

JUNIOR DOCTORS NETWORK

Newsletter

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30th CMAAO Meeting Yangon, Myanmar, 2015

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Editorial



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The WMA JDN continues to grow and becomes the leading voice for young doctors globally. There is also emerging of local junior doctor organization in each continent.

This issue include -
Ahmet Murt, MD makes chair address.
- Michael van Niekerk introduces The Junior Doctors Association of South Africa.
- Wunna Tun reports on CMAAO meeting in his home town

. - Konstantinos Louis and Konstantinos Roditis discuss about modern odyssey: a refugee crisis tale
- Fehim Esen and Ahmet Murt share about the IFMSA GA meeting in Antalya, Turkey.

I am sure you will enjoy the stories in this issue .



Written by Dr. Ahmet Murt
Chair , WMA
JDN

There have been many challenges that the junior doctors traditionally face. Many of them are inter-linked with the changes in today's healthcare service. Increasing number of patients seeking acute care as well as the mission of offering more intensed follow-up to the chronic conditions make the healthcare deivery more demanding today. This has direct negative consequences for the working conditions of junior doctors who in many countries of the world make up the major health work force. In addition to this workload, there is claimed to be a shortage of physicians and other healthcare staff. As a result; junior doctors are also assigned some other tasks

which are not directly related to their job or education. It shouldn't be surprising for you, if I claim that the work done by junior doctors are neither paid proportionally nor compensated relevantly. This is also the fact for almost all healthcare staff. Although the demand from the healthcare staff is increasing each day, the resources are still kept limited and those limited resources are being allocated for expenses other than healthcare staff salaries. Most interestingly, while the system demands for more medical graduates, employment of physicians are kept disproportionally low. These have brought big pressure on the shoulders of physicians as well as newly graduated young generation.

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While the medical profession is not given its natural right to self-govern or at least self-regulate, what physicians can do to save the healthcare is generally thought to be limited. When there is an unintended outcome, the politicians are unfairly targeting the physicians instead of confessing the pitfalls of the system they impose on medical profession.

National medical associations and other medical professional associations are trying to influence the law-makers and authorities for better planned healthcare service which is a pre-requisite for healthy future. Joint action of medical associations regionally and globally make our profession seem more powerful and we are very happy to see some small but quite important changes that are implemented both by global community and national governments upon the request of the World Medical Association.

Junior doctors, as a group of medical professionals trying to progress in their careers, are in need of coordinated education and training as well as an effective mentorship. Although they form the major health workforce in many countries, provision of healthcare by this group shouldn't be in expense of offering them quality education opportunities.

Junior Doctors Network has been in the service of junior doctors across the globe by providing nation-wide or regional collaborations. On behalf of my team I would like to once more emphasize the dedication of Junior Doctors Network to support all junior doctors wherever and in what need they are.

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Join the group of

Junior Doctor Network of

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White Paper

Social media and medical professionalism

Relevant Junior Doctor Policy

Ethical Implications of Collective Action by Physicians

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Doctors' health and wellbeing

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Quality in postgraduate medical education and training

Diagramação

Logo - Suport

AMB - Associação Médica Brasileira

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The Junior Doctors Association of South Africa

Written by: Dr Michael van Niekerk JUDASA National Secretary General



South Africa - a rainbow nation built from a deep history and boasting with diversity, with no exception to its healthcare system. JUDASA - representing the junior doctors of South Africa has the unique privilege of standing with doctors and patients in addressing the continuous challenges faced by so many South Africans in the public healthcare system. Formed by a group of interns in 1992 it is has been instrumental in providing a platform for junior doctors to voice their opinions, concerns and provided a seat at the bargaining table. With South Africa's vastly diverse nation, which showcases in the public healthcare system it is at the order of the day for a doctor to see and treat patients speaking different languages (with South Africa's eleven official languages), see patients from different cultures, dealing with traditional healers and practices and not to forget the colossal disparity between the wealthy and poor and its complications.

