



**WMA**

**WORLD MEDICAL ASSOCIATION**

# **ANNUAL REPORT 2025**



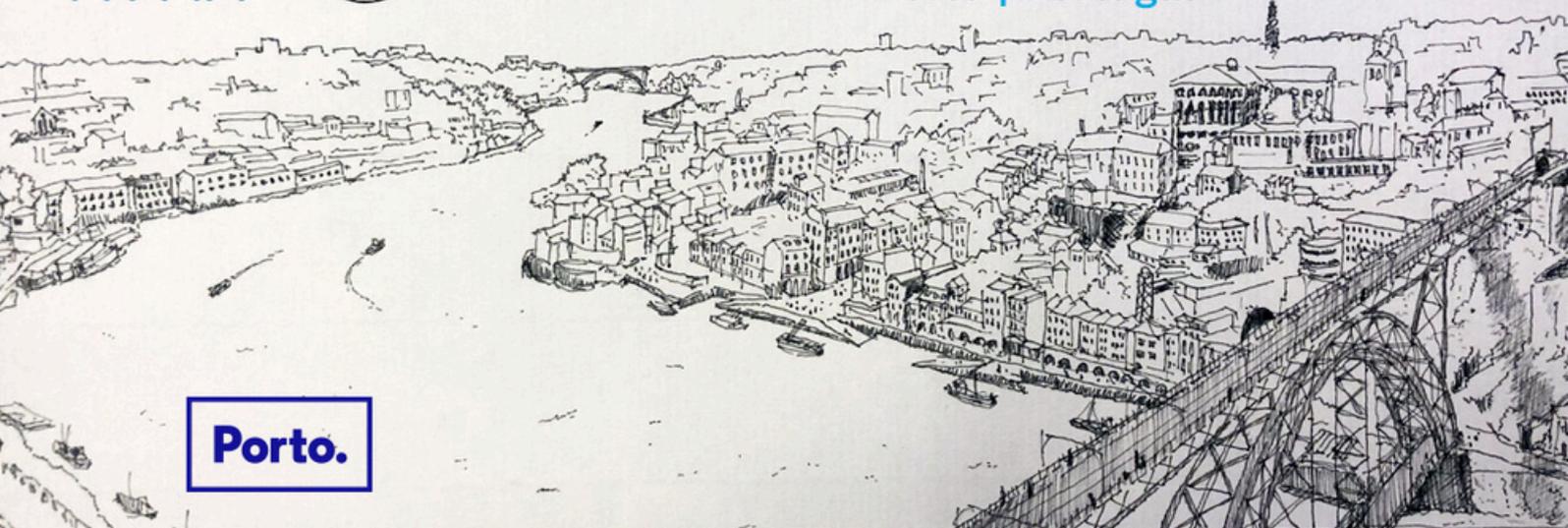
**ORDEM  
DOS MÉDICOS**

**WMA General Assembly**

**8-11 October 2025**

**Porto | Portugal**

**Porto.**





**DR ASHOK PHILIP, WMA PRESIDENT (2024-2025) SPOKE AT THE 22ND VIENNA CONGRESS 2025 - "EUROPE OF TOMORROW: SETTING DIRECTIONS " ON THE IMPORTANCE OF ADAPTING TO CHANGE WHILE UPHOLDING CORE VALUES.**



**DR OTMAR KLOIBER, WMA SECRETARY GENERAL, MET WITH DEPUTY MINISTER, MINISTRY OF HEALTH AND WELFARE OF TAIWAN, LIN CHING-YI M.D., PH.D, TO DISCUSS COOPERATIVE EFFORTS TO ADVANCE GLOBAL HEALTH.**



**A DELEGATION OF WMA JUNIOR DOCTORS ADVOCATED FOR GLOBAL HEALTH AT THE 156TH WORLD HEALTH ORGANISATION (WHO) EXECUTIVE BOARD MEETING.**



**AT THE WMA COUNCIL MEETING IN MONTEVIDEO, THE WMA JDN REFLECTED ON ITS FOUNDING TOGETHER WITH THE LEADERS OF THE WORLD MEDICAL ASSOCIATION.**



**AT THE WMA COUNCIL MEETING IN MONTEVIDEO, DR JACK RESNECK JR (AMERICAN MEDICAL ASSOCIATION) WAS ELECTED AS CHAIR OF THE WMA COUNCIL.**



**DR ASHOK PHILIP, WMA PRESIDENT (2024-2025) WAS A PANELIST AT THE WHA78 SIDE EVENT: BUILDING MOMENTUM: ACCELERATING ACTION ON THE GLOBAL HEALTH AND CARE WORKFORCE.**



**A NEW MOU WAS SIGNED BETWEEN THE WORLD VETERINARY ASSOCIATION (WVA) AND WMA ON 18 JULY 2025.**

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# MESSAGE FROM THE WMA PRESIDENT

As we reflect on 2025, we are reminded that the strength of the World Medical Association lies not only in its longevity but in its continued relevance to physicians and patients in a rapidly changing world.

A defining milestone this year was the successful adoption of several new and updated WMA policies at the Porto General Assembly. Central among these achievements was the ongoing revision of the Declaration of Taipei, demonstrating our commitment to protecting health data, biobanks and digital-health practices in an era of accelerating technological innovation. This process has been inclusive, rigorous and forward-looking, ensuring that the Declaration remains fit for purpose while grounded in respect for autonomy, privacy and trust.

These accomplishments were possible thanks to the dedication of our Council, Standing Committees, Workgroups, Constituent Members and countless experts who contributed their expertise.

