

JUNIOR DOCTORS NETWORK

Newsletter

The World Medical Association, Inc.
L'association Médicale Mondiale, Inc.
Asociación Médica Mundial, Inc.



Junior Doctors Network, Next meetings

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Photo by Eugene Nikiforov

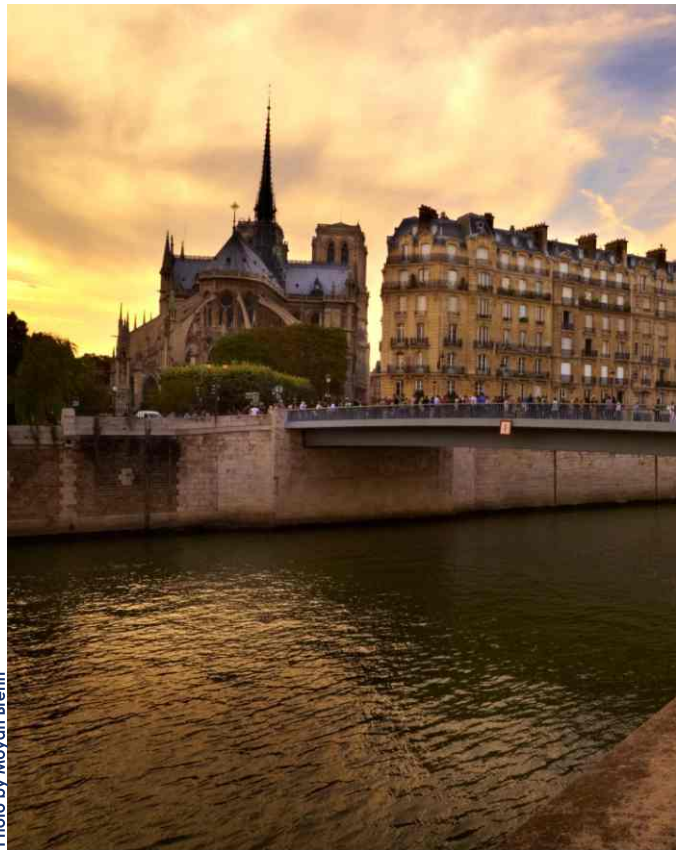


Photo by Moyan Brenn

JAPAN

197th WMA Council Session
Sunday, 27th of April 2014

FRANCE

World Health Assembly
19th to 24th May 2014

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Editorial

Written by Dr. Wunna Tun - Communication Director



It gives me great pleasure to present the fourth issue of the World Medical Association Junior Doctors' Network (JDN) Newsletter.

In this issue, our JDN chair Nivio discusses the benefits of participating in JDN and highlights our current project on wellbeing.

Ahmet Murt presents an interview with the immediate past-president of the European Union of Medical Specialists.

Pelin Yargic presents a new regulation in Turkey which threatens young doctors providing emergency care to protestors, with imprisonment.

Partick Ezie reports on the National Games for Doctors in Nigeria campaign which encourages groups to "let doctors play". Aimed at improving physician wellbeing in the workplace, this initiative arose from the unveiling of the JDN policy paper on physician wellbeing presented in Fortaleza in October 2013.

To round things off, Roy from Taiwan describes the participation of young doctors in the 2013 Global Health Forum, while Kostas Roditis recounts the JDN's presentation at a social media conference in Naples and also describes the ongoing struggle by Greek resident physicians in Athens.

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

Written by Dr. Nivio Moreira - JDN Chair



The World Medical Association Junior Doctors' Network (WMA JDN) has carried out many activities in recent months; we are developing projects in areas ranging from medical education to leadership and social media medical tools. The JDN has also been pursuing a number of online activities,

social media presence and hosting several informative web-conferences. These efforts support our attendance and representation of young doctors at key meetings around the world.

One of our most exciting initiatives right now is the Physician Well-Being Project, elements of which were proposed as part of a WMA policy statement at the recent meeting in Fortaleza, Brazil. We have been working on this project over the last two years. Our aim is to provide an informed review that helps encourage discussion and analysis of wellness issues facing physicians during residency training and beyond.