As with any healthcare system across the globe each country encompasses unique problems but also in some aspects the same for instance overtime hours, wages, adequate training and so forth, which is also the case in South Africa. Our diverse country however, also poses various problems not so prevalent in developed countries such as a massive HIV positive



population with the infection of patients with Tuberculosis and now Multi-Drug Resistant Tuberculosis increasing dramatically. This poses another dilemma to those representing junior doctors in South Africa which is occupational safety where more and more documented cases of health care professionals being infected by TB and even MDR-TB are documented. Reform and transformation within medical education and training is another issue that is currently receiving attention, intended to positively impact the profession in terms of the quality and accessibility of healthcare in South Africa.

Within all these issues it is of utmost importance for organisations like JUDASA and the South African Medical Association to form a collective response and stance with regards to the vision for healthcare in South Africa and to refrain from easily becoming bureaucratic institutions that adopt values within the status quo to maintain stability. JUDASA aims to be progressive, dynamic and flexible to adapt and react to the challenges and obstacles faced by so many junior doctors in South Africa. It will continue to work to affect change, build a legacy within the healthcare system and aim to sustain future relevance.

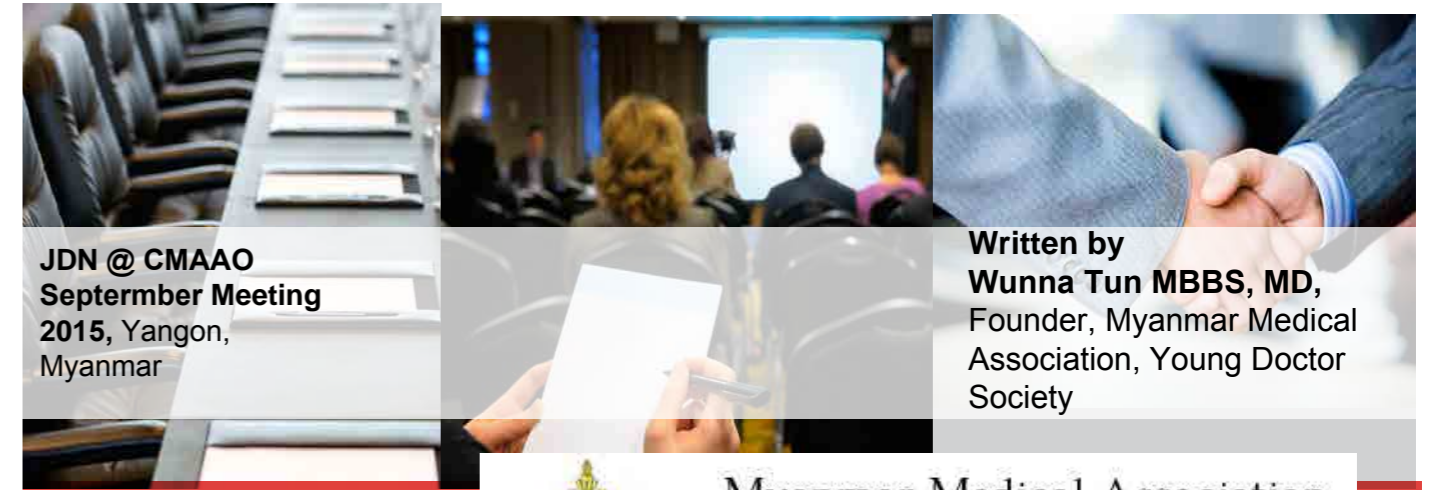
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CMAAO Meeting September 2015, Yangon, Myanmar



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JDN @ CMAAO
September Meeting
2015, Yangon,
Myanmar

Written by
Wunna Tun MBBS, MD,
Founder, Myanmar Medical
Association, Young Doctor
Society