In 2025, the WMA also strengthened its engagement at COP30 in Belém. Yet again, we observed that health remains insufficiently prioritised within global climate negotiations, despite overwhelming evidence that climate change represents one of the greatest threats to human health in this century. The WMA continues to advocate for placing health at the heart of climate action—both as a practical necessity and a moral imperative.

This year has also been marked by profound humanitarian suffering. Ongoing conflicts across multiple regions continue to devastate civilians, health systems and healthcare workers. The WMA has consistently spoken out through statements reaffirming medical neutrality, calling for the protection of healthcare personnel, and urging the safeguarding of health facilities. These are not abstract principles—they are life-saving obligations under international humanitarian law.

At the core of all our efforts lies a shared conviction: physicians must remain engaged beyond the clinical encounter. Our responsibilities extend into advocacy, ethics, policy debates and global leadership. Engagement is not an additional burden but an inherent part of our professional duty.

As we look ahead, 2026 will mark an important transition with the upcoming change of Secretary General. I wish to acknowledge the immense contributions of our outgoing Secretary General, whose leadership and institutional memory have strengthened the WMA during a period of global uncertainty.

Though challenges remain complex, our collective resolve is strong. Guided by ethics, solidarity and compassion, the WMA will continue to stand for physicians, patients and the fundamental right to health for all.



**Dr Jacqueline Kitulu**

President of the World Medical Association

## Policies adopted at the General Assembly 2025 - Porto

The General Assembly adopted new policies as well as policy revisions, reflecting the latest consensus views of our profession. These are listed below (available as well on [WMA website](#)):

- [WMA Statement on Aesthetic Treatment](#) (revised)
- [WMA Statement on Ageing](#) (revised)
- [WMA Statement on Artificial and Augmented Intelligence in Medical Care](#)
- [WMA Statement on Conflict of Interest](#) (revised)
- [WMA Statement on Dementia](#)
- [WMA Statement on Ethical Considerations in Global Clinical Electives](#) (revised)
- [WMA Statement on Ethical Guidelines for the International Migration of Physicians](#) (revised)
- [WMA Statement on Nuclear Weapons](#) (revised)
- [WMA Statement on Obesity](#)
- [WMA Statement on Physician Mental Health Care](#)
- [WMA Statement on Physicians Well-Being](#) (revised)
- [WMA Statement on Providing Health Support to Children in Street Situations](#) (revised)
- [WMA Statement on Scope of Practice, Task Sharing and Task Shifting](#) (revised)
- [WMA Statement on the Protection of Reproductive Health Rights of Women and Girls](#)
- [WMA Statement on Trans People](#) (revised)
- [WMA Resolution Calling on the Israeli Government to Comply with the Geneva Conventions and Other Applicable Instruments of Humanitarian Law](#)
- [WMA Resolution on Ageing Physicians](#)
- [WMA Resolution on Health Workforce at the World Health Organisation \(WHO\)](#)
- [WMA Resolution on Public Health Funding Worldwide](#)
- [WMA Resolution on the Role of Physician Associates and Other Non-Physician Providers in the United Kingdom and Other Countries](#)
- [WMA Resolution on the Use of Riot Control Agents and Human Rights Violations against Protesters in Turkey](#) (revised)
- [WMA Resolution to Uphold the Ethical Framework of Healthcare](#)

## Policies reaffirmed by the 229th Council Session, Montevideo, April 2025 and the 230th Council Session, Porto, October 2025

- [WMA Statement on Injury Control](#) (with minor revision)
- [WMA Resolution on Abuse of Psychiatry](#) (with minor revision)
- [WMA Resolution on Academic Sanctions or Boycotts](#) (with minor revision)
- [WMA Resolution on Child Safety in Air Travel](#) (with minor revision)
- [WMA Resolution on Human Rights Violations against Uighur people in China](#)
- [WMA Resolution on Standardisation in Medical Practice and Patient Safety](#)
- [WMA Resolution on the Designation of an Annual Medical Ethics Day](#) (with minor revision)
- [WMA Resolution Regarding the Medical Profession and COVID-19](#) (with minor revision)
- [WMA Resolution Supporting the Rights of Patients and Physicians in the Islamic Republic of Iran](#) (with minor revision)

### Revised standing documents

- [WMA Strategic Plan 2026-2030](#)
- [Rules Applicable to WMA Associate Membership](#)

## WMA General Assembly, Porto, 8-11 October 2025

The 78<sup>th</sup> General Assembly of the World Medical Association took place from 8 to 11 October 2025, hosted by the Portuguese Medical Association (Ordem dos Médicos) and brought together delegates from 53 Constituent Members (NMAs).

### President's Report

Dr Philip reiterated the central importance of the WMA's ethical mission, noting that despite global division and multiple armed conflicts, physicians remain united by shared professional values.

He condemned ongoing violations of medical neutrality, particularly the targeting of health care workers and facilities, and highlighted the WMA's continued advocacy on these issues through public statements and resolutions.

He reflected on his presidency as a period of significant renewal for the Association, marked by the adoption of the revised Declaration of Helsinki and the publication of its 60<sup>th</sup> anniversary commemorative edition.

### Secretary General's Report

Dr Kloiber highlighted the close cooperation between the WMA and the World Federation for Medical Education (WFME), following a highly successful joint conference held in Bangkok. He drew attention to the Bangkok Declaration on Support for Learners, calling for improved working and living conditions for medical students and trainees, including those engaged in continuing professional development.

