IFMSA Report on the 2nd Special Session of the World Health Assembly
The International Federation of Medical Students’ Associations (IFMSA) is a non-profit, non-governmental organization representing associations of medical students worldwide. IFMSA was founded in 1951 and currently maintains 141 National Member Organizations from 130 countries across six continents, representing a network of 1.3 million medical students.

IFMSA envisions a world in which medical students unite for global health and are equipped with the knowledge, skills, and values to take on health leadership roles locally and globally, so to shape a sustainable and healthy future.

IFMSA is recognized as a non-governmental organization within the United Nations’ system and the World Health Organization and works in collaboration with the World Medical Association.
Welcome Message from the Head of Delegation

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Dear reader,

In front of you lies the report of the efforts of the IFMSA delegation to the Second Special Session of the World Health Assembly. This session took place in November 2021 and it was only the second ever, after the first special session took place a year before that due to the pandemic. This most recent special session was a historic one, because it focused on a potential new instrument for pandemic preparedness and response. Through this report you can gain further understanding and insights into this instrument and its importance.

The World Health Assembly is the highest decision-making body of the World Health Organization. The IFMSA is, together with the International Pharmaceutical Students’ Federation, a platform to ensure that youth is present at this high-level gathering. Especially as we consider pandemic preparedness and response, the unique perspective of youth is essential - not only for a better tomorrow but also an improved today.

To ensure that this perspective was indeed shared, it is important to underline that the IFMSA was represented by an incredible delegation of IFMSA Officials and a representative from the International Veterinary Students’ Association (IVSA). These delegates did an incredible job to ensure our stances are part of this historical debate.

I am grateful for the efforts of the delegation and invite you to read this report to gain insight into this historical moment as well as the specific efforts of our Federation. Please do not hesitate to get in touch with any questions or suggestions.

With warm regards,
Iris
The WHO is the directing and coordinating authority on international health within the United Nations’ system. It was created when its Constitution came into force on the 7th of April 1948, a date now celebrated every year as ‘World Health Day’. More than 7000 people from over 150 countries work for WHO across national and regional offices, as well as its headquarters in Geneva.

The WHO remains committed to the principles that are set out in the preamble of its Constitution:

- Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity;
- The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition;
- The health of all peoples is fundamental to the attainment of peace and security and is dependent on the fullest cooperation of individuals and States;
- The achievement of any State in the promotion and protection of health is of value to all;
- Unequal development in different countries in the promotion of health and control of diseases, especially communicable disease, is a common danger;
- Healthy development of the child is of basic importance; the ability to live harmoniously in a changing total environment is essential to such development;
- The extension to all peoples of the benefits of medical, psychological and related knowledge is essential to the fullest attainment of health;
- Informed opinion and active co-operation on the part of the public are of the utmost importance in the improvement of the health of the people;
- Governments have a responsibility for the health of their people, which can be fulfilled only by the provision of adequate health and social measures;
The WHO is the directing and coordinating authority on international health within the United Nations' system. WHO does this through:

- Providing leadership on matters critical to health and engaging in partnerships where joint action is needed;
- Shaping the research agenda and stimulating the generation, translation and dissemination of valuable knowledge;
- Setting norms and standards and promoting and monitoring their implementation;
- Articulating ethical and evidence-based policy options;
- Providing technical support, catalysing change, and building sustainable institutional capacity;
- Monitoring the health situation and assessing health trends.
This special session was the 2nd special session in the history of the World Health Assemblies due to its utmost importance in reflecting on the COVID-19 pandemic situation and how it unleashed the existing health inequities and fragilities in our health system and guiding documents, with the International Health Regulations (2005) at the top of the list.

This required member states and all stakeholders to consider learning the lessons from the pandemic and have this special session of the WHA to discuss one agenda point of “Consideration of the benefits of developing a WHO convention, agreement or other international instrument on pandemic preparedness and response with a view towards the establishment of an intergovernmental process to draft and negotiate such a convention, agreement or other international instrument on pandemic preparedness and response, taking into account the report of the Working Group on Strengthening WHO Preparedness and Response to Health Emergencies.”