Our monthly teleconferences provide an opportunity for our members – now located in over 40 countries – to exchange experiences, share information on issues (particularly around postgraduate medical education), and develop action plans as part of an organized network.

The JDN is continuing to expand its activities by bringing the issues of young doctors and junior physicians to various meetings around the world. By participating in these meetings, we provide our input into various aspects of policy and programming that influence medical training globally, and then bring this information back to our growing network of JDN members. Our work in representing the young physicians of this world continues. We welcome your help and input in promoting key matters of concern in your country. Thank you for being a part of the JDN.

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Contact: chair.jdn@wma.net

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Interview: Working conditions of young doctors; Prof. Zlatko FRAS, M. D. Ph. D.

By Dr. Ahmet Murt Secretary, JDN, WMA



Dr. Ahmet Murt Secretary JDN

The Turkish Young Doctors' Platform attended the European Junior Doctors forum on working conditions in March 2014, hosted by the Slovenian Junior Doctors Association. In a keynote speech at the forum, UEMS (Union Européenne des Médecins Spécialistes - European Union of Medical Specialists) Immediate Past President Prof. Zlatko FRAS highlighted the unemployment among junior doctors in his home country of Slovenia, and shared his views on postgraduate medical education in this exclusive interview with our group. Note: Prof. FRAS is the president of Slovenian Cardiology Association and is one of the pioneers of Slovenian Medical Chamber in the field of Speciality Education.

Q1: A few years ago, Slovenia was facing a shortage of qualified physician, but today there are unemployed junior physicians. Which scenario is true? What role has human resources planning played in these trends?

Prof. FRAS: Actually, both of them are true. We still need more doctors and we have those unemployed. There were 2.4 physicians per 1,000 inhabitants and projections showed that we would have 3.2 per 1,000 by the year 2020. Everything was going smoothly until the global economic crisis in 2008. The government decided to decrease the number of employed people in each profession by 1% each year. As the state is the main employer of doctors, we now have unemployed doctors, even though we need them. There are 450 unemployed physicians in Slovenia now and the government will employ 226 of them next April. I am unhappy especially for young doctors who are unemployed. If I had the authority I would immediately employ all of them. Investing in young people is investing in the economy.

Q2: We know that; medical chamber in Slovenia is very privileged. They oversee residency education; medical curriculum, the length of training, and available posts. That considered, who do you think should hold the main responsibility to deliver healthcare?

Prof. FRAS: I am an absolute supporter of autonomy and professional self-regulation. But a shared responsibility should be constructed. We should be using resources with the principle of equity. We can't withhold treatments from our patients, but using whatever we prefer instead of considering cost effectiveness is not the best option. Politicians especially should ensure the public understand that everything may not be available for everyone at all times. That said, education and postgraduate education should be remain autonomously managed by our profession. Physicians, should be responsible for determining the competencies of future physicians.

Q3: How about health human resources? Who should be responsible for that?

Prof. FRAS: The ministries are responsible for the functioning of healthcare systems. And we (physicians) are responsible for developing specialties and for assuring academic continuity. It is completely natural for politicians to prioritize public needs. But they should also respect our autonomy in shaping the future of profession. Improved standards of care are ultimately in the public's best interest.

Q4: We know that you have visited Turkey many times. As the former president of UEMS you had the chance to learn about Turkey's health system and specialisation education. Do you have any recommendations for Turkish Young Doctors?

Prof. FRAS: Frankly speaking, it is very difficult for me to comment about Turkey. Even Slovenia, as a small country of 2 million people is facing many differences among subgroups.

I can't imagine how much more magnified such differences are in Turkey which is a huge country both in means of geographic diversity and population intensity. That is why we (physicians) should not be blinded by one type of ideology. For example, for many years in Slovenia, the routine of communism made us look at the world with a narrow perspective. The dynamism of life dictates that we (physicians) should adapt to the change. Medical chambers, physician associations and professional bodies should not act only as trade unions. The priorities in our profession are patient safety and quality of care. If we can develop these two concepts, our rights and privileges as physicians will directly be included.

