

THE ADVOCATE

MEDSIN MAGAZINE

UPDATES FROM OUR NATIONAL COMMITTEE AND BRANCHES

Join our current national committee members, and branches on a tour through some fantastic Medsin successes and adventures!



ALUMNI

Find out what some of our alumni have been up to after their Medsin days!



AFFILIATES

From tours to training, fundraising to campaigns, hear their stories!



GHC Bristol!

Spotlights are on the sustainable development goals...and some individuals!



IFMSA MARCH MEETING 2016 - MALTA

From policy proposals to trainings, inspirations to beaches, meet our delegates for this March's meeting, and what they've been up to during a trip to Malta!

CONTENTS

MAIN

A Message from the National Director, 4
Contact Us, 3
National Working groups Updates, 24 - 26
Love, Medsin, 28 - 29
Support Us, 33



FEATURE - p5

IFMSA March Meeting, 5 - 6
Sustainable Development: Our Roles in the Goals, 6
Infectious Idea: St George's Epidemic Simulation, 7
Medsin's Response to Global Surgery, 8
The Biggest Challenge in Global health, 9 - 10

UPDATES FROM THE NATIONAL COMMITTEE - p12

Secretary - Matt Quinn, 13 - 14
Communications - Yue Guan, 14
Policy & Advocacy Director - Lotte Elton, 15
Updates from Affiliates - Alex Peterson, 16 - 17

REGIONAL & BRANCHES - p18

Midlands - Laura Myers, 18
Southwest - Laurence Wright, 18
Northern - Clare Greenwood, 18
Branches - Various, 20 - 23
Branch Spotlights -- UCL, 20
-- Cardiff, 21
-- Bristol, 22
-- Bart's, 23



ALUMNI CORNER - p30

Natalie May, Joel Burton, Elly Pilavachi, Johnny Currie, Beth Thomas, Karthick Selvakumar.

The Advocate is a bi-annual e-magazine of Medsin - a student network and registered charity tackling global and local health inequalities through education, advocacy and community action.

RESEARCH CORNER - p32

Spotlight: From the Lancet to World Congress: National Working Groups lead the way in research.

Medsin have a vision of 'a fair and just world in which equity in health is a reality for all' and believe that the students of today are critical to bringing about an equitable and healthy world of tomorrow.



5



12



28



6



7



9



8



32



30

CONTACT US

Got any questions, comments, or suggestions for our next issue? Get in touch!



Emails: General/submissions: media@medsin.org
Sponsorships: partners@medsin.org
National Committee: director@medsin.org
Alumni corner: alumni@medsin.org
Research corner: research@medsin.org





A MESSAGE FROM THE NATIONAL DIRECTOR

Dear Medsin members, partners and fans,

It is an honour to welcome you to the Medsin's latest exciting project, the first issue of our first ever online national magazine, "The Advocate".

In The Advocate, we hope to capture the spirit of Medsin, its members and your work, and illustrate it on a few pages every 6 months in a way that will hopefully do justice to the inspiring things you do.

We hope that this magazine will educate you about the latest in various Global Health topics. We also expect that many of the features will inspire you to advocate and take action on the issues that you read about, and others that you are passionate about. Of course, we also aim to let you know what is going on from all around the network, in our Branches, National Working Groups, Affiliates, International work, Training, and everything else from anyone else who is interested in being heard.

It is especially exciting for this magazine to include a special feature, which we hope will be a permanent presence, for our inspiring Alumni. Their collective efforts over 20 years have built the network that we love and are so proud of today. It is always inspiring to speak to Alumni about what they got up to in Medsin, what it was like, the challenges they faced, the successes they achieved. Their work, past and present, inspires me.

I would like to end with a thank you to three special people that the Medsin network is lucky to count as its members:

- Yue Guan: our Communications Director who has overseen this project that is being launched merely 8 weeks after her election into her role
- Issy Marks: our National Officer on Research Exchanges who came up with the idea for this project
- Alice Raban: our Alumni and Fundraising Director who pulled together much of the content, particularly the Alumni features through tireless work

It is the work of these three people that brought an idea and vision to life.

A final thank you to all those who contributed to the magazine, the projects mentioned in it, and the unmentioned action that members take every day, up and down the Medsin network.

Layth Hanbali
National Director 2015/16
director@medsin.org

IFMSA MARCH MEETING

Malta 2016



Earlier this year, Medsin has taken a delegation to the annual International Federation of Medical Students' Associations (IFMSA) March Meeting, which took place in Malta during the first week of March. A experience of policies, training, culture and beach. Find out what happened with the delegates!

Policies and preparation

Prior to the general assembly, which attracted medical student representatives from over 100 different countries and regions, the delegation hosted two webinars where the network was encouraged to gain an insight into the shortlisted policies, initiate discussions and to vote on which ones to were to be brought forward to the meeting, organised by Sarah Sobka.

A number of policy statements were proposed by the team, including one on the subject of "Widening participation in medical education: Increasing the number of individuals from low socioeconomic backgrounds in medicine" along with IFMSA-Quebec.

As well as statements, Medsin has also put forward amendments (along with IFMSA-Spain) to their previous policy on "Ending discrimination to better the health of lesbian, gay, bisexual and transgender individuals", updating it to include the health of queer, intersex and asexual individuals in line with our own Medsin policy. Medsin-UK will also be voting on policies on topics such as Human Trafficking, Trade & Health, Food Safety and Access to Medicines.



Meet the Delegates!

From policy experts with years of experiences behind, to new and fresh-faced enthusiasts, this year delegation brought together a dynamic team once again.

Lizzy Morgan, one of the Standing Committee on Public Health (SCOPH) described her experience as emotional.

"Watching our own policy statements being voted into the IFMSA was inspirational, especially after appreciating the time and energy our members had spent on them."

How about the highlights?

Mehak Chadha, one of our two National Officer on Research Exchange (NORE) shines the spotlights on something beside the policies. "The highlights of the GA have to be events involving cultural celebration. The Exchanges

Fair was an opportunity for every country participating in exchanges (SCORE and SCOPE) to promote their programs." She further adds, "it was a great way to talk to many different people, sample treats from around the world and discuss the possibility of signing contracts between our countries at the August Meeting."

Beside policies and culture, many others reflected on international perspectives on various topics, such as the current standing of the National Healthcare service in the UK.