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Young Doctor Society

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The 30th CMAAO General Assembly and 51st Council Meeting hosted by Myanmar Medical Association were conducted at Chatrium Hotel, Yangon, The Republic of Union of Myanmar from 23rd to 25th September 2015. The opening ceremony was started at 1:00 PM local time on 23rd September 2015 and chaired by Dr. Dong Chun Shin. Secretary General of CMAAO, Dr. Masami Ishii made roll call. Then, Prof. Rai Mra delivered the welcoming address and Dr. Jose Ase Sabili, President of CMAAO also gave the presidential speech. After that, Dr. Ardis Hoven, Chair of the Council of the World Medical Association (WMA) addressed the speech. Congratulations remark by WMA General Secretary, Dr. Otmar Kloiber was followed. The meeting installed the 33rd President of CMAAO for 2015-2016, to Prof. Rai Mra, President of Myanmar Medical Association. There were 70 delegates representing from 15 National Medical Association from Asia and Oceania Region.

the second day of CMAAO meeting was continued with the thirteen Taro Takemi memorial Oration. This program was chaired by Dr. Yoshitake YOKOKURA, President of Japan Medical Association and the presenter was Prof. Pe Thet Khin, immediate past Minister of Health of Myanmar. Prof. Pe Thet Khin presented the Memorial Oration on "Ensuring Food Safety: Safer food for a safer world". Then, the president of JMA presented a plaque to Orator. After the coffee break, the symposium "Ensure Food Safety: An important challenge today" was continued. This session was chaired by Dr. Dong Chun Shin and the representatives of attending conference presented and discussed reports on food safety for aiming a safer world.

Then, all the attending national medical associations reported their progresses with their country reports. Dr. Otmar visited the Myanmar Medical Association and welcomed by Dr. Wunna and met with office staff of MMA. There are 3 Junior Doctor Network member of World Medical Association attended the meeting. Dr. Eugene Macalinga from Philippines Medical Association, Dr. Kazuhiro from Japan Medical Association and Dr. Wunna Tun from Myanmar Medical Association attended the meeting. JDN members met with local member of Myanmar Medical Association, Young Doctor Society. There is also an separate JDN meeting during the Conference discussed about cooperation and collaboration with Asia Pacific Junior Doctors and future of junior doctor in CMAAO meeting.

A modern odyssey: a refugee crisis tale

Written by: Konstantinos Louis, MD, PhD, resident in Obstetrics/Gynaecology and Konstantinos Roditis, MD, MSc, resident in Vascular Surgery, JDN-Hellas

Mrs Nigat came one day last summer to the Obstetrics/Gynaecology outpatient clinic of our hospital seeking free medical advice, offered to refugees through the Greek Social Security Service.

Her story startled us, a true modern odyssey, alas without the poetics and lyrism of Homer's epics, a harsh, painful story filled with adventurism and the cruelty of cowards, of men without any signs of humanity.

Her town was situated at the Syrian borders with Turkey, she was driven out from home as staying there proved impossible due to hostilities in the area, she and her husband along with their two little daughters soon found themselves in detention camps close to the Turkish border, after having sold their property for crumbs to usurers and after having escaped from the hands of jihadists who would sell them as slaves or kill the men and rape the women and girls only to sell them later - like what was happening at the camp they visited next - as harem slavegirls to rich westerners or Arabs...

They had agreed with slavers from Turkey all the details for their journey of hope to Europe.

Two were their escape routes; either through Greece after walking all the way to Izmir and crossing the Aegean that would cost them 10000 € each, and then walking again to cross the Balkans in order to finally reach Sweden, their final destination - or so they were told - or through the Eastern Balkan route after walking all the way to Istanbul and then to Germany using falsified travel documents provided by the traffickers, where they would apply for asylum. That option would cost them 40000 € each, an amount of money they could never afford.



Given that reason, one calm warm summer evening, they were led aboard a rubberboat that sailed in the Aegean Sea... Only to find themselves struggling with the waves, after their traffickers sank the boat intentionally and vanished fast with a jetty... They were saved hours later by local people and tourists, almost midday, when they stepped upon a far-away coast of the island of Samos in Greece... After a long, tiring walk, they reached the local school, wearing just their underwear, having lost all their belongings in the sea...