The session concluded with the adoption of the decision of establishing an intergovernmental negotiating body to draft and negotiate a WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response, with the engagement of all Member States and Non-State Actors, through an evidence-based approach “taking into account the discussions and outcomes of the Member States Working Group on Strengthening WHO Preparedness and Response to Health Emergencies, considering the need for coherence and complementarity between the process of developing the new instrument and the ongoing work under resolution WHA74.7, particularly with regard to implementation and strengthening of the IHR (2005)”

The outcome should be ready for consideration in the 77th World Health Assembly 2024.
The International Federation of Medical Students’ Associations (IFMSA) is the largest international student organization and aims to serve medical students all over the world. Currently, the IFMSA represents 1.3 million medical students through its 145 National Member Organizations. Its vision is a world in which all medical students unite for global health and are equipped with the knowledge, skills and values to take on health leadership roles locally and globally.

The IFMSA is an independent, non-political organization, founded in 1951, and is officially recognized as a Non-Governmental Organization (NGO) within the United Nations and recognized as a non-state actor in Official Relations by the World Health Organization (WHO).

Official Relations with WHO started back in 1969, when the collaboration resulted in the organization of a symposium on ‘Programmed Learning in Medical Education’, as well as immunology and tropical medicine programs. In the following years, IFMSA and WHO collaborated in the organization of a number of workshops and training programs.

In the present day, IFMSA collaborates with the WHO through various departments, programs and projects. The IFMSA has a Liaison Officer to the World Health Organization who is responsible for fostering the established partnership between IFMSA and WHO. This is done by bringing medical students to WHO (through delegations to meetings, collaboration with WHO on different activities and events) and by bringing WHO to medical students (through general updates and communication, and inviting WHO staff to IFMSA events). The Liaison Officer to the World Health Organization is also involved in organizing the Youth Pre World Health Assembly (Youth PreWHA). The Liaison Officer to the World Health Organization can be contacted through lwho@ifmsa.org.
Every year, IFMSA hosts a Youth Pre World Health Assembly (Youth PreWHA) in the days preceding the WHA. Launched in 2013, the PreWHA has become an important event for the IFMSA and the broader youth community engaged in health. The event aims to educate and empower future leaders in health while developing a collaborative approach to youth participation at the WHA. The IFMSA delegation to the Executive Board Meeting plays an important role in preparing the delegates to the World Health Assembly since important agenda items providing insights into the happenings at the WHA are discussed at the Executive Board Meeting.
The Second Special Session of the World Health Assembly was very unique, as compared to other World Health Assemblies. The reason that it was unique was because there was one main agenda point to be discussed. This was the potential new instrument towards pandemic preparedness and response. The detailed agenda can be found here and accompanying documentation here. As outlined earlier, the road towards this instrument has now been adopted and it will be exciting to see what comes next - IFMSA will be ready and willing to contribute every step of the way.

IFMSA Delegation to the 74th World Health Assembly Special Session

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<tr>
<th>Delegate Name</th>
<th>Affiliation</th>
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<tr>
<td>Iris Martine Blom</td>
<td>IFMSA Liaison Officer to the World Health Organization, Head of Delegation</td>
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<td>Maria Inês Francisco Viva</td>
<td>IFMSA Vice-President for External Affairs</td>
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<td>Zainulabdeen Muthanna Ibrahim Al-Badri</td>
<td>IFMSA Vice-President for Capacity Building</td>
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<td>Luregn von Planta</td>
<td>International Veterinary Students’ Association Executive Committee</td>
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<td>Name</td>
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<td>Kevin Alvaro Handoko</td>
<td>IFMSA Director of the Standing Committee on Research Exchange (SCORE)</td>
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<td>Rajesh Sharma</td>
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<td>Mohamed Eissa</td>
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<td>IFMSA Liaison Officer for Sexual and Reproductive Health and Rights Issues, incl. HIV &amp; AIDS</td>
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<td>Muhammad Ibrahim Khan</td>
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<td>Angelo Moreno</td>
<td>IFMSA Regional Director for the Americas</td>
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IFMSA Advocacy at the 2nd Special Session of the World Health Assembly

IFMSA Official Statement

Non State Actors in official relations were invited to contribute with one statement during this WHA. The IFMSA contributed with a statement supported by the IVSA, in which we called for the meaningful engagement and participation of youth in the development of this statement. The statement will be published and openly available here.

Gender Watch

A Gender Watch is the process of tracking how gender-related issues were addressed in the statements from all stakeholders. The methodology was different from what we usually followed in external meetings (e.g. tracking gender of speakers) to address the concerns related to the previous tool.