Lisa Murphy, our current Training Director and part of the delegation highlights discussions with an international community as one of the most valuable part of global congregations such as the March Meeting. Whilst

engaged in discussions about our healthcare system, she was surprised by others' comments. "...what shocked me most was the immense support from all over the world for our fight to save our National Health Service." Lisa Murphy shares her thoughts when she engaged in discussions with medical students from other countries.

After going through the jam-packed week of policy voting, training and talks, our delegates shared their experiences and reflections through a series of blog posts, which can be found on our official website (www.medsin.org).

For more information, email international@medsin.org, and join the Medsin International facebook group!

GLOBAL HEALTH CONFERENCE BRISTOL 2016 -

SUSTAINABLE DEVELOPMENT: OUR ROLES IN THE GOALS

This February's global health conference in Bristol set out to explore the sustainable development goals and find our roles within them as advocates for change. The three plenaries were based around six main themes – partnership and people, planet and justice and dignity and prosperity. The weekend was fantastically organised, packed full of inspiring speakers, engaging sessions and empowering messages. We were encouraged to reflect on the positive forces of the millennium development goals, critically analyse the new focus of the sustainable development goals and assess the main challenges that will affect health in the next 15 years. It was a delight to see so many alumni involved with the conference; Dan and Felicity Knights (co-National Coordinators 2011/12) delivered a great workshop on partnership, Mike Kalmus-Eliasz (Global Health Education Director 2011/12) was on the Question Time panel, chaired by Anya Gopfert (Director of International Affairs 2012/13 and Policy & Advocacy Director 2011/12) whilst Karthick Selvakumar (Secretary 2013/14) and Nathan Post (Activities Director 2013/14) were also attending.



Infectious Ideas:

St George's Epidemic Simulation Changes the Way Conferences Deliver Workshops

Na'Im Merchant



Conferences are fantastic for engaging with your interests in and around medicine. However, after the umpteenth PowerPoint presentation, exchanged email addresses, and more tote bags than you can fill with the weekly Sainsbury's shop, you wonder if there's anything new on offer. St George's, University of London, Medsin branch might have found the answer.

The inaugural St George's Global Health Conference entitled "MIND THE GAP – Addressing Inequalities in Global Health" was held on Saturday, 12th March and saw delegates tackle issues from Health and Militarisation to Essential Medicine Provision. One such workshop was on communicable diseases.

Inequality in communicable disease outbreaks is a complex and multifaceted topic. What we wanted to get across was the setting-specific disparity of resource availability, detection capability, and how non-medical aspects are critical in health situations. But how best to get the depth of the problem across in an engaging way? We decided to send our attendees to Africa for two hours.

Sitting around three big tables, 15 delegates are put in the driving seat of an unfolding epidemic response situation. This is not the usual thought-experiment or brainstorming session of some other conferences, but a live and dynamic simulation that changes constantly depending on what everyone in the room does. Shouts of surprise, laughter, and despair ring through the air.

"Sitting around three big tables, 15 delegates are put in the driving seat of an unfolding epidemic response situation."

In their different fictional settings, delegates became immersed in the challenges of a farming community with a simmering new disease in their midst, a town with civil unrest, and a capital city with major international relations issues. A team of facilitators actively altered the situation around them by providing minute-by-minute "news flashes" via delegates' smart phones.

Months of planning went into the creation of this live simulation, and involved the input of a researcher from LSHTM, an Infectious Disease Registrar, and a simulation specialist. We found the delegates were incredibly engaged and learnt a great deal more because they were invested in the task, which was reflected in the unexpectedly glowing feedback.

We would encourage a more hands-on approach to workshops at conferences, and simulations are a demanding but impressively rewarding method of achieving this. We hope to run more in the future.

Medsin's Response to Global Surgery 2030

Mike Billingsley

co-president, Medsin Global Surgery National Working Group

Fifteen years ago, if I asked someone what the biggest killers in low-income countries were they might answer "HIV/AIDS, Malaria and TB". Recently, however, there has been increased recognition of the importance of death and disability from non-communicable disease and injury, the management of which often requires surgery. From this growing need, the field of Global Surgery has emerged.



Why the shift? What is the scale of the problem? Last year's Lancet commission on Global Surgery showed us that five billion people live without access to safe, affordable surgical care [1]. There are more deaths now from conditions requiring surgical intervention than HIV/AIDS, Malaria and TB combined. Despite these appalling statistics, surgical care is still referred to as "the neglected stepchild of global health" [2].

In a recent interview, Dr. Jim Kim, the president of the World Bank, mentioned how the HIV/AIDS epidemic was initially perceived to be too difficult or too expensive to tackle. Global Surgery is at a similar stage and there is no magic bullet. Providing excellent surgical care requires health systems strengthening, training programs and innovation but it is possible. To prove it, the commission has set a goal: safe and affordable surgical care for 80% of the world's population by 2030.

Such an ambitious target requires engagement with students. We've joined forces with Lifebox [3] to launch a student's global surgery initiative. "BeyondBORDERS: The Future of Global Surgery" will illustrate the harsh realities of surgical care in low-income countries and present some possible solutions.

Surgery is affordable and promotes economic growth, yet there is still a lack of political interest and policy support. I believe that the responsibility lies, in part, on medical students. As healthcare advocates and future surgeons, it is imperative that we do not neglect this vital component of Global Health.

1. Meara JG, Leather AJM, Hagander L, Alkire BC, Alonso N, Ameh EA, et al. *Global Surgery 2030: evidence and solutions for achieving health, welfare, and economic development*. Lancet. 2015;386(9993):569–624.

2. Farmer PE, Kim JY. *Surgery and global health: a view from beyond the OR*. World J Surg. 2008 Apr;32(4):533–6.

3. <http://www.lifebox.org>

THE BIGGEST CHALLENGE in GLOBAL HEALTH

Our poor understanding.



**Abi Deivanayagam
Layth Hanbali**

Since you are reading this magazine, we assume you are discomfited by the injustice in health faced not only by the bottom billion in this world, but by those disadvantaged even at our doorstep. Health injustice is very real and the road to global health is long. On top of that, we live in a world where millions of dollars of aid money are thrown at the global South, mostly to be used for specific so-called 'health' programmes. In this article, we propose that our view and definition of "health" are too narrow, and that to have a reasonable chance at achieving health equity and realising the right to health, we need to redefine what we refer to as "health".

The current definition of health, and even public health, appears to be little more than fire-fighting or keeping at bay illnesses that we have a mentality to believe are inevitable. We propose a much more proactive and positive approach, that would require a paradigm shift in the way we view health. It will be a world where the "5-a-day keeps the doctor away" narrative changes to "5-a-day makes me a fitter, happier and better person".

