to take part in many activity areas. Secondly, if there are no existing relevant student organizations in a medical school, the students have to establish one on their own. This takes manpower and is time-consuming.

In some NMOs of IFMSA, all LCs share the same structure as the IFMSA, or the LCs are the student council of the medical school, which makes the members representatives of the school. Such structures are desirable in terms of solidarity and participation of students. However, in Japan, student councils generally do not exist and the LCs all have different backgrounds, which make it difficult to identify as being part of the IFMSA. Another challenge we are facing is the difficulty of recruiting new LCs. First of all, we do not have any contact with students in some medical schools. Secondly, even when we have found students motivated to establish a new LC in their faculty, the university does not support them because it does not want its students to join external organizations. Thirdly, all of this recruitment is done one by one by medical students so time is limited and funds are insufficient.

Conclusion

The IFMSA-Japan seriously desires to contribute to the field of medicine in Japan and the world. To optimize this function, we need more active LCs and leadership-orientated members. We ask all medical schools and government agencies to support our mission and objectives to form a network of medical students and act as a gateway for Japanese medical students to the international forum of medical students.

Reference

1. International Federation of Medical Students' Associations Website http://www.ifmsa.org