He provided updates on the WMA's ongoing advocacy for the protection of healthcare in conflict zones, its collaboration with the World Health Organization (WHO) and the World Health Professions Alliance (WHPA).

He concluded by expressing sincere gratitude to the Council, the Secretariat, and all members for their trust and collaboration during his tenure, and reaffirmed his commitment to ensuring a smooth transition in the leadership of the WMA Secretariat.



GROUP PHOTO AT THE PESTANA DOURO RIVERSIDE DURING THE 78<sup>TH</sup> GENERAL ASSEMBLY IN PORTO

## Chair of Council's Report

The WMA Chair of Council, Dr Resneck Jr., acknowledged the considerable work undertaken by all committees noting the issues considered, from physician well-being and scope of practice to the ethical implications of artificial intelligence and the revision of core WMA policies.

He highlighted the WMA's continuing role as the global voice for the medical profession in defending ethical practice and human rights, particularly amid growing humanitarian crises and threats to medical neutrality. The Chair commended NMAs for their constructive engagement and reaffirmed the importance of unity and respect in addressing sensitive global issues.

In closing, Dr Resneck Jr. reiterated his confidence in the WMA's capacity to meet future challenges through collaboration, transparency, and the shared ethical principles that bind physicians worldwide.

## Scientific Session

The Scientific Session incorporated the "Impact of Artificial Intelligence (AI) on Medical Practice" theme. The keynote lecture, "AI in Health," provided an overview of current definitions and methodologies of AI in medicine, reviewing its expanding applications in diagnostics, clinical reasoning, research, and public health.

The session highlighted the need for ethical vigilance and continuous education as AI reshapes medical practice.

## Installation of the New President

Dr Jacqueline Kitulu (Kenya Medical Association) was installed as the 76th President of the WMA by Dr Jack Resneck Jr.

She delivered her Inaugural Address, where she expressed deep gratitude as she accepted the presidency of the WMA. She paid tribute to her predecessor and to pioneering leaders, especially African women physicians, and acknowledged her family and home country for their support.

She laid out three key priorities for her term: strengthening inter-regional collaboration, building mentorship and leadership capacity (especially among junior doctors), and advancing physician-led policy advocacy for primary healthcare.

She further emphasised the global ethical responsibilities of the profession, including protection of healthcare professionals in conflict zones, climate-linked health challenges, and the equitable and ethical integration of digital innovation.

The address concluded with a call to action: to mentor the next generation, advocate for primary care, and remain united as physicians serving humanity.



**Dr Jacqueline Kitulu** inaugurated as the new President of the World Medical Association WMA General Assembly in Porto, Portugal.

## Health Workforce

A strong health workforce is the backbone of every resilient health system. Yet worldwide, health worker shortages, unequal distribution, and unsustainable international recruitment practices continue to undermine access to care, health security, and progress towards universal health coverage (UHC).

In this context, the World Medical Association has intensified its advocacy to ensure that health workforce policies are ethical, fair, and fit for the realities of an increasingly mobile global workforce.

The WMA is a member of the Expert Advisory Group (EAG) for the Third Review of the WHO Global Code of Practice on the International Recruitment of Health Personnel. This review offers a crucial opportunity to modernise the Code, with interim recommendations proposing to extend its scope to health personnel who migrate into care worker roles, promote mutually beneficial co-investment between destination and source countries, and strengthen protections against workforce depletion during crises.

Health workforce issues were firmly in the global spotlight at the 2025 World Health Assembly, where six resolutions addressed health workforce challenges. This renewed political momentum, combined with the fifth round of reporting on the WHO Global Code of Practice and its revision, prompted the WMA to strengthen the evidence base on physician migration.

drawing on data from its membership, the WMA conducted a dedicated survey to better understand current migration patterns and drivers. The WMA extends its sincere thanks to all members who contributed to this effort, as well as to Dr Caline Mattar for her leadership in developing the report.

The findings were launched at a WMA-hosted side event during the World Health Assembly in May 2025. The event featured a high-level panel discussion with representatives from the Philippine Ministry of Health, WHO, the International Labour Organization (ILO), the International Council of Nurses (ICN), alongside the WMA Chair of Council Dr Jack Resneck and WMA President Dr Ashok Philip, and was moderated by Dr Caline Mattar.

The discussion underscored the urgency of fair, transparent, and accountable international recruitment practices and decent and safe working conditions in all countries.



**WMA Side Event: "Enhancing Collaboration and Solutions for Health Workforce Migration"**

Building on this momentum, the WMA co-organised a second side event with the Governments of the Philippines, Ireland, Germany, and Morocco, together with the Frontline Health Workers Coalition.

The event highlighted that ensuring a sufficient, competent, and motivated health and care workforce is essential to achieving UHC, advancing primary healthcare, and strengthening global health security. Speakers shared national experiences, innovative practices, and persistent challenges, emphasising the need for sustained investments in education, lifelong learning, fair remuneration, safe working conditions, and the well-being of health workers.



**WMA Side Event: “Building Momentum: Accelerating Action on the Global Health and Care Workforce”**

A third side event, “Rising Challenges, Diminishing Resources: Investing in the Health Workforce to Deliver UHC,” was organised by the WMA in collaboration with the World Health Professions Alliance (WHPA). The event reaffirmed a powerful message: investing in health professionals is not a cost, but a cornerstone of resilient, high-quality health systems. Leaders from the five WHPA member organisations delivered compelling calls to action, urging policymakers to build a future-ready health workforce, ensure ethical and accountable international recruitment, and empower health professionals as leaders in climate action.