Health should be a state of holistic physical, mental and social well-being. It is not merely the absence of illness. Under this definition, delivery of healthcare services (predominantly performed by doctors, nurses and allied health professionals) does not encompass all aspects of health. We argue further, that public health should be defined as a much broader discipline than it currently is, focusing not only on preventing illness, but on promoting well-being. For example,

with this definition, addressing the high sugar intake of children would be too a narrow intervention to prevent obesity. If it does not come as part of a wider strategy to promote healthy eating, then it cannot count as a holistic public health intervention.

Until the early twenty-first century, health was little more than medical care improvement; the focus was on treating illness, rather than tackling what made people ill in the first instance. It was not until inequalities in health were plotted against the social gradient, and we began exploring powerful determinants of health. This style of thinking might be news to some of us, but to many decision makers, stepping backwards through the chain of causation is something they 'have heard several times before'. Even so, we still see so little being done to promote this way of thinking. The majority of action in global health remains vertical, focusing on individual diseases and interventions, rather than horizontal, considering a holistic view of health systems.

Making the transition from healthcare to health is easier said than done, and deemed utopian by many. However, there are many reasons for persevering. The most significant reason to push for this change in rhetoric is for us to realise the right to health. Interestingly, there is ample international consensus on health being a right; we only have to glance at the numerous international human rights instruments that include health (not healthcare) as a right. Several

NGOs of today and other lobbyists use the right to health to push for health justice around the world. Realising the right to health is only possible if we consider health as more than simply the absence of disease. Even better, considering health in this way may allow us to deal better with the difficulty we

currently face of applying uniform systems to diverse cultures. Looking at health through a lens of well-being rather than the absence of disease will require cultural input every step of the way, which could aid us in taking a more sensitive approach in global health.

"Health injustice is very real and the road to global health is long."

"Realising the right to health is only possible if we consider health as more than simply the absence of disease."

The way forward

Strong reasoning is crucial in the path to global health justice, and transition from perceiving health as more than just healthcare to a sense of physical, psychological and social well-being is necessary. Influential theories of health and social justice such as the social determinants of health, capabilities approach and social contract deserve the limelight and we, future global health workers, must prioritise this type of reasoning over the continuous medicalisation of global health. For this shift to be politically feasible, all levels of society need to be convinced - from the ministers for health and education, to teachers, doctors and other members of the public - that social conditions and health are inherently linked.

To those who believe that such broader theories make an already difficult problem impossible to solve, we give you one ultimate point of rebuttal. If you are truly looking for a solution, redefining health is your only way. Defining health as we currently do is a losing battle. If we are constantly on the defence, trying to fend off ill health, we will never be able to focus on being well. An approach to being as well as we can be, as a society, will ensure that every single member of society can get on board leaving no-one behind, instead of the narrow definitions of ill and at-risk groups.

What can Medsin members do?

We often hear the proclamation "You are the future leaders in global health" in Medsin. We believe this is true. To be leaders, we must define the health agenda:

- Educate everyone around you about this, health professionals or otherwise. Make sure people understand the difference!
- Turn this into an issue. Run discussions on redefining health; ask your local school what they do to promote a holistic view of health; see what your council does and advocate for them to play an active role in improving everyone's health; tell your MP this matters to you.
- When you enter a discussion on global health, are doing a piece of research, or delivering a presentation on global health, this is your opportunity to set the agenda. Think: "Is this health, or healthcare?"
- Advocate for your university to talk more about health, particularly if you study a discipline that you think contributes to health and wellbeing, but where health is not discussed explicitly.



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UPDATES: FROM THE NATIONAL COMMITTEE

A Message from our Secretary

Policy & Advocacy Update

Communications Update

Affiliates: Updates & announcements

Matt Quinn

Lotte Elton

Yue Guan

Alex Peterson

Midland Regional Updates

Southwest Regional Updates

Northern Regional Updates

Laura Myers

Laurence Wright

Clare Greenwood

Updates from Branches

Various

A Message from...

...OUR SECRETARY

Matt Quinn

It's been an amazing year for Medsin so far. As ever, our achievements have been driven by our grassroots, who have produced an amazing set of conferences, general assemblies through sheer grit and an unrestrained enthusiasm for all things Global Health.

The Autumn term saw Sheffield host the "The Inequality Revolution, our first National Conference of the year. It celebrated Medsin's 21st birthday with an awe-inspiring appearance from Medsin founder Wiggs Bateman and an all round quality cast of speakers. If you missed the event, no fear - you can check out all of the highlights as they happened with our hyper realistic virtual reality (ok, twitter story but it's pretty close).

Alongside that our newly formed Policy & Advocacy working group put together a fantastic statement outlining Medsin's position on the Junior Doctor Contract dispute, which was supported by a somewhat literal interpretation of tearing it up. Great job all round.

The Medsin Autumn Weekend was yet another highlight of the Autumn term, with delegates coming from far and wide to decide on Medsin's future direction. Lots of chat was had surrounding the new Long-Term Development Plan, which will see Medsin through until 2018 and includes significant plans for increasing our engagement with our wonderful alumni (all of you!).

Most recently February saw "Our Role in the Goals", the Bristol Global Health Conference dedicated to finding our place in achieving the Sustainable Development Goals. With a venue which reminded us a little bit of Hogwarts and a star studded cast of Medsin alumni the event was a roaring success, and also managed to bring out the creative side in some of our amazing members.

How can you get involved?

We're always looking for new ways to get you involved and support you in upholding Medsin's vision and mission far into your professional lives.

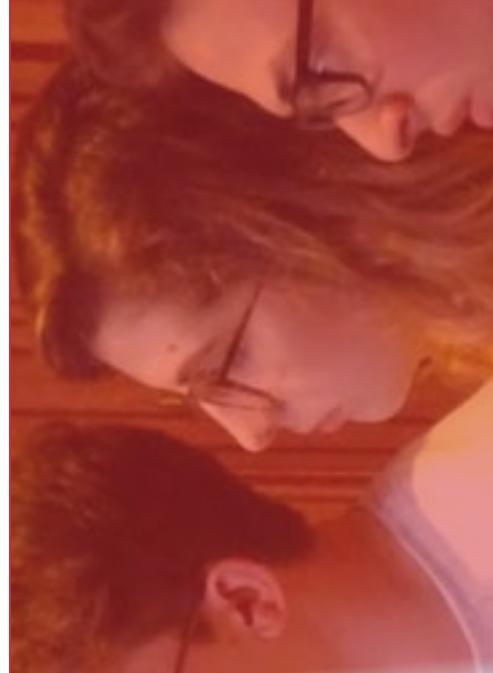
Our governing Board of Trustees is often on the lookout for talented individuals, and a premium is placed on Medsin veterans who understand the organisation and how best to support its members. This is an excellent way to get involved and directly support Medsin's works, as well as becoming an essential part of the charity you know and love.

