



ACTIVITIES BOARD

NEWSLETTER

ISSUE 1

NATIONAL CONFERENCE 2007

WELCOME

Welcome to the first issue of the Activities Board Newsletter.

This is something that the Activities Board came up with at the AGA in Southampton. We thought it would be great chance to let you all know about all the amazing things that Projects and Campaigns have been up to recently. We hope to make it a biannual newsletter at both the National Conference and the Global Health Conference. This newsletter is also available online at www.medsin.org/abchat

Thank you to all those Projects and Campaigns who have contributed to this first issue of the newsletter, it's great to hear what you have



VP-Projects past and present

been up to. I hope that in future this will grow and we will have articles from all members of the Activities Board. I'd love to hear your feedback about what you think about this first issue and any ideas you have for it.

So sit back, relax and enjoy hearing about the fantastic things that Medsin Projects and Campaigns have been doing.

Emily, Vice President for Projects

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Save Our NHS - Public health not private wealth!

Big demonstration next Saturday, 3rd November, London

The NHS is under attack. Its founding principles of free health care for all are being scrapped for a business model of health care for profit. We all need the NHS, as a doctor or as a patient. We know the public supports the NHS in a big way, so lets make sure the government knows this!

This is our chance to stand up for what we believe in and demand the end to cut backs and privatisation. Lets not be the generation that stood there and watched while the NHS was destroyed.

This demo has been called by NHS Together (a coalition of public service unions) and Keep Our NHS Public, with diverse support including Health Emergency, local health action groups and the

BMA.

Medsin will be meeting outside Temple station (Victoria embankment) at 10.45am. Come dressed in scrubs (or doctors & nurses, as you wish!) and look out for the Medsin banner.

Posters, badges and presentations are available for advertising the demo, just email Pete on campaigns@medsin.org. And let us know if you are coming.

"Come back when your condition deteriorates"

Maryam Zaky and Tom Yates describe GhAP and Crossing Border's new campaign

"G, is an Arab man whose nationality is disputed. He suffers from bowel cancer, and was admitted in an emergency because of uncontrolled bleeding. The clinicians in A&E scheduled him for an operation as soon as the bleeding stopped. However, once the hospital discovered G was a refused asylum seeker, he was given a bill for many thousands of pounds, and his operation was cancelled. He was discharged from hospital and told to come back 'when his

"Hundreds of thousands of vulnerable UK residents could lose their right to freely access most NHS primary care services"

Hundreds of thousands of vulnerable UK residents could lose their right to freely access most NHS primary care services. Among the groups affected will be failed asylum seekers awaiting deportation, failed asylum seekers who cannot safely travel home and undocumented migrants. Unable to enter formal employment and mostly ineligible for benefits, these men and women are some of the most destitute people in the UK.

In the next few months, the Department of Health and the Home Office will publish a review they have been conducting into access to the NHS for foreign nationals, with the implementation of the recommendations planned for September 2008. They have declared their intention to bring the rules governing primary care into line with those governing secondary care, which since 2004, with a few important exemptions, have excluded this population from accessing care in NHS hospitals.

The 2004 changes were implemented upon claims that the NHS was suffering the effects of increased health tourism, a statement for which the government subsequently admitted there was no evidence. However,

this time round, the government have stated their wish to "ensure that living illegally becomes ever more uncomfortable and constrained, until failed asylum seekers leave or are removed".

In March, the Joint Committee on Human Rights looked into the effects of the regulations excluding failed asylum seekers from hospital care and found the "threat of incurring high charges has resulted in some people with life-threatening illnesses or disturbing mental health conditions being denied, or failing to seek, treatment. We have heard of many extremely shocking examples."

The current and newly proposed health changes poses an emerging ethical dilemma to health professionals. We, like the GMC, think a doctor should always be to "make the care of your patient your first concern". However, this legislation goes against this duty, converting health professionals instead to immigration officers rather than caring, dutiful doctors.