Unpaid Greek junior doctors fight for their rights and wellbeing

Written by Dr. Kostas Roditis, MD Resident in Vascular Surgery Athens, Greece

Greece is still struggling to overcome its financial crisis and Greek physicians working in the public sector have been heavily affected by extreme austerity measures put in place to guard against fiscal collapse. Monthly salaries have been reduced by more than 25% over three years, and various family and supportive bonuses have been abolished.

Nowhere has this crisis been felt more acutely than among Greek residents and junior doctors, who now have monthly salaries of 900 to 1100 Euro and have experienced 3-6 month delays payments for 24-hour shifts.

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Most recently, some university hospitals have seen delays exceeding six months, and these residents have even learned that some of these owed funds will be withheld further due to insufficient hospital revenues arising from the government. Hospital administrators at Attikon University Hospital in Athens suggested that residents accept the lower amount, but falsify shift-schedules to fight for the remainder of the amount owing. Outraged, residents there initiated a collective work action, stopping all clinical services provided by residents to demand that the hospital administration immediately pay all monies owed to them.

At press time, this work action continues to disrupt activities at Attikon Hospital. Department heads and hospital administrators have often resorted to blackmail and pressure tactics to bring an end to the disruption, but the residents remain hopeful that they will ultimately get fairly paid for their work. Similar actions in other hospitals in Greece have led to outcomes in favour of the junior physicians.

Recent developments like this disruption at Attikon Hospital have highlighted the need for Greek Junior Doctors to understand the importance of defending working rights and personal wellbeing in

the midst of the widespread impact of the Greek financial crisis. Work satisfaction is seen as essential to enabling junior doctors to provide the best possible treatment to their patients while ensuring that Greek physicians are the best trained in the world. The support of JDN colleagues from all over the world is thus a great strength in the fight for junior doctors well-being and rights in Greece.

For more info, please visit:

<http://greece.greekreporter.com/2013/10/07/miserable-conditions-at-attikon-hospital/>

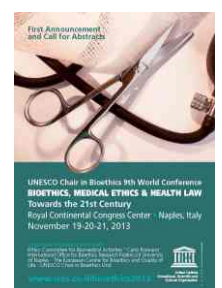
UNESCO Chair on Bioethics 9th World Conference on Bioethics, Medical Ethics and Health Law, Naples, Italy. JDN was there!

Written by Dr. Kostas Roditis, MD, Msc Resident in General Surgery, Athens, Greece. Publications Officer 2012-2013, JDN-WMA.

Last November, I visited Naples to represent the JDN at the 9th World Conference on Bioethics, Medical Ethics and Health Law, organized by the UNESCO Chair in Bioethics. This important conference saw me give a presentation entitled "Social Media and Medicine: legal and ethical implications", based on recent WMA JDN policy paper on Social Media. Classified as a medical ethics section, we had nearly 30 delegates in attendance.

A short presentation about JDN and its mission preceded the main presentation about Social Media, which provided a quick insight into what JDN stands for and its role within the WMA. My presentation was followed by a Q&A session, which revealed the participants' great interest in the general subject of Social Media, as well as its ethical implications on health workers and health care provision.

Of course, there were also some rather critical remarks, focusing on the impact social media has on the population when it comes to provision of information on illnesses and their management. One commentator noted that "...social media providers seem to have taken the lead in providing information towards patients and the general public, and the medical community seems to be on the run to catch up with them..." Overall, this successful presentation was an excellent venue to demonstrated the great work done by JDN in this area. Future conferences could serve in a similar way to disseminate the work and views of the WMA JDN.



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Youth Perspective on Health in All Policies — 2013 Global Health Forum, Taipei, Taiwan

Written by Dr. Jen-Hsiang Roy Shen, Yin-Shuo Eugene Chang, Shun-Chun Richard Lo



Participants from all around the world formed fruitful discussions and consensus for future co-operation. Friendship and mutual understanding were also built.