Other opportunities, such as speaking at our Conferences and General Assemblies, as well as countless local branch events, come up throughout the year, and provide a wonderful chance to share your experiences, expertise or straight-up enthusiasm with an audience of committed students.



Participation in Medsin events can be an invaluable addition to your CV, and if you've done one in the past with little to show for it please feel free to email secretary@medsin.org, with a little evidence, to receive a pdf certificate perfect for your portfolio.

Finally, if you don't have the time to commit to the above opportunities, one-off and regular donations are always appreciated. We are a charity supported by the generosity of our alumni, patrons and the small amount of profit generated from our biannual conferences, with an entirely unpaid and voluntary National Committee. Medsin can always make use of additional funds to support its grassroots global health campaigning, as well as supporting our members to attend our fantastic events throughout the UK.



COMMUNICATIONS

Yue Guan, on behalf of Communications Operational Team

There have been some exciting work going on this year, and we, as the communications team were lucky to be one of the very first to hear about them all. Within the network, we have seen some great engagement with our members, affiliates and have learnt of some fantastic work they all have done. Externally, we have seen Medsin going from strength to strength with our partnerships, advocacy work, as well as building momentum through the success of our conferences and events.

With regards to our work on communications, we also have many stories to tell! This year, we are fortunate to have recruited a team of creative talents, who have not only formulated some innovative publicity ideas and strategies, but also demonstrated sheer dedication to the coordination of communications within Medsin and beyond. We have created a vast array of work that we are proud of and we have enjoyed some wonderful success this year. Our social media engagement has been extremely encouraging. Some of our posts and work have reached over ten times more individuals than before. We are also pleased to be showcasing success stories and awe-inspiring anecdotes from our members, which was very well received. None of this could have been successful without a constant source of support and we only have you all to thank for that! Publicity aside, our team is also excited to be putting forward a proposal for a new website, exploring other means of information processing and sharing, as well as initiating work on some brand new projects, such as "The Advocate".

One of the highlight this year has to be the publicity work for the Spring General Assembly at Norwich, where we had the privilege of working with the lovely organising committee at UEA. It was through this collaboration that some of our most fantastic ideas and series were born. One particularly success is the "Humans of Medsin", initiated by Liban Ahmed. It is a series of posts sharing different individual's reflections on their Medsin journeys, which we are also grateful to be sharing a few with you all in "The Advocate".

We hope the network will continue to grow with success and enthusiasm. It has been an absolute honour to work alongside such incredible individuals and to see the communications aspect of Medsin growing this year.

As ever, Medsinners have been hard at work on a huge range of policy and advocacy issues. Here's a brief snippet of what we've been up to!

Internal policy

At our most recent General Assembly, Medsin members passed policy statements on the following issues:

- Homelessness and health (proposed by Medsin UCL)
- The United Kingdom's responsibility for refugees (proposed by Medsin Liverpool)
- The social determinants of lesbian, gay, bisexual, trans, queer, intersex and asexual health (proposed by Sexpression:UK)
- Widening participation in medical education: increasing the number of individuals from low socioeconomic backgrounds in medicine (proposed by Medsin Glasgow)
- The Global Accessing Licensing Framework (proposed by Medsin Barts)

All of these policy statements, as well as all of Medsin's other currently active policy statements, are available to view here. Submissions are now open for policy statements for the upcoming Spring General Assembly, to be held in Norwich on the 16th-17th April. Watch this space for new Medsin policies!

Advocacy

- The Policy and Advocacy Operational Team are currently working on a submission to the Consultation on the Status of Women, part of The World We Want 2030 initiative.
- Medsin has been working with Doctors of the World on a training module on refugee and migrant healthcare for medical students and doctors. A small section of this training was piloted at the recent Global Health Conference and a team of Medsin members is working in partnership with DOTW to expand this.
- Medsin's Global Surgery National Working Group has been doing fantastic work in global surgery advocacy, including a hugely exciting partnership with Lifebox, the global surgery initiative. They are organising a conference on global surgery on the 9th April at the Royal Society of Medicine - details [here](#)!
- The Maternal and Child Health National Working Group ran a session on stillbirth at the Global Health Conference jointly with Dr Zeshan Qureshi, clinical and academic paediatrician and stillbirth advocate. They are also in the final stages of writing up their research project into medical students' attitudes towards undergraduate abortion education, which they hope to present at several upcoming conferences.

Other policy activity

• In September, Medsin's National Committee drafted a statement on the changes to junior doctor contracts, following consultation with Medsin branches. This statement outlined the concerns held by Medsin-UK, along with Affiliates SKIP and Pharmaware, on the grounds of unsafe working hours; professional concern; threats to gender equity; barriers to professional development and research; and rejection in Scotland and Wales, and can be viewed [here](#). The Policy and Advocacy Operational Team updated the statement last month to take account of changes in the situation, and the updated statement can be viewed [here](#).

• The Policy and Advocacy Operational Team has been busy preparing policy briefs for the Medsin network, as part of a 'Medsin Explains...' blog series dissecting policy issues at a local, national and international level. These blogs set current issues in context and explain the implications for policy. So far they've written about the COP21 negotiations and Universal Healthcare Coverage.

•CROSSING BORDERS

Crossing Borders are particularly active in Glasgow and Sheffield currently. If you're interested in getting involved in their advocacy for migrants, please get in touch with Hattie Nicholas.

<http://www.medsin.org/crossingborders>

Facebook page: <https://www.facebook.com/crossingbordersuk>

•SKIP

This month SKIP are dedicating 2 training-packed days to prepare students who will be departing to work on their international projects this summer. Later in May, their "Training Old Trainers" weekend will also take place for further action!

<http://www.skipkids.org.uk>

Training days: <http://www.skipkids.org.uk/skip-training-dates-2015-16>

•YOUTH STOP AIDS

Youth Stop AIDS has just recently wrapped up their National speaker tour. From the top of Scotland to Wales to Parliaments in London, their team of inspirational youth gave some powerful talks. They even made a stop at Medsin's recent Global Health Conference in Bristol earlier this February, where they provided a very well received workshop. Part of this National Tour was also to highlight the "Missing Medicines campaign" which they have been work incredibly hard. For full information, please visit their Official website!