With eighty-six percent of British health needs being met cheaply by general practitioners, the withdrawal of

primary care will likely have a more profound effect than the loss of secondary care. In a new briefing, Medact worry that "the impacts of the proposed new charges would be: treatment for many routine and chronic conditions will, if left untreated, become either emergency or immediately necessary. Cost effective treatment for conditions such as asthma, diabetes and respiratory infections will instead be replaced by highly technical and expensive care for life threatening illness."

At the AGA in Southampton, Medsin passed a resolution to "support members in all non-violent protest against further restricting the rights of refugees to healthcare in this country". At the upcoming National Medsin Conference at Dundee we will run workshops to promote this issue and encourage attending students to support us in our campaign against these proposed government plans.

We hope that many will attend and feel inspired to get involved. For further information go to <http://www.medsin.org/defendprimaryhealthcare> where there is a link to the petition and to the Facebook group.

COCK and BALL - Conference, Campaign and Sexball



Sexpression National Conference was held in Sheffield 2 weeks ago. Sex in the Steel City was a brilliant and fascinating weekend.

The weekend kicked off, after a Friday night in the pub, with Danish pastries and games and just got better from there on in! Steve Slack (Centre for HIV and Sexual Health in Sheffield) opened the weekend with a thought provoking talk on barriers to sexual health. He highlighted our culture of negativity towards sex and lack of open and honest communication. It left us puzzling over the lack of positive messages about sex especially given its good for you and fun (if safe and consensual of course)!! Dr Petra Boynton continued by talking about the messages that pornography gives out and how this influences and informs our sex lives. We also had an open discussion on the massive impact that the media has on society's perceptions of sex.

There were many brilliant workshops throughout the weekend on a variety of topics from HPV vaccine, teen pregnancy and sexual disorders and stigma to stop AIDS campaigning and training on new Sexpression projects. We had a fab Moulin rouge social on Saturday night which left us all feeling slightly worse for wear during Sunday morning's talks on sexual abuse and child protection. The weekend finished with the election of the new National Committee 2008 – congratulations to them!

Sexpression also launched their campaign over the weekend. We would like to see changes in the SRE (sex and relationships education) delivered within schools.

We ask for a number of key changes;

1. SRE is made compulsory
2. The emotions surrounding sex and relationships are more fully discussed
3. The importance of a stable

family unit (not just marriage) is included

4. Young people have a firm understanding of contraceptives and STIs and where and how to access these services.

Sexpression also has another big event coming up soon too. It is on the 24th of November in Birmingham and it is Sexpression's Sexball!

The evening of Sexpression fun is preceded by an afternoon of really interesting talks on sexual and maternal health globally including FGM, HIV and unsafe abortion. Then of course off we go in our black tie with a splash of red to the Sexball.

Tickets are £35 including champagne reception, 3 course dinner and entertainment as well as the afternoons events and accommodation. To book at ticket email sexball@sexpression.co.uk Hope to see you there.

If you want to know more or get involved contact Emily on coordinator@sexpression.co.uk

“ He highlighted our culture of negativity towards sex”

The Global Health Education Project

This year we're going to continue to build on the foundations of GHEP from previous years by supporting people in getting global health education into their core curriculum. We're planning on doing this by expanding the 'Rough Guide to global health education', creating a comprehensive database of available global health courses (BSc, SSC, Electives) available in the UK and who you can speak to about them! We're also plan-

ning on working with UCL (CIHD) and Leeds (Nuffield Centre) to come up with ideas for improving global health education before and during electives.

This year we're also keen to expand the work of GHEP into providing global health teaching for members of the network whom don't have the opportunity to study on global health courses. We'd like to do this through creating a set of computer assisted

learning modules available from medsin.org. This is where we'd really like some help. Do you know of any good CAL's already? Would you be willing to write a CAL on a topic you're interested in? If so, please get in touch with us on globalhealth@medsin.org.

If you've got any ideas for the project or would like to get more involved, please check out the website or email Sunil and Abi at globalhealth@medsin.org

News from ukAM



Finally attain Trans-national Project status

At the 57th IFMSA General Assembly held this summer in Canterbury, UK, Marrow was awarded trans-national project status. This was the culmination of several years of hard work by different national Marrow co-ordinators and members of the Medsin national committee.