Through sustained advocacy and global collaboration, the WMA continues to champion a health workforce agenda grounded in equity, sustainability, and shared responsibility.

## Non-communicable Diseases (NCDs)

Non-communicable diseases, including cardiovascular diseases, cancer, chronic respiratory diseases, diabetes, and mental health conditions, are the defining health challenge of our time.

They account for the majority of global deaths and disability, yet remain largely preventable. Tackling NCDs is not only a matter of treating illness; it requires rethinking how health systems are designed, financed, and staffed to deliver continuous, people-centred care across the life course.

Against this backdrop, the 4th High-Level Meeting (HLM) of the United Nations General Assembly on the prevention and control of NCDs, held on 25 September, represented a critical opportunity to reset global ambition. In the months leading up to the HLM, WMA was a strong and consistent advocate for action—calling for political commitments that match the scale and urgency of the NCD epidemic.

Central to the WMA’s advocacy was a clear message: resilient health systems depend on a strong, qualified, and adaptable health workforce. Such systems must be capable not only of preventing and managing NCDs, but also of responding to pandemics, climate-related health emergencies, and the rapidly growing health needs of ageing populations.

As a member of the WHO Civil Society Working Group on NCDs, the WMA delivered a consensus statement at the Multi-stakeholder Hearing in May 2025, urging governments to place health workforce investment at the heart of the NCD response.

This call was reinforced through high-level thought leadership. Together with the WHO Civil Society Working Group on NCDs, the WMA co-authored a BMJ article urging the United Nations to strengthen the political declaration of the HLM through bold commitments to health system resilience and workforce sustainability.

The WMA also played a key role in an NCD Alliance policy research report examining global trends, challenges, and opportunities in optimising the health and care workforce for NCD prevention and control. As a contributor and member of the NCD Alliance Expert Advisory Group, the WMA helped ensure that the voice of physicians and frontline health professionals was clearly reflected.

The WMA delivered statements on the follow-up to the Political Declaration at both the 156th WHO Executive Board and the 78th World Health Assembly.

In addition, the WMA joined forces with the International Council of Nurses (ICN), the International Pharmaceutical Federation (FIP), and the World Dental Federation (FDI) to jointly comment on the first zero draft outcome document of the HLM—demonstrating the power of interprofessional collaboration in shaping global health policy.

Beyond advocacy, the WMA is investing in solutions. In collaboration with the WHO Global NCD Platform and the Alliance for Health Policy and Systems Research, the WMA co-launched an incentive research grant for young researchers focusing on integrated care pathways for NCDs and mental health.

By promoting whole-of-government and whole-of-society approaches, this initiative aims to generate evidence that can accelerate the scale-up of proven, cost-effective interventions. The application process closed in early 2025, and the review is currently underway.

## World Medical Association at COP30 in Belém, Brazil

Members of the WMA attended the 30th Conference of the Parties (COP30) to the United Nations Framework Convention on Climate Change (UNFCCC) in Belém, Brazil, from 10 to 21 November 2025.

The WMA delegation for COP30 employed a hybrid approach, with Dr Ankush Bansal (Head of Delegation), Dr Johanna Schauer-Berg, and Dr Lekha Rathod participating virtually and Dr Mohamed Osman attending in person.



COP 30 Plenary

This structure ensured a comprehensive global presence, with representation from the United States, Austria, India, and Sudan. The delegation utilised this hybrid model to effectively monitor negotiation sessions and engage with other health organisations through daily policy meetings organised by the Global Climate and Health Alliance (GCHA).

The most significant milestone for the climate change and health movement during the conference was the launch of the Belém Health Action Plan (BHAP), a critical framework designed to place health system resilience at the centre of the climate agenda. This investable framework aims to operationalise the Global Goal on Adaptation (GGA) by prioritising local communities and Indigenous Peoples to protect the most vulnerable.

“

*Strengthening, protecting, and meaningfully engaging health professionals must be central to every national implementation of the Belém Health Action Plan. A safe, well-supported health workforce is fundamental to safeguarding both patient safety and the sustainability of health systems worldwide.*

*Dr Otmar Kloiber, Chair of WHPA and Secretary General of WMA*

The implementation of the BHAP received an initial boost through a pledge of US\$300 million from a group of philanthropic foundations and funders, specifically targeting threats such as extreme heat, air pollution, and infectious diseases.

In the negotiation rooms, progress was made with the formal adoption of a set of indicators under the Global Goal on Adaptation (GGA), which finally includes specific metrics for health. This provides a vital tool for measuring progress toward health adaptation, though challenges remain regarding the scale of financial support. While there was a commitment to triple adaptation finance for developing countries, the deadline for reaching this target was formally pushed back to 2035, a delay that risks leaving climate-vulnerable nations without the necessary means of implementation in the immediate term.

On the front of "just transition," the conference saw the establishment of the Belém Action Mechanism (BAM) to facilitate shared learning and technology transfer, particularly for the Global South. The BAM is viewed as "preventative medicine" for the planet, addressing the social determinants of health and root causes of climate change.

Nevertheless, the official COP30 agreement failed to include a binding plan to phase out fossil fuels, meaning the primary drivers of air pollution and heat-related mortality continue without a definitive end date. This lack of aggressive mitigation remains a significant concern for all stakeholders.

The WMA utilised COP30 to urge parties to position health at the core of climate negotiations. The delegation met with Parties, including South Africa, Mauritania, Iraq, and Sudan, to stress climate impacts on health and push for the integration of health metrics into the Global Goal on Adaptation (GGA).