Affiliates Coordinator: Alex Peterson
Email: affiliates@medsin.org

It's been another eventful year for our affiliates. From training to conferences, new affiliation to international action and tours, we are excited to be sharing some recent successes and work. HAPPY and Crossing Borders are keen to recruit new members, whilst others are continuing their hard work on their long-term campaigns.

This month, we are sharing projects and events from Crossing Borders, HAPPY, Youth Stop AIDS, UAEM, Child.org and SKIP.

UPDATES: AFFILIATES



•HAPPY

HAPPY, our newest affiliate (a project aiming to reduce childhood obesity through education in schools), has lesson plans all ready to go and is hoping to find enthusiastic people to help them expand their work beyond Manchester! Get in touch with Emily Granger if you're interested in this work.

Email: emily.granger@student.manchester.ac.uk



Youth Stop AIDS website: <http://www.stopaids.org.uk>

Missing Medicines Campaign: <http://www.stopaids.org.uk/our-actions/missing-medicines/>

•UAEM

It's been another year of campaigns for Universities Allied for Essential Medicines (UAEM). Their annual "Access to Medicines" campaign focussed on pushing for a new biomedical Research and Development (R&D) agreement that aims to promote a research system that is based on global health needs. Coming up later this month, they will also be celebrating successes and further their work through their European Conference, which will be held in Berlin, Germany. <http://www.uaem.org>

R&D agreement petition: <https://uaem.wufoo.com/forms/make-medicines-for-people-not-for-profit/>



•CHILD.ORG

Child.org are having a fantastic year - they received a grant from Comic Relief for over £320k to expand their HealthStart program to 20 schools, in Kisumu County, Kenya. They've also developed an exciting project called Charity Concierge where volunteers get drinks, pitch tents, and provide other host services at festivals in exchange for donations - check out the links below to get involved!

<http://www.child.org>

Charity Concierge: <http://child.org/charity-concierge-2016>



UAEM



homed



CROSSING BORDERS
for health



CHILD
.ORG

Keen to get sharing about your success stories? Or are you interested in getting involved with any of our affiliates? Drop Alex an email!

affiliates@medsin.org

Regional Updates



Southwest Regional Update

Southwest Regional Coordinator:

Laurence Wright, Cardiff

There are currently two very active branches in the South West- Cardiff and Bristol. Both of which have hosted major national events in the last year; Cardiff hosted the Medsin Autumn Weekend and Bristol the Global Health Conference. Medsin Truro was officially affiliated as a branch at Medsin Autumn weekend in Cardiff and it is hoped that Swansea Medsin will be affiliated at the Spring General Assembly. In December, Plymouth hosted their first global health day, which was a great success, full of captivating workshops spanning issues from female genital mutilation and obstetric fistulae to mental health and stigma.

Northern Regional Update

Northern Regional Coordinator:

Clare Greenwood, Sheffield

There has been excellent work from Leeds, Newcastle, Hull/York and Sheffield on working together to represent medical students in the protests over the changes to the junior doctor contracts. From the stunt and collaborative planning at the conference, Northern branches were able to work together to publicise, educate and advocate, with many members attending protests.



Midlands Regional Update

Midlands Regional Coordinator:
Laura Myers, Leicester

Leicester hosted a charity dinner and auction in October, raising over £700 for several local and national charities. Meanwhile, the Keele branch is being reinvigorated by the enthusiastic president Grace. They hosted a screening of the documentary 'young, homeless, and fighting back' to raise awareness of local health inequities, which was followed by a sleep-out to raise money for Arch, a local women's refuge in North Staffordshire. Oxford have also just re-affiliated, so we are looking forward to them getting more involved in the network.



Branch spotlight: UCL

Ismini Panayotidis

Following the success of the National Global Health Conference that took place in March 2015 at UCL, this academic year our Medsin branch organised a South East regional conference to provide an opportunity for people to learn more about Medsin, international development and a multidisciplinary approach to global health.

Since our aim was to target as many people as possible regardless of their background informing them and inspiring them to get involved in global health-related matters, we arranged a wide range of plenaries employing a multidisciplinary angle. These involved discussions regarding gender differences and equality in a global health context, as well as discussions concerning the battle against infection that health-workers and policy-makers face daily particularly in conflict zones, and financial affairs such as how do health organisations operate, how they are regulated by the different policies and what is the ultimate goal of investment in the health sector.

The plenaries were complemented by a variety of workshops from inspiring student-led campaigns and organisations. Noteworthy was also our amazing catering by a group of refugee and migrant women who share their culinary delights with the local community. Overall, it was a day to remember; a day that gave us all of us the opportunity to learn how we can 'heal the world'.



NOTTINGHAM

Nottingham held a talk on the issues surrounding loneliness in the ageing population and how we can tackle it. They have another evening planned for March on the current refugee crisis, with a psychotherapist from the refugee council, vice chair of the Nottinghamshire refugee forum, and a lawyer from Medact to give a broad range of insights from people currently working with refugees.

BIRMINGHAM

Birmingham have put on a successful 'women in surgery' event, with an accomplished consultant paediatrician discussing how she managed a career and family life, and the history of women in surgery.

LEICESTER

Leicester hosted a charity dinner and auction raising over £700 for several local and national charities, and have teamed up with friends of MSF to host a mini-conference on neglected tropical diseases this weekend.



Branch spotlight: Cardiff

Kate Brennan

Global Health Student Network, as we are known in Cardiff, is a very new society, with this being only its second year in the running. Despite its youth, we have achieved a lot this year.

After hitting the freshers hard at the fairs and having a Give It A Go 'What is Global Health?' event, we started off the year with a refugee-themed Autumn term. We had a film screening, 'Hope not Hate' speaker event about the asylum system and refugee health, and a talk from a refugee doctor on her experiences of healthcare in Yemen and the UK. 2 Cardiff students also gave a talk on their experiences in Palestine as part of the ReCap project and taught us a bit about the conflict. It was a great theme as it is so topical and attracted students studying several different subjects.

A major event for us in Cardiff was the Medsin Autumn Weekend. Despite requiring a lot of organisation for our small committee, we loved welcoming Medsinners to Cardiff and thought it was a great weekend. Lots of us felt much more involved with Medsin afterwards.