Taiwan has held an annual Global Forum for Health Leaders since 2006, attracting more than 3000 senior health officials from 88 countries. Well regarded in the international health community, the theme of the 2013 Global Health Forum in Taiwan is Health-in-All-Policies, echoing the World Health Organization's call: that a well-rounded and successful health policy needs participation and efforts from all sectors and the government.

The meeting also acknowledges that all policies made by different sectors have impact on people's health directly and indirectly, but that each sector has an important role in achieving National Development Goals.

Highlights of the conference included the Pre-Conference Symposium on Cancer on Cancer Control & Prevention, where professors from United States and United Kingdom provided an overview of the global cancer epidemic and health's response, particularly around the opportunity cost of cancer care and cancer screening strategies. Obesity and tobacco control were other major topics addressed in the forum.

The main conference was filled with more exciting discussions; Dr. Michael Sparks, president of International Union for Health Promotion and Education, explored the essence of the WHO framework, which facilitates supranational level decision-making and governance in health. Dr. Canice Nolan, Deputy Head of Strategy and International Health System and Products for DG SANCO, shared the European experience on collective views and efforts around health, while Dr. Jessica Allen, Deputy Director of the Institute of Health Equity, UCL, provided a detail interpretation of UK's experience around health inequities, accountability, and personal responsibility.

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The 2013 Global Health Forum in Taiwan allowed us to strengthen our ties, friendship and cooperation in developing the "Taipei Declaration", a consensus signed by the engaged participants from all around the globe.

For the young doctors present, it was fascinating to learn that in order to achieve Health in All Policies, no government or professional body can fulfill this goal alone.

International collaboration and co-operation between professionals is critical.



Young generation in the Organizing Committee: (From left to right) Dr. Han-Wei Jerry Lin, DDS, Dr. Shun-Chun Richard Lo, MD, Dr. Jen-Hsiang Roy Shen, MD, (WMA-JDN-Member), Dr. Yu-Tsung Ray Wu, DDS, Dr. Chih-Huang Andy Hsieh, DDS, Dr. Yin-Shuo Eugene Chang, MD.



Meeting with WMA Secretary-General: From left to right: Dr. Jen-Hsiang Roy Shen (Physician), Issac Chu (Medical student), Kyle Cheng (Medical student), Dr. Otmar Kloiber (WMA Secretary General), Dr. Yung-Tung Wu (Past-President TMA), Dr. Yin-Shuo Eugene Chang (Physician) in a similar way to disseminate the work and views of the WMA JDN.

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The framework of the World Medical Association, for example, allows its member associations to communicate freely, and co-operate actively, to achieve consensus on high standards of medical ethics and professional competence.

International professional societies like the WMA are able to provide a more global picture and vision. While national contexts may differ, there are opportunities to work on similar issues, such as the clear divide in life expectancy among different groups by income or social status that exist in every country.

Junior doctors from Taiwan were thus challenged to impact change both directly in treating or educating our patients, and indirectly, through advocating for policies that impact health. They also have a role in spreading these ideas to younger generations of professionals in the IFMSA (The International Federation of Medical Students' Associations), AIESEC (International Association of Students in Economic and Commercial Sciences), AEGEE (European Students' Forum) and APHA (American Public Health Association). Junior Doctors have renewed their commitment to support work towards "Health in All Places!"

New regulation in Turkey criminalizes "independent medical care"

Written by Dr. Pelin Yargıç Turkish Medical Association, Council Member

Turkish protests in June 2013 saw nearly a million anti-government protestors on the street attacked by police. Five civilians died and thousands were injured.

In the midst of the crisis, young doctors and medical students from all over the country took action and gave voluntary medical care to protestors who were unable or unwilling to attend a state-run hospital.

Street protests lasted for nearly 1.5 months. In the midst of the crisis, many state hospitals cooperated with the police in turning over protestors. Such actions led to the passing of new regulations in November 2013 around the provision of emergency medical care:

"All practices and procedures related to the delivery of health services shall be under the scrutiny of the Ministry of Health. With the exception of health services in emergency situations by authorized and competent persons until the arrival of formal health services, those who deliver or commission others to deliver health services without proper license shall be subject to imprisonment from one to three years and administrative fine equivalent to that of twenty thousand days.