“ a true modern odyssey, alas without the poetics and lyrism of Homer's epics,”

Save the date! Upcoming meetings in 2015-2016

- October 12th - 13th, 2015: WMA JDN

Meeting, Moscow, Russia

- April 27th, 2016: JDN meeting

Buenos Aires, Argentina

- May 21st – 22nd, 2016 : JDN Meeting

Ferney, France

The absence of organized State services was obvious from the first moment, as only soldiers brought them food and water every day, followed by local families and sensitized tourists who offered them clothes, shoes and other amenities, all on their expense, while at the same time they gave them courage and psychological support, which of course they needed badly, after having suffered much all the way, people unrooted from their homes, their homeland, homeless and hopeless in a foreign land, among foreigners...

Months later and after many miles of red tape, they were piled up in a ferry that brought them to the port of Piraeus, and then were guided to downtown Athens only to be put together with thousands of other refugees at the Champs de Mars Park (Pedion tou Areos) waiting to leave Greece and travel to Germany, hopefully one day...

That is where and when a social solidarity NGO staff found her and after examining her, sent her to our outpatient clinic for further consultation as she suffered from chronic pelvic pain for some time now...

And her odyssey still goes on...

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WMA/JDN Meeting at IFMSA GA in Antalya

Dr. Fehim Esen, Secretary General, Turkish Young Doctors Association
Dr. Ahmet Murt, Chair, JDN

WMA/JDN organized a meeting in Antalya entitled “JDN: Opportunities, Projects and Initiatives) at the same venue with IFMSA March Meeting in Antalya, allowing access of IFMSA members/alumni to the event. Eighteen participants from 6 countries attended the meeting. Dr. Ahmet Murt, JDN chair explained the roles of junior doctors in today’s medical profession. Dr. Thorsten Hornung, past JDN chair presented the foundation and development of JDN. Dr. Fehim Esen, secretary general of Turkish Young Doctors Platform shared their experience with regional collaborations and regional meetings in JDN. After being informed on the current situation of junior doctors and the role of JDN, Dr. Jonathan Schütze, IFMSA alumni director, explained the overlapping projects of IFMSA and discussed possible collaboration opportunities. After understanding the roles of the organizations, the participants discussed specific junior doctor issues in their countries and came up with some common suggestions to improve the conditions of junior doctors. Some of the important issues are listed below:

- The work at teaching hospitals, which are not directly related to education, should not be left to doctors in training.
- The junior doctors who are at the phase of their postgraduate education should not face the consequences of just being an employee, their needs as trainees should be respected.
- Workplace learning is an effective way of learning during postgraduate phase. The workload and training/education requirements of junior doctors should be planned in a balance.
- The roles of supervisors during postgraduate education are quite important. National or regional organizations that are working for education should encourage development of effective and constructive supervising skills. Peer-to-peer interactions should also be supported.
- The work done and responsibilities taken by junior doctors should not be underestimated. It should be structured and paid.
- JDs deserve a positive working environment with relevant number of mentors who have relevant qualifications.

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- Lack of or improper planning of employment, imbalance of generalists/specialists in some countries and regions puts the future of our profession in risk.
- Junior doctors should be consulted while plans of workforce are being done.
- Globalization of medicine (e.g. standardization of education, international placements of healthcare workers etc.) and its consequences (e.g. brain drain etc.) are suggested to be in the agenda of junior doctors.
- JDs should be accepted to postgraduate posts according to a fair selection processes.
- JDs should receive enough salaries for their living costs. Examples from some countries where junior doctors have to pay for postgraduate education while they are also serving as a part of health work force are unacceptable.

- Violence against doctors, independent of background reasons is unacceptable
- The regional partnerships and collaboration of junior doctors should be supported by the JDN.
- Wellbeing and health of JDs should be protected by the authorities. Every single junior doctor deserves corruption and violence free learning and working environments.



junior doctors deserve a positive working environment with relevant number of mentors