Another achievement was our Christmas homeless backpack project. We advertised everywhere for donations and, with mince pies provided by Baking Soc, lots of students were involved in packing backpacks to be delivered to homeless people across Cardiff. In the end we made 70 backpacks, full of toiletries, food, clothes etc.

This term, a large group of us attended the amazing Bristol conference (where, I might add, we won the poster competition - yay!) and we have, as a result, gained new enthusiastic members. We gave a successful workshop on the SDGs, sharing what we'd learnt at the conference to others.

We have also recently collaborated with UAEM to welcome two men from Youth Stop AIDS who gave a really inspiring talk.

KEELE

Keele is currently being reinvigorated by Grace, who is a very enthusiastic president. They hosted a screening of the documentary 'young, homeless, and fighting back' to raise awareness of local health inequities, with a discussion afterwards. They then followed this up with a sleep-out to raise money for Arch, a local women's refuge in North Staffordshire.



Branch spotlight: Bristol

Bryony McPherson

Over one million migrants fled into Europe in 2015, dividing political parties and public opinion on how best to handle the influx of refugees. Bristol Medsin began 2015 by addressing how the health and welfare of those fleeing persecution are affected in our "Perspectives on the Refugee Crisis" speaker and fundraiser event.

We collaborated with Bristol Student Action for Refugees (STAR) and Friends of MSF to host a variety of speakers from different disciplines to discuss their views on the crisis. This included speakers from The Haven ("a 'first stop' clinic for newly arrived asylum seekers in Bristol"), Bristol Refugee Rights, Skipchen (discussing their solidarity trip to the Calais migrant camp) and a Greek national who told stories of what is really happening on Lesbos.

The event saw over 80 guests attend, sparking real passion in the speakers and raising funds for MSF in the process. We also hosted a "Medsin and its affiliates explained" and welcomed a number of new people to our committee. As part of their sustainable development series, Bristol Medsin collaborated with Engineers Without Borders Society to discuss the technological challenges in a Tanzanian hospital. Conor McGlacken, a former president of the society, spoke about his experience of working as an engineer there in "Hospital Technology in Developing Countries- no budget, no parts, no manual".

Possibly the biggest feat of Bristol Medsin was hosting the 2016 Global Health Conference, "Sustainable Development: Our roles in the goals". We greeted around 300 attendees from all over the UK to discuss six key themes: Partnership & People, Planet & Justice and Dignity & Prosperity. We've already had some great feedback about the range of speakers and our "Engage and Change" sessions and we hope the conference has created a legacy which inspires others to become more involved in Medsin.

Branch spotlight: Bart's and the London

Sarah Khavandi

With the final two events of our global health short course right around the corner, we cannot believe we are ALREADY looking back on a whole year of Medsin Barts.

As seems to be tradition here, our year started off with a rather topical freshers stunt where we set up 'border control' outside the freshers lectures where we handed out 'Passports to Medsin' to bring a flavour of the current refugee crisis to Barts. Luckily despite the potentially intimidation we signed up lots of new members and were happy to see new faces at our Global Health Short Course as well as a few familiar ones returning. We were happy to see that the Global Health Short Course has been popular up and down the country with many branches following suit! This year we saw not only did Sir Eldryd Parry share his experiences with us at our 'Future of Global Health' event but he is also now endorsing the GHC alongside Professor Parveen Kumar , which is very exciting and we are grateful for their continuos support and involvement.

Barts Medsin were proud to host and support a Training New Trainers (TNT) weekend this April for participants from across the Medsin and IFMSA networks. TNT is an internationally recognised event designed to give participants the skills they need to be fantastic leaders and empowering trainers in their committees, projects and campaigns; thus making Medsin's advocacy, education and action even more effective.

We piloted our first workshop as part of the Ethical Procurement in Health instalment of the short course, after members feedback saying that they wanted to hit the next level of engagement. It was fantastic to see our members getting involved and with so many Trainers on committee at Barts we are looking forward to introducing more workshops alongside our events next year, increasing opportunities and empowerment.

Finally, we are pleased to announce progress with the Fossil Fuel Divestment Campaign. This started off as an idea in one of our committee meetings and has now taken off thanks to the instrumental role of some of our committee members. The way things are going we may have some exciting news about a Fossil Free Medsin Branch to announce in the near future- watch this space!

Got something exciting
to share from your
branch? Get in touch at:
media@medsin.org

Current National Working groups (NWGs)

- Mental Health NWG
- Maternal & Child Health NWG
- Human Rights NWG
- Global Surgery NWG
- Ethical Procurement for Health NWG
- Agenda 2030 NWG



What is the function of a working group?

To “enact tangible change within Medsin and the wider world” by providing students with the opportunity to participate in real advocacy on selected issues. As such, all National Working Groups are different –different issues require different action!

Global Surgery Working Group

surgery@medsin.org

Leads: Mike Billingsley, Lauren Ng, Issy Marks

For the first time in history, you're more likely to be killed by a surgically-treatable condition than an infectious disease. With ~5 billion people worldwide having no recourse to surgical care, millions are risking their lives on the operating table. Global surgery is a field focused on relieving global inequality in access to surgery.

Medsin Global Surgery is a group run by students, focusing on research, advocacy and education in global surgery. Our ethos is to inspire the next generation of medical thinkers and global pioneers and engage them with the frontiers of global surgery. We've been working on a number of projects – the main ones being:

1. “BeyondBORDERS: The Future of Global Surgery” conference at RSM (April 9)

BeyondBORDERS is the UK's first nationwide student-run global surgery conference! Jointly organised by RSM, Lifebox & Medsin Global Surgery, this conference aims to introduce the next generation of clinicians to the opportunities and challenges of global surgery. Through keynote lectures, interactive workshops and networking opportunities - attendees will consider how to build their international career, develop new routes for advocacy, and provide educational tools to reach a larger audience.

2. Medsin-Lifebox Representative Scheme

We are excited to announce a new partnership between Lifebox Foundation and Medsin! Lifebox, an NGO founded by Atul Gawande, work to make surgery safer in low-resource countries, through appropriate equipment, training, research and professional partnerships. To engage medical student participation in global surgery, we have set-up a Representative Scheme. The Medsin-Lifebox representative will be responsible for organising events, advocacy efforts, and getting involved with Lifebox nationally - and globally! This will provide students with the opportunity to see first-hand the workings of an NGO and assist in work that is changing lives every day.

Contact surgery@medsin.org for more info - we are always looking for new, enthusiastic members!