Some outcomes we can conclude based on this Gender Watch:

- During the whole meeting, only 6 statements in total included gender-related issues in their statements, 5 of them only mentioned them.
- Canada is the only member state that reflected on multiple aspects of the pandemic on different genders as a significant part of their statement.
- On day 1, 3 out of 71 statements throughout the day at least mentioned gender aspects in their speeches.
- The most common dimension addressed by speakers was gendered social and economic impact of the pandemic.
Youth Watch

During this meeting and for the first time in an IFMSA delegation to a WHO high level meeting we implemented the Youth Watch. The delegation followed up on every statement delivered by Member states and non state actors to assess if youth was part in their statements as action plans, achievements or in any other forms and the result was as followed:

- During the whole meeting, 6 out of 206 statements in total had youth mentioned.
- In 4 out of the 5 statements youth was only mentioned as a small part of the statement.
- Only one statement was focusing on youth and it was delivered by a Non-state actor.
- Two statements were focusing on youth engagement.
- One statement addressed youth issues.

Civil Society Watch

A civil society Watch is the process of tracking how society-related issues were addressed in the statements from all stakeholders.

Some outcomes we can conclude based on this civil society Watch:

- During the whole meeting, 18 out of 206 statements in total included civil society-related issues, 10 of these came from Member States.
- Only in one statement civil society was a big part of the statement, in the rest it was only mentioned.
- UNAIDS was the only one that proposed Specific Plans for Engagement, as a significant part of their statement.
- On day 2, 14 out of 122 statements throughout the day at least mentioned civil society in their speeches.
- The most common dimension addressed by speakers was the whole of society approach.
Social Media Advocacy

The Social Media Advocacy of the delegation consisted mostly in actions done on Instagram and Twitter.

The first step was sharing the delegation through our main platforms (Facebook and Instagram Stories), so medical students will know who to follow up for updates of the Special Session.

Every day a summary of the most important aspects of the WHA were shared on Instagram Stories. The stories also included polls to understand the engagement and knowledge of our members about the Special Session of the WHA.

- Do you know there is a Special Session of the WHA happening?
  - 66% of the participants answered no
  - 44% of the participants answered yes

- Do you think a pandemic international agreement is needed?
  - 88% of the participants answered yes
  - 12% of the participants answered no

On the final day, the decision about the treaty on pandemic responses and its timeline was shared. We invited our members to continue being part of this journey advocating for youth and medical students.

On Twitter, there were developed images with the most important quotes of the Special Session. 6 images were created for this purpose. These ones were chosen because they mentioned civil society or were directed to empower people.
“First, I want to thank all members of the delegation: Ines, Zain, Mohamed, Rajesh, Angelo, Kevin, Klaudia, Ibrahim and Iris. It was a great experience to work with such a great open minded, diverse, and enthusiastic team. We were able to witness together this historic moment when the Member States of WHO adopted to proceed with creating a pandemic treaty. Even if it will still be a long way until it will be finalized, seeing the member states being united and agreeing that better pandemic preparedness is necessary, makes me optimistic. Even more, the fact that many have acknowledged the importance of a One Health approach in pandemic prevention. We all have suffered in various ways from the pandemic but more important is what we have gained. We have seen how fragile human society is and need now to grow back even stronger. We should not forget that we the Youth need to be included in future dialogs. This Pandemic Treaty will be our tool as future public health leaders and it’s our responsibility to make our voices heard, to fight misinformation, and to advocate for equity.”

Rajesh Sharma | VPF

The WHA special Session was the historic event in which member states agreed to work on a new instrument called Pandemic treaty. It was a wonderful experience to see how Members States and Non-State Actors work together in this new accord and it was historic on its own to have all the member states united for this treaty. This treaty will strengthen the pandemic preparedness, response, reporting and sharing of knowledge, resources, expertise within member states. This will help in the fight of the current COVID pandemic and to prevent future pandemics.

I would like to thank everyone from the delegation for the wonderful coordination and work during the session. It was an amazing experience to work with these wonderful people. I would like to stress the fact that it should include a multidisciplinary team with inclusion of Non-States Actors and youths in the central core of the pandemic treaty.
Being part of history is always great. This is the second time in history that the World Health Assembly has a special session. This time to discuss the future response of the world to a pandemic.