The WMA further amplified this message by speaking at two Health Pavilion events. One event addressed Air Pollution, highlighting the health crisis stemming from fossil fuels and the essential advocacy role of physicians in pushing for aggressively mitigating air pollution, in line with WMA's policy on Air Pollution and Health.

The second event delivered a stark message against political delay, stressing the necessity of immediate action to prevent the climate and health crisis from escalating unchecked over the next 30 years.

## Advancing Global Understanding of Artificial Intelligence in Medicine

Between January and May 2025, the World Medical Association's Medical Technology Workgroup successfully delivered a comprehensive five-part webinar series dedicated to the rapidly evolving role of artificial intelligence (AI) in medicine. Conceived as an educational programme for physicians worldwide, the series explored the transformative potential of AI while providing a balanced examination of its challenges, limitations and ethical implications.



### Online Webinar

## Best Practices in Medical AI Development

#### Webinar Topics:

- ✔ The path from concept to clinic
- ✔ The vital role clinicians play on AI development teams
- ✔ How we can build systems rooted in safety, ethics, and trust

WEDNESDAY  
30 April 2025

START AT  
3 PM CET



**Guest Speaker:**  
**Dr. Nathalie Bloch**  
Senior Advisor in digital health and application of AI based technologies in the clinical fields

Under the leadership of Dr Jesse Ehrenfeld (American Medical Association) and Dr Jacob Mathew (Kuwait Medical Association), the programme brought together internationally recognised experts across clinical practice, ethics, law and health policy.

Each session focused on a core dimension of AI integration in healthcare, ranging from current and emerging medical applications to regulatory and legal considerations, bestpractice frameworks, and questions of global health equity.

Discussions underscored the importance of responsible innovation, transparency and physician preparedness as AI tools become more deeply embedded in medical decision-making and health system operations.

WMA ONLINE WEBINAR

### INTRODUCTION TO AI IN MEDICINE

- > Foundations of AI in Healthcare  
Decoding Healthcare: Generative AI and the Future of Medical Intelligence
- > Will AI Replace Doctors? AI and the Evolving Role of Physicians

The timing of the series was particularly significant, as it paved the way for the adoption by the WMA General Assembly in Porto last October, of the Statement on Artificial and Augmented Intelligence in Medical Care, a key policy document offering guidance on preserving ethical standards and protecting patient wellbeing in a context of rapid technological change.

WMA ONLINE WEBINAR

### CURRENT AND FUTURE APPLICATIONS OF ARTIFICIAL INTELLIGENCE IN MEDICINE

WELCOME AND INTRODUCTION  
> DR. JESSE EHRENFELD (AMERICAN MEDICAL ASSOCIATION)

INTRODUCTION  
> DR. MICHAEL KRAUTHAMMER, PROFESSOR AT THE UNIVERSITY OF ZURICH (CHAIR OF MEDICAL INFORMATICS)

- > AI IN DIAGNOSTICS, DECISION SUPPORT, AND PREDICTIVE ANALYTICS
- > AI IN TREATMENT, SURGERY, AND PERSONALIZED MEDICINE
- > AI IN PATIENT ENGAGEMENT, REMOTE MONITORING, AND DIGITAL HEALTH
- > CYBERSECURITY IN MEDICINE

MODERATORS:  
> DR. JACOB MATHEW (KUWAIT MEDICAL ASSOCIATION)  
> DR. JESSE EHRENFELD (AMERICAN MEDICAL ASSOCIATION)

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The series attracted strong participation from WMA members and partners, reflecting the global medical community's growing need for guidance in navigating AI driven change. All webinar recordings remain available for continuous learning on the WMA YouTube channel.

## Revision of the Declaration of Taipei on Health Databases and Biobanks

The Declaration of Helsinki has long guided ethical medical research and introduced the requirement for informed consent. Since its adoption, research has evolved significantly. Large collections of data and human specimens, combined with advanced information technologies, now enable new research models and predictive analyses that are transforming the field.

These developments open possibilities for improved medical understanding and new treatments, yet they also heighten risks. Health databases and biobanks can be misused, particularly through commercial, administrative or political actions outside the scientific context. The WMA stresses that progress must be grounded in an ethical framework that protects confidentiality, privacy and the trust of individuals who provide their data or specimens.



The Declaration of Taipei aims to strike this balance. It addresses the rights of individuals whose tissue or data are used, grounded in the principles of confidentiality and privacy, while recognising that health data has become a powerful tool for increasing medical knowledge. Because many risks extend beyond research itself, the Declaration covers any use of health databases and biobanks outside individual treatment. Physicians, as the primary custodians of confidential health information, carry a responsibility toward those who entrust them with their data and specimens.

In April 2025, the WMA established an internal workgroup to initiate the revision of the Declaration of Taipei. To ensure broad participation, the WMA is collaborating with its constituent members to organise a series of regional expert meetings and to conduct open consultations. The first expert meeting took place in Taipei on 4–5 December 2025, marking the formal start of the global dialogue on the revision.

On 4 December 2025, the WMA participated in a Taiwan Medical Association symposium in Taipei that gathered international and domestic experts to discuss universal health coverage, AI, green healthcare and collaborative care models.

The event highlighted Taiwan's integrated healthcare system and successful cancer screening programmes and underscored a shared commitment to ethical, sustainable and people-centred health systems.