100 days of the SDGs and getting involved in the Agenda2030 NWG

By Nathan Cantley & Agenda2030 Team

January 1st 2016 was not just the start of upholding a new set of new year's resolutions. It was also the start of the world using the next 15 years to work towards a set of sustainable development goals (SDGs) agreed upon at the end of September. Friday 8th April marks 100 days of the SDGs, so what has happened so far?

One major piece of the puzzle for the SDGs still yet to be agreed upon are the set of statistical indicators to be used to identify when countries and the world have met the 169 targets. The Inter-agency expert group within the UN Statistical Division have been holding dialogues over the past couple of months to try and pin down the final list of indicators. The process has been long and complex, with many stakeholders to please. Also, as the initial coalitions which helped the SDGs be created start to dissolve, new coalitions including "Together2030" and "Youth Power" have been forming to help implement the SDGs.

Locally, Medsin-Bristol held the 2016 Global Health Conference at the end of February with the theme 'Our Role in the Goals', exploring the potential role of young people in implementing the SDGs. To make sense of the goals and targets, the weekend was divided into 6 key themes: Partnership & People, Planet & Justice, Dignity & Prosperity. Each plenary was followed by 'Engage & Change' sessions, giving students the opportunity to 'Engage' with a specific topic relating to the SDGs as well as gain the skills needed to make

Agenda 2030 Working Group

post2015@medsin.org

Lead: Nathan Cantley

The Global Health Conference 2016 at Bristol aimed to be the start of delegates journey into the SDGs. The Medsin 'Agenda 2030 National Working Group' has been relaunched to keep up the momentum from the conference and provide students with a voice in this crucial area of international policy. Over the next year we are hoping to join other organisations in the fight to make sure the SDGs are realised, as well as start our own campaigns on issues relating to health. We are also recruiting people to join the team in specific roles such as social media, creating education resources and developing innovative websites to help young people be part of the monitoring process. Email post2015@medsin.org or find the NWG on facebook for details of how to get involved in Medsin's SDG work. We look forward to welcoming you!

Maternal & Child Health Working Group

mch@medsin.org

Leads: Lotte Elton, Lisa Murphy

The Maternal and Child Health National Working Group, chaired by Lisa Murphy and Lotte Elton, has had a busy 18 months! We began in October 2014 by running a stream entitled 'A Safe Haven for Health?' at the Changing Cities conference, which focussed on the experiences and health outcomes of women and child refugees and asylum seekers, including female genital mutilation/cutting, child mental health and barriers to accessing healthcare. At the most recent Global Health Conference in February 2016, the group ran another workshop session - 'Stillbirths: The Unfinished Agenda' discussed the global burden of stillbirth and outlined why stillbirth has been forgotten in many global health metrics, as well as training participants in stillbirth advocacy. In April 2015 at the Spring General Assembly the MCH NWG policy statement on Access to Legal and Safe Abortion in the UK was passed, outlining Medsin's support for the right of all women in the UK to access a legal and safe termination of pregnancy free of harassment and discrimination. Since then, the NWG has been working on a research project looking at the attitudes of undergraduate medical students towards abortion education. This involved surveying over 100 students from across the UK on the teaching they currently receive on abortion, their experiences of this teaching, and their ideas for how abortion teaching could be improved. This has culminated in a research paper which they hope to publish in a medical education journal later this year, and this research has been accepted for an oral presentation at the Royal College of Obstetricians and Gynaecologists' World Congress in June.

The abstract title is "Abortion in undergraduate medical education: a survey of UK medical students' attitudes". Accepted for oral presentation at the RCOG World Congress in Birmingham in June. We've also sent it off to AMEE and should be hearing back soon-ish!

External partnerships

NWGs are well-placed to build relationships with external partners such as NGOs. Examples of external partnerships from previous years include:

--> *Global Surgery NWG and Lifebox*

--> *Maternal and Child Health NWG and Medical Students for Choice*

Want to set-up your own?

The Policy and Advocacy Director (PAD) is always happy help to guide you through. There is also a guide dedicated to the whole process available to get you started.

Drop Lotte, our current PAD an email for more information, at: pad@medsin.org

Other useful contact details:

National Director: director@medsin.org

Director of branch Affairs: branches@medsin.org

National Committee: committee@medsin.org

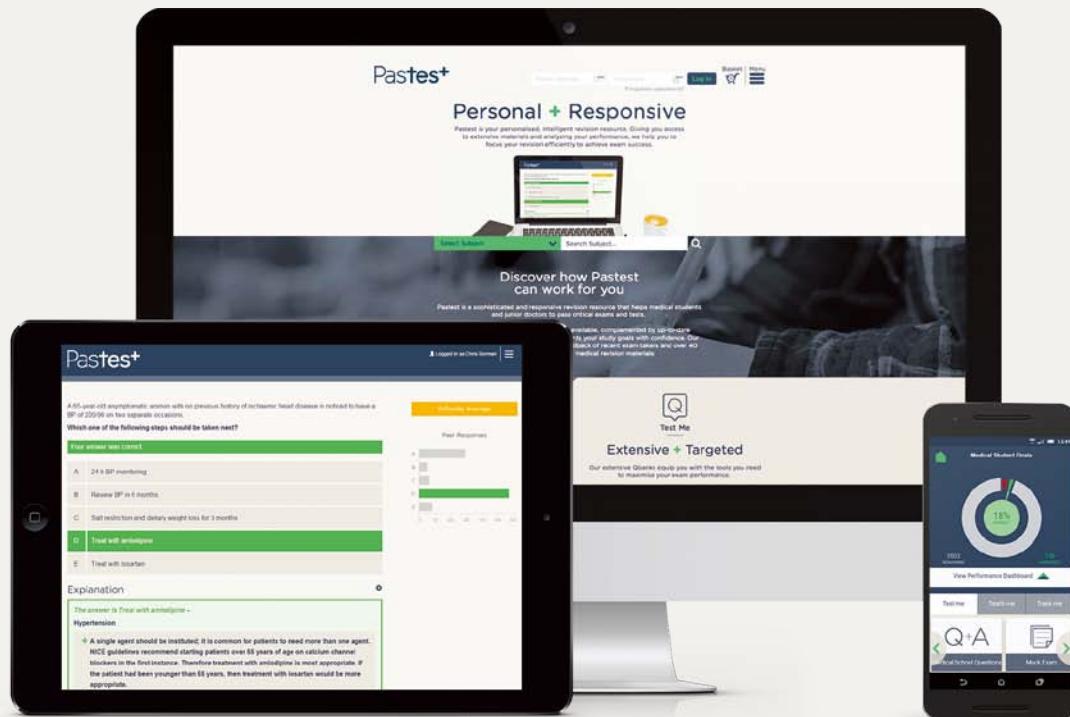
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LOVE, MEDSIN



"Medsin is a unique student network full of truly inspirational people..."