Sadly, youth is not a main factor during the discussions or negotiations, however being in the World Health Assembly gives you the perspective and the knowledge to engage more in these discussions, also it helps you to understand the real processes, geopolitics and diplomacy behind these decisions. This experience and knowledge will help me for my future path and career.

Finally, participation is not only happening in an individual way, but a construction of ideas, experiences and thoughts from all the delegation.
AMSA Afghanistan
ACMS Albania
Algeria - Le Souk
IFMSA-Argentina
AMSA Australia
AMSA Austria
AzerMDS Azerbaijan
IFMSA-BH Bahrain
BMSS Bangladesh
IFMSA-Barbados
BeMSA Belgium
AEMF Benin
IFMSA-Bolivia
BoHeMSA Bosnia and Herzegovina
SaMsic Bosnia and Herzegovina (Rep. of Srpska)
UBMSA Botswana
DENEM Brazil
IFMSA-Brazil
AMSB Bulgaria
AEM Burkina Faso
ABEM Burundi
CAMSA Cameroon
CFMS Canada
IFMSA-Quebec
AECS Spain, Catalonia
IFMSA-Chile
IFMSA-China
AMSAHK China, Hong Kong
ASCEMCOL Colombia
ACEM Costa Rica
CroMSIC Croatia
CyMSA Cyprus
IFMSA-CZ Czech Republic
MSA-DRC Democratic Republic of the Congo
IMCC Denmark
IFMSA-Dominica
ODEM Dominican Republic
AEMPPi-Ecuador
IFMSA-Egypt
IFMSA-EI Salvador
EstMSA Estonia
EMSA Ethiopia
FiMSIC Finland
ANEMF France
AEMG-Gabon
GaMSA Gambia
GMSA Georgia
bvmd Germany
FGMSA Ghana
HeILMSIC Greece
IFMSA-Grenada
IFMSA-Guatemala
AEM Guinea
AHEM Haiti
IFMSA-Honduras
HuMSIRC Hungary
IMSA Iceland
MSAI India
CIMSA-Indonesia
IMSA-Iran
IFMSA-Iraq
IFMSA-Kurdistan (Iraq)
AMSI Ireland
FIMS Israel
SISM Italy
NOHSS Ivory Coast
JAMSA Jamaica
IFMSA-Japan
IFMSA-Jordan
KazMSA Kazakhstan
MSAKE Kenya
KOMS-Kosovo
KuMSA Kuwait
AMSA-KG
LaMSA Latvia
LeMSIC Lebanon
LMSA Liberia
LiMSA Lithuania
ALEM Luxembourg
MSA Malawi
SMMAMS Malaysia
APS Mali
MMSA Malta
AFMM Mauritania
AMMEF Mexico
MoMSIC Montenegro
IFMSA-Morocco
AMNSA Namibia
NMSS Nepal
IFMSA-The Netherlands
AESS Niger
NiMSA Nigeria
MSANC, Northern Cyprus
NMSA Norway
MedSCO-Oman
IFMSA-Pakistan
PMSA-Palestine
IFMSA-Panama
IFMSA-Paraguay
IFMSA-Peru
AMSA-Philippines
IFMSA-Poland
ANEM Portugal
QMSA Qatar
KMSA Korea
ASRM Moldova
MMSA The Republic of North Macedonia
FASMR Romania
HCCM Russia
TaMSA-Tatarstan Russia
MEDSAR Rwanda
FNESS Senegal
IFMSA-Serbia
SLEMSA Sierra Leone
AMSA-Singapore
SloMSA Slovakia
SloMSC Slovenia
SOFSMS Somaliland
SAMSA South Africa
IFMSA-SA
IFMSA-Spain
MedSIN Sudan
IFMSA-Sweden
Swimsa Switzerland
SMSA-Syria
FMS-Taiwan
TJMSA Tajikistan
IFMSA-Thailand
AEMP-Togo
TTMSA Trinidad and Tobago
Associa-Med Tunisia
TurkMSIC Turkey
FUMSA Uganda
UMSA Ukraine
SFGH UK
TAMSA Tanzania
AMSA US
UzMSA Uzbekistan
FEVESEOCM Venezuela
NAMS Yemen
ZIMSA Zimbabwe

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