Acquiring trans-national status means that Marrow, a project that has existed in the UK for the past 10 years, is now internationally recognised by IFMSA affiliated national member organisations. This will

undoubtedly be beneficial in helping to establish Marrow in other countries around the world.

Marrow was created in 1998 by medical students from Nottingham University. It has since grown to become one of Medsin's biggest projects, with branches in every UK medical school and some overseas institutions. In 2006 it won the IFMSA's Rex Crossley Award for best international project. An application for trans-national status was first proposed in 2005 by the then national committee.

The application included detailed explanations of what Marrow aims to achieve and the means by which will go about this, the setting and discussion of a ten year plan, including long and short term objectives and support for overseas groups. Following several re-submissions over the past two years, trans-national status was finally granted this year.

Marrow AGM is coming up soon too. It will be held in Exeter on 24-25th November. For more information contact Mark on marrow@medsin.org

"Millions of lives are lost every year due to lack of access to medicines"

Canterbury Declaration

During ukAM a small working group was set up to work on producing a document on the theme event of Access to Essential Medicines. They produced the Canterbury Declaration which Medsin-UK then proposed as a policy statement to the IFMSA. This was successfully passed and is now IFMSA policy.

Below is the key points of the Canterbury Declaration

"We, the International Federation of Medical

Students' Associations (IFMSA), are an internationally diverse group of future health professionals concerned with global health issues. We protest that the medical community lacks tools, namely, access to medicines, which are vital to their job. We make this declaration in the IFMSA spirit of solidarity:

We believe in access to essential medicines for all. Millions of lives are lost every year due to the lack of access to medicines. This gross inequity represents a failure of systems of

medicine research and development, pricing, distribution and rational provision. Access to essential medicines is fundamental to the provision of health-care. It is necessary to ensure everyone's right to the highest attainable standard of health regardless of their social status, gender, sexual orientation, ethnicity, and nationality."

For more information or to read the whole document, contact Rob (hughes.rob@gmail.com) or Pete (campaigns@medsin.org)

NEOs sign record number of exchanges

The August GA is, without doubt, the highlight of the NEO year and this year's event in Canterbury lived up to everybody's expectations. Our raison d'être at these events is to meet our international colleagues and sign contracts with other countries for the coming year, enabling UK students to take part in bilateral exchanges with other medical students from all over the world. The contracts fair is a real experience with representatives from over 90 countries frantically negotiating contracts in a stuffy marquee.

This August we signed 88 bilateral contracts on behalf of 8 UK medical schools with 30 different countries! 39 contracts were signed for Nottingham University Medical School, 10 for Leicester, 10 for St. George's, 8 for St. Bartholomew's, 8 for UCL & Imperial, 10 for Peninsula

and 3 for Dundee. Many of the 30 countries we signed with have exchanged with the UK in the past but we were also able to agree contracts with several countries for the first time such as Costa Rica, Jamaica and Bolivia. Last year 68 students from just 5 UK medical schools went on exchange so this summer's efforts indicate that UK exchange program is making significant progress.

ukAM was also an opportunity for official handover, with Barney Flower taking over from Ally Ford as National Exchange Officer. James Church stays on for a second year, bringing some much needed continuity to the NEO role. In between all the hedge-jumping, handovers, terrible karaoke and dodgy fancy dress the three of us had a very enjoyable and productive week with the

rest of the SCOPE (Standing Committee On Professional Exchanges) delegates and our own Medsin team.

Since ukAM the UK exchange program has really gathered momentum and we are optimistic that Southampton and Manchester medical schools could get exchanges up and running over the coming year. A big thank you to all the local committees who attended the national training day in Nottingham earlier this month; it's so great to see so many enthusiastic and competent people getting involved with what we feel is a very worthy and important project.

If you'd like to find out more about IFMSA exchanges please don't hesitate to get in touch at neo.medsin@gmail.com

"bilateral exchanges with other medical students from all over the world"

Access to Essential Medicines

The biggest event that Medsin has ever hosted took place in Canterbury this year from the 4th to the 10th of August. ukAM saw over 900 enthusiastic medical students from all around the world come to the UK to hear about the theme, "Access to Essential Medicines". This was the first time that an IFMSA GA fully embraced the theme and this time we did it in style.