These discussions will continue to explore ethical considerations surrounding health databases and biobanks and will contribute to shaping an updated Declaration that reflects contemporary realities while upholding the core values of protection, trust and professional responsibility. Stakeholders interested in following the development of this process are invited to sign up for the dedicated bulletin.



Group photo at the First Expert Meeting in Taipei, Taiwan

### Balance sheet for the years 2024 and 2023

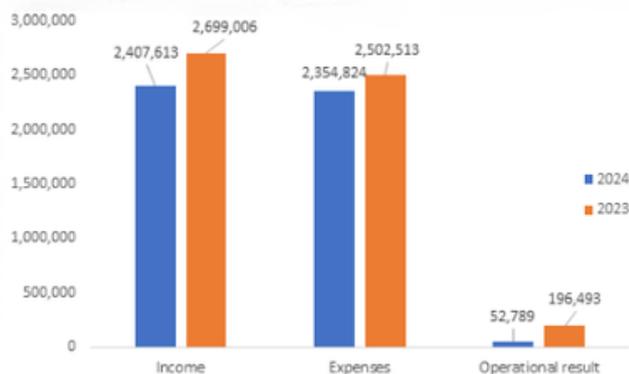
| Assets  | 2024         | 2023         |
|---|--------------|--------------|
| <b>Current assets</b>                         | T€           | T€           |
| Cash  | 6 807        | 7 207        |
| Accounts receivable                           | 81           | 84           |
| Prepaid expenses                              | 88           | 66           |
| <b>Non current assets</b>                     |              |              |
| Real Estate - net                             | 0            | 8            |
| Furniture, fixture and office equipment - net | 109          | 56           |
| <b>Total assets</b>                           | <b>7 085</b> | <b>7 421</b> |
| <b>Liability and equity</b>                   |              |              |
| Accounts payable and accrued expenses         | 380          | 409          |
| Deferred Income                               | 43           | 61           |
| <b>Provisions and reserves</b>                | <b>1 022</b> | <b>1 095</b> |
| <b>Funds</b>                                  |              |              |
| Travel stipend fund                           | 57           | 45           |
| Earmarked funds                               | 1 988        | 2 269        |
| <b>Association equity</b>                     |              |              |
| Other Equity                                  | 3 595        | 3 542        |
| <b>Total liability and equity</b>             | <b>7 085</b> | <b>7 421</b> |
| <b>Net result for the year</b>                | <b>53</b>    | <b>196</b>   |
| <b>Total Association equity</b>               | <b>3 595</b> | <b>3 542</b> |

### Income statement for the years 2024 and 2023

Balance sheet  
For the years on 31 December 2024 and 2023

|                                 | 2024         | 2023         |
|---------------------------------|--------------|--------------|
| <b>Income</b>                   | T€           | T€           |
| Dues and contributions          | 2 079        | 2 443        |
| Financial earnings              | 228          | 173          |
| Associate members - Net         | 13           | 11           |
| Other income                    | 88           | 71           |
| Project income                  | -            | -            |
| <b>Total income</b>             | <b>2 408</b> | <b>2 699</b> |
| <b>Expenses</b>                 |              |              |
| Administrative overhead         |              |              |
| - Staff expenses                | 1 555        | 1 409        |
| - Office expenses               | 194          | 136          |
| - Other expenses                | 262          | 436          |
| Meeting expenses                |              |              |
| - Council Session               | 156          | 137          |
| - General Assembly              | 128          | 191          |
| - Other meeting expenses        | 159          | 68           |
| Financial items                 |              |              |
| - Financial cost                | 5            | 5            |
| - Foreign currency gains/losses | 0            | 12           |
| Changes in provisions/funds     |              |              |
| - Transfer from/to provisions   | -135         | 70           |
| - Transfer from/to funds        | 0            | 0            |
| Taxation                        | 31           | 37           |
| <b>Total Expenses</b>           | <b>2 355</b> | <b>2 501</b> |
| <b>Net result for the year</b>  | <b>53</b>    | <b>196</b>   |

Income, expenses, and result of the year (Euros)



Expenses in 2024 (in Euros)



Income in 2024 (in Euros)



## WMA interventions to World Health Assembly and WHO Executive Board

The WMA closely follows the activities of the World Health Organization, including its governing meetings, which take place every year. Having an official observer status with the WHO, the WMA can submit policy statements to its Executive Board and World Health Assembly.

### Statements submitted to the 78th World Health Assembly (May 2025)

- Reducing the Burden of Non-Communicable Diseases
- Mental Health and Social Connection
- Universal Coverage (WHPA constituency statement)
- Health and Care Workforce
- Health in the 2030 Agenda for Sustainable Development
- Antimicrobial Resistance
- Climate Change and Health (WHPA statement)
- Global Architecture for Emergency Response (WHPA constituency statement)

### Statements submitted to the 156th Executive Board session (February 2025)

- Universal Health Coverage (constituency statement)
- Follow-up to the political declaration of the third high-level meeting of the General Assembly on the prevention and control of non-communicable diseases
- Mental health and social connection
- Health and care workforce (constituency statement)
- Universal health and preparedness review
- Climate change and health (constituency statement)

## WMA public statements, declarations and open letters

The WMA follows the global health news and issues statements, declarations and open letters to coincide with public events and/or related to current health issues.