The new regulation was swiftly condemned by physician bodies around the world. The

World Medical Association, Physicians for Human Rights, United Nations Human Rights Office, German Medical Association, the Standing Committee of European Doctors, and the British Medical Association sent letters of protest to the Turkish President asking for repeal. A joint statement by these groups asserted: "International standards in human rights and medical ethics make it clear that doctors, nurses, paramedics, and other health workers must be able to carry out their professional responsibilities to provide emergency medical care to those in need without interference or fear of reprisal.

The Ministry of Health and the Turkish government have a duty to support and protect health workers who are discharging their moral, ethical, and professional responsibilities to provide care for the sick and injured. Article 33 of the draft health law is not only inconsistent with international standards of medical ethics, but is also inconsistent with Articles 97 and 98 of the Turkish Penal Code, which makes it a crime for medical personnel to neglect their duty of providing emergency medical care to those in need." Despite protests, the new regulation has passed into law, and Turkish medical students and young doctors who continue to serve their patients ethically do so under the threat of imprisonment. Young doctors and medical students from Turkey are grateful for junior doctors' solidarity from all over the globe.



Dolmabahçe Bezm-i Alem Mosque, İstanbul turned into a voluntary clinic during the riot in July

The Nigerian Medical Association National Sports Week, and the Improvement of Doctors wellbeing

Written by Dr. Ezie Patrick M.D Business Editor Nigerian Medical Association



The Nigerian Medical Association (NMA) has made well-being a focus, under the Leadership of Dr Osahon Enabulele. As part of Dr. Enabulele's Presidential Election campaign, he came up with the concept of the NMA Sports week, "Perhaps one of the reasons for the rising spate of deaths and ill health amongst doctors in Nigeria could be in our ability to dedicate some valuable time for physical exercise, relaxation, and socialization on a regular basis, to serve as a stimulus for regular exercise amongst our members and to enhance the socialization, medical fitness and life expectancy of doctors in Nigeria." This led to the establishment of an NMA Sports week, with associated instituted with prizes and trophies awarded to competing doctors and FCT/State Branches of NMA.

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This vision of an NMA National sports week was instituted alongside the presentation of the WMA JDN Wellbeing Policy presented in Fortaleza, Brazil in 2013, and provided a way for doctors to improve their wellbeing through self-engagement in exercise and physical activity.

The first NMA games held at Akwa Ibom State in February 2014 saw doctors from across the country participating in Soccer, Basketball, Lawn Tennis, Table Tennis, Badminton, Track and Field, Chess, Draughts and Scrabble.

The unique occasion was pleased to welcome Dr Onyebuchi Chukwu, the Minister for Health and Dr Idris Omede, the Commissioner for Health for Kogi State,

The games were contested according to the 6 regions in NMA equivalent to the 6 geographical regions in Nigeria. The South South, The South East, the North Central, The North West, North East and North West regions . The games concluded with the South South Doctors winning First place with a total of 22 medals; 10 Gold, 5 Silver, and 7 Bronze.

In conclusion, the NMA games represents a unique program for improving the wellbeing of Doctors globally and forms a keen yet subtle strategy to reducing mortality amongst doctors, encourage well-being, and help community building and socialization.



Save the date! Upcoming meetings in 2014-2015

- May 9 - 10, 2014: EJD Spring Meeting 2014 in Hajdúszoboszló, Hungary
- May 17 - 18, 2014: JDN Working Meeting in WMA, France
- August 5 - 11 2014: IFMSA Alumni Meeting Taiwan
- October 6 - 7 , 2014 (tentative) :WMA Junior Doctors Network Meeting Durban, Africa
- April 15 , 2015 (tentative): WMA Junior Doctors Network Meeting Oslo, Norway

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NOW Accepting

Submissions for our next Issue!

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White Paper

Social media and medical professionalism

Relevant Junior Doctor Policy

Ethical Implications of Collective Action by Physicians

Current projects

Doctors' health and wellbeing

Global health training and its ethical implications

Quality in postgraduate

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