Throughout the week long conference, a series of theme events were held that tried to educate delegates about some of the important issues. A debate between experts from aca-

demia and big pharma captivated delegates during the pharma debate. An introductory session was also held that introduced some of the key issues. Throughout the week, a number of breakout sessions or Pow Wows were held. These were small informal discussions with some global health experts. The theme events were packed out and some delegates had to be turned away from some due to exceptional numbers.

In addition, some truly inspirational and world renowned experts came to give interest-

ing and inspiring talks. They included Richard Horton, editor of the Lancet and Richard Smith, the former editor of the BMJ.

The development of the Canterbury Declaration meant that we came out with something concrete on our theme.

We look forward to the theme of the next GA - Migration and Health in Mexico.

International Campaign to Abolish Nuclear Weapons (ICAN) - a project IPPNW

With the Trident nuclear weapons system- the UK is capable of destroying our planet. It is one of the 9 states which threaten the world with nuclear weapons. Our efforts and accomplishments in creating peace, improving health systems, and reducing inequalities are constantly being challenged by the multiple costs of militarisation and war. ICAN aims to abolish all nuclear weapons. The UK remains one of the 9 states with nuclear weapons, and as these countries persist to develop and maintain them, the probability they will be used is ever increasing.

Even after Hiroshima and Nagasaki, politicians remain willing to maintain nuclear weapons. Since the 1980s physicians have used evidence to remind humanity about the catastrophic health effects, and that no cure or meaningful medical response exists to a nuclear disaster. However as well as prevention of nuclear war, disarmament will provide us with the opportunity to create security for

the health of the world through peace, cooperation and trust.

The UK could be pivotal in nuclear disarmament as Trident becomes obsolete in 2020. Although plans are currently under way to maintain the UK as a nuclear state until 2050- ICAN, other campaign groups and roughly 100 MPs aim to reverse this. ICAN is increasing public awareness and activity in the process of nuclear abolition and peace. A grassroots movement is needed for its success.

ICAN's achievements have so far been two-fold with raising awareness among the public and also discussing nuclear abolition with politicians. Awareness raising events were held in prime public locations of London, Bristol, Canterbury, Greenwich Glasgow, and Faslane speaking one-2-one with the public, and gaining media attention. Of course we had fun too- last month 30 students from 17 nations cycled from Dover to London to meet with public, politi-

cians and media. We joined peaceful protests at Faslane nuclear weapons base- always with lots of music! Along with doctors, students have formally met with Ministry of Defence and Foreign Commonwealth Office, and remain enthusiastic to hold further meetings- so we have no excuse not to keep up the pressure!

As the UK faces a real opportunity for disarmament, ICAN campaigners across the 60 participating countries are looking at us to take a lead, and want to support our efforts. We need ICAN to spread across every university in the UK... get in touch for more info ippnw@medsin.org.

Kiran Cheedella
ICAN coordinator

The Student Stop AIDS Campaign 'Unite to Fight AIDS' Speaker Tour 2007

As you read this, we will have just completed this year's annual Speaker Tour, organised by the Student Stop AIDS Campaign. This year marks The Tour's 5th anniversary, and with 19 stops up and down the country, including one very high-profile event in Parliament, it may be the most successful ever!

Over the past two weeks, over 1500 students around the country have attended local events and listened to the speakers Ntenje Kakota (Zambia), Shahada Kin-yada (Tanzania), Will Horwitz (British) and Katy Athersuch (British, and organiser of the Tour) talk about their experiences of HIV activism.

All the speakers have had first-hand experience with HIV/AIDS, and all gave highly informative and entertaining talks, which we hope has stimulated those who saw them to also take up the fight against AIDS!

If you missed The Tour or would like us to come to your university next year, please email Katy.Athersuch@SPW.org and check out www.stopaids Societies.org.uk/the-speaker-tour/speaker-tour-2007.