- WMA Statement at the Fifth WHO Forum on Alcohol, drugs and Addictive Behaviours “Aligning efforts, strengthening solidarity and partnerships” (24-26 June 2025)
- WMA contribution to the report of the Special Rapporteur on the Right to Health to the 80th session of the United Nations General Assembly (30 May 2025)
- WMA, ICN, FDI and FIP comments to the first draft of zero outcome document of the HLM on NCDs – version 13 May 2025 (21 May 2025)
- WHO Civil Society Working Group on NCDs Consensus Statement Multistakeholder Hearing for UN High Level Meeting on non-communicable Diseases and Mental Health (2 May 2025)
- WMA Statement 13th Meeting of the Intergovernmental Negotiating Body (INB) for a Negotiation and agreement on the proposed WHO pandemic agreement (11 April 2025)
- WMA Statement 13th Meeting of the Intergovernmental Negotiating Body (INB) for a WHO instrument on pandemic prevention, preparedness and response (19 February 2025)

## Public Relations

**WMA has issued a significant number of [press releases](#) in support of its members and each time a human rights violation by the health sector was brought to its attention. The press releases are available on the WMA website and were communicated via the WMA social media channels and in the newsletter.**

[World Medical Association welcomes COP30 Health Community Recommendations ahead of Health Day](#) (11.11.2025)

[WMA calls on Israel to ensure fair trial standards for detained Gaza physician](#) (07.11.2025)

[WHPA Urges COP30 to Build Climate-Smart, Health Professional-Led Health Systems under the Belém Health Action Plan](#) (06.11.2025)

[World Medical Association Strongly Condemns the Massacre of Patients and Health Workers in Sudan](#) (31.10.2025)

[The World Medical Association General Assembly 2025 in summary](#) (21.10.2025)

[World Medical Association Emphasizes the Importance of Physician Leadership in Health Care Amid Global Workforce Shortages](#) (15.10.2025)

[World Physician Leaders Call for Ethical, Physician-Led Integration of Artificial and Augmented Intelligence in Healthcare](#) (14.10.2025)

[World Medical Association Urges Israeli Government to Uphold Humanitarian Law and Protect Healthcare in Gaza](#) (13.10.2025)

[New WMA President Calls for Global Physician Solidarity, Mentorship and Primary Healthcare Advocacy](#) (10.10.2025)

[World Medical Association Calls for Immediate Release of Dr Ahmadreza Djalali](#) (02.10.2025)

[Invest in health workforce to win global fight against NCDs, says WHPA](#) (25.09.2025)

[WMA Opens Recruitment for New Secretary General](#) (02.09.2025)

[World Medical Association Condemns Attack on Nasser Hospital in Gaza](#) (27.08.2025)

[World Humanitarian Day: Health professionals on the brink as conflicts intensify](#) (19.08.2025)

[WMA Urges Hungarian Government to Respect Medical Independence and Cease Attacks on Medical Chamber](#) (12.08.2025)

[“For Every Patient, Seven Bags of Plastic” – 48 Million Health Professionals Demand No Exemptions for Healthcare at Global Plastics Treaty](#) (07.08.2025)

[Grand Chamber of the ECHR recognizes breach of effective fair trial rights in Semenya ruling](#) (28.07.2025)

[The World Medical Association Expresses Deep Concern Over Humanitarian Crisis in Gaza](#) (25.07.2025)

[WHPA urges WHO to maintain strong leadership on health workforce](#) (18.07.2025)

[WMA statement on the ongoing deaths of physicians and other healthcare workers in Gaza](#) (09.07.2025)

[Groups Representing Patients, Healthcare Professionals and Pharmaceutical Industry Author New Principle on Use of AI In Healthcare](#) (26.06.2025)

[WMA Condemns Missile Strike on Israeli Hospital and Calls for Protection of Healthcare Facilities](#) (20.06.2025)

[Invest in health professionals for cost-effective, quality care, says WHPA](#) (20.05.2025)

[WMA Urges Stronger Global Action on Health Workforce as WHA78 Considers Key Resolution](#) (19.05.2025)

[World Medical Association calls on the Israeli Government to ensure humanitarian aid reaches Gaza](#) (19.05.2025)

[The World Medical Association Condemns the Detention and Abduction of Health Professionals in Sudan](#) (30.04.2025)

[World Medical Association Urges Clearer Definitions for Non-Physician Roles to Protect Patient Safety](#) (29.04.2025)

[Statement of Support for French Junior Doctors](#) (28.04.2025)

Public Relations

Physician Leaders Call for Immediate Cessation of Riot Control Agent Use in Turkey and Protection of Healthcare Workers (26.04.2025)

The World Medical Association welcomes progress on the Global Pandemic Agreement(16.04.2025)

Health workforce safety is patient safety (03.04.2025)

WHPA calls on world leaders to stop air pollution (25.03.2025)

Statement of Support for Spanish Junior Doctors (14.02.2025)

Physician Leaders Urge U.S. to Sustain Global Health Support Amid Foreign Aid Review (03.02.2025)

The World Medical Association Calls for Sustained Global Support of the World Health Organization (24.01.2025)

WMA commends Israel and Gaza ceasefire and calls for safeguarding of health professionals (23.01.2025)

Junior Doctors Network – Global Engagement

The World Medical Association Junior Doctors Network (JDN) continued to grow as a dynamic platform supporting early-career physicians worldwide.

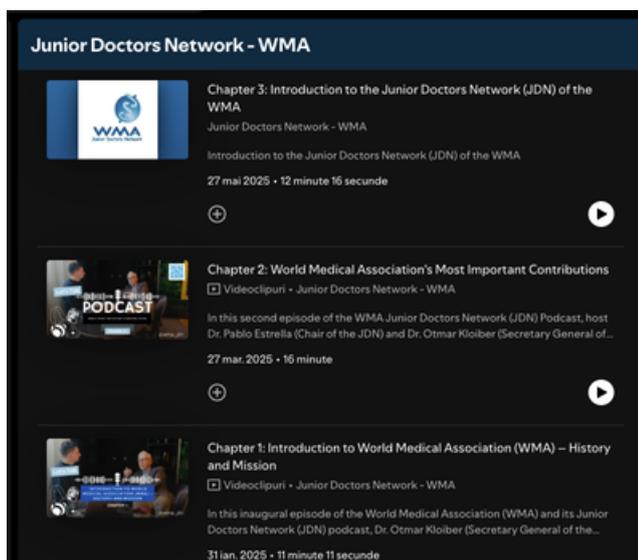
Over the past year, the JDN organised a series of webinars led by its working groups. The webinars addressed themes such as leadership in clinical practice, international approaches to medical education, and the challenges facing the global physician workforce.

Contributions from experts and members enriched these discussions, ensuring that each session offered both practical insights and global perspectives.

Alongside its events, the JDN maintained an active communication channel through its newsletter. Published regularly, the newsletter highlighted the work of junior doctors around the world, shared reflections from participants in international meetings, and provided updates on JDN activities and working group outputs.

The JDN also expanded its communications outreach through a podcast featuring conversations with junior doctors on global health, advocacy, and professional development.

Through its webinars, publications, and collaborative projects, the JDN strengthened its role within the WMA as a space where junior doctors can build professional networks, develop their skills, and play an active part in shaping discussions on global health and medical professionalism.



**ONLINE WEBINAR**

**LAUNCH OF THE WMA JDN GLOBAL WORKING HOURS STUDY**

Robust data on junior doctors' working hours, rest, and training is essential to protect the workforce and build resilient health systems amid a global shortage.

Thursday 18 December 17:00-18:00 CET

Dr. Jack Resnek, World Medical Association  
 Dr. Maren Hopfle, International Labor Organization  
 Dr. Pablo Estrella Porter, WMA - JDN, Moderator  
 Dr. Celine Mattar, World Medical Association  
 Dr. Juan Pablo Carrasco, Spanish Junior Doctor representative

**REGISTER HERE**

### Constituent Members

Physicians around the world are typically represented by the national and territorial medical associations of their regions.

Such associations are broadly representative of the physicians of their country by virtue of their membership, with their voting membership being limited to physicians and medical students. They are not subject to or directed by any office or agency of government.

**The WMA currently has a total of 118 members as of December 2025. There is a detailed membership list on the [WMA website](#).**

### Advantages

1. Recognition and acceptance as a member of an international organisation such as the WMA lends the power of a global community to a National Medical Association (NMA). This underlines the importance and relevance of the NMA.
2. The WMA is in official relations with United Nations agencies such as the World Health Organization, which gives NMAs and Associate Members access to these international bodies.
3. By participating in debates with colleagues from all over the world, NMAs and Associate Members have the opportunity to collaborate on ethical guidance and leadership in health care.
4. Information and knowledge can be sourced from the WMA, which can contribute to the optimal efficacy of NMAs and individual physicians.
5. NMAs and Associate Members can make use of the WMA's products and services.

### Associate Membership

Associate membership is limited to physicians (as defined in the WMA Bylaws) and medical students who are properly enrolled in a recognised medical school, who have applied for such membership and who have paid the amount of dues prescribed for such members.

Associate membership is available to these individual physicians and medical students whether or not their National Medical Association is a Constituent Member of the World Medical Association.

**The WMA currently has more than 2800 active Associate Members as of December 2025. The sign-up page is available on the [WMA website](#).**

### Advantages

1. The privilege of attending and participating in WMA annual assemblies.
2. Introductions to professional leaders in your field and opportunities to visit medical and health institutions abroad.
3. Information on medical meetings abroad.
4. A service department which will assist you in meeting your colleagues both at home and abroad.
5. A membership certificate for display.
6. WMA secretariat consultation, service and small meeting centre.
7. Preferred access to the WMA Education Portal for Continuing Medical Education and Continuing Professional Development.
8. Publications of the World Medical Association.
9. Access to internal discussion documents on policy development.



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# World Medical Journal

The WMJ is published quarterly and reflects the mission, values and activities of the World Medical Association. While it is not intended as a venue for original scientific research, the journal provides space for informed overviews, emerging trends and reflections on developments that may not appear in mainstream medical literature. Its regular sections—medical ethics and human rights, medical science, professional practice and education, the Secretary General’s column, and updates from National Medical Associations—offer readers a broad perspective on issues shaping the profession worldwide. We hope this edition proves both useful and thought-provoking, and we continue to welcome submissions aligned with our Author Guidelines.

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# FUTURE MEETINGS

## The Third Open Expert Meeting on the Revision of the WMA Declaration of Taipei

Start date: June 1, 2026

End date: June 2, 2026

Location: The Vatican City

## The Fourth Open Expert Meeting on the Revision of the WMA Declaration of Taipei

Start date: September 14, 2026

End date: September 16, 2026

Location: Oslo, Norway

## WMA General Assembly, Rotterdam 2026

Start date: October 7, 2026

End date: October 10, 2026

Location: Postillion Hotel & Convention Centre WTC Rotterdam, The  
Netherlands

## 235th WMA Council Session, Rio de Janeiro 2027

Start date: April 15, 2027

End date: April 17, 2027

Location: Rio de Janeiro, Brazil





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