"...becoming involved with Medsin is honestly one of the best things I have done at university..."

"...the opportunity to meet with new and old friends from across the network, sharing experiences, making memories and reinvigorating our shared passion..."



Medsin is a great way to meet people with a shared mindset, and actually work together to make a difference.

...It was the Newcastle GHC which really made me want to make the Gender Equity Campaign something that would make people rethink and question many of our societal norms. This time last year, the campaign had just launched and now it hosts regular events including Yoga Workshops! Seeing the campaign led this year by the fantastic Christen and Rebecca, with great events such as the recent 'Empowered Expression,' is testament to how Medsin is a sustainable movement which is continually growing and evolving."

Sujitha Selvarajah, UCL

Our Medsin Journeys

How did you get involved with Medsin? What inspires you? What motivates you?

Join some of our wonderful members and friends as they take a look on their own journeys!

'Having never attended a Medsin event before, I was invited to travel all the way to Edinburgh to participate in Spring General Assembly 2015. The journey took me all day, and I was sitting in a car with students who had been to lots of Medsin events before. They were all talking about what was going to be discussed in the weekend and I felt so unaware of all the issues that were coming up. They tried to tell me about the basic structure of what was going to happen, but really the point that kept coming up was "you'll see when we get there"...

"Medsin is a unique student network full of truly inspirational people. These people seem amazing, and then you realise that they are in the same year as you, or perhaps just the year above. It makes you realise that you have much more potential than you ever thought you had and that it's not difficult at all to get involved in impressive and important schemes. For example, I remember at SGA 2015 feeling so surprised that medical students can participate in worldwide exchanges. Now, a year on, I am starting to bring the exchanges scheme to my own university, Leeds. Not only this, but I am part of the March Meeting delegation that are going to the IFMSA meeting in Malta. This opportunity was completely unknown to me only a year ago, but now I am actually attending an international conference and helping to influence the global health world."

"...Becoming involved with Medsin is honestly one of the best things I have done at university - the opportunities open to me, people I have met and ideas I have been exposed to have really changed my whole perspective on health and my future career path. Becoming more trained and confident in speaking about global health issues and organising events are such valuable skills I have learnt and I will continue to use them."

Lizzy Morgan, Leeds

'Spring General Assembly was the first time I felt properly connected to Medsin as a national network and allowed me to truly appreciate how incredible each branch and affiliate is working toward our shared vision. The inner workings of Medsin are far more complex than I'd ever realised and it made me feel proud to be part of such a well-governed organisation – that is completely student run!

I had no idea what policy, bylaws and governance were and how integral they were to the smooth running Medsin; they allow us to have a recognised voice in the international community. Throughout the whole weekend we vote on various submissions that shape the network, elect our new national committee and undergo training on interesting and relevant global health issues. The best part of SGA is the opportunity to meet with new and old friends from across the network, sharing experiences, making memories and reinvigorating our shared passion for 'a fair and just world in which equity in health is a reality for all'.'

Florence Mutlow, Leeds

'Medsin for me was where I first began to appreciate how it is possible to make changes that can have a widespread effect on the health of a population. I found like-minded, friendly people who were passionate about understanding the complex systems that affect health on both a global and local level, but also importantly were willing to advocate and act on this knowledge on behalf of those who have a quieter voice in society. I've worked with my branch, the national committee and the agenda committee over the last 3 years and have loved every second of it. One of the best bits of Medsin is how democratic we are as an organisation. Twice a year, we hold general assemblies to elect new committee members, vote on policy and decide the direction of the network. These weekends are always great fun and always leave you feeling inspired to make a difference to your local community as well as the world.'

Owen Thomas, Hull-York Medical School

Natalie May

Former Secretary

The following photos are of Natalie teaching in Fiji, Helicopter Underwater Escape Training (HUET), speaking at a conference in Cork and graduating from induction training.

Onwards and beyond! For our very first issue of "The Advocate", we thought of catching up with some of our former colleagues. We were delighted to hear from Natalie, Elly, Beth, Johnny, Joel and Karthick!



I finished my training in Emergency Medicine with Subspecialty Paediatric Emergency Medicine in 2014 and worked as a locum consultant in Manchester and Oxford until December 2015, when I left the UK for Australia. I am currently in Sydney working as a Registrar in Prehospital and Retrieval Medicine for the New South Wales Ambulance Service (Greater Sydney Area HEMS) which is a fantastic and challenging job, bringing clinicians to trauma patients on scene across New South Wales to perform life, limb and sight saving interventions where needed.

As former Training Director, I've realised a passion for teaching and education; I completed a postgraduate certificate in workplace-based medical education while I was training and am active in the world of Free Open Access Medical Education (FOAM), contributing to the St Emlyn's blog and podcast as well as other initiatives such as ITeachEM and PEMLit.org, all of which strive to improve patient care internationally through conversation between clinicians, without paywalls. Many of the training sessions I gave through Medsin and IFMSA have inspired blogposts and podcasts - they certainly set me up for my career - and I've been privileged to speak at international conferences around the world (including on Public Health in the Emergency Department at the Royal College of Emergency Medicine's conference in September 2015) and to teach Emergency Medicine to registrars in Fiji!

I am still in contact with lots of my wonderful Medsin friends - Medsin has been a great platform for entering a medical career with a clear idea of what I can do and where I want to go in life.

The following photos are of Natalie teaching in Fiji, Helicopter Underwater Escape Training (HUET), speaking at a conference in Cork and graduating from induction training.

Have something you would like to share?
Drop us a message on:
alumni@medsin.org

Joel Burton

Former Training Director

Joel helped with the TNTs in 2012-14 (slightly biased but without training Medsin wouldn't be able to effectively undertake its other activities!) Am now working as an Emergency Medicine registrar in Edinburgh.

Elly Pilavachi

Former National Coordinator

After being National Coordinator for Medsin I continued to work more in medico-politics, becoming the co-chair of the BMA's medical students committee. During that year the areas I particularly concentrated on were widening participation, the financial impact of increased fees, the campaign against the Health and Social Care Act, changes to pension contributions and general education and training of medical students and junior doctors. I took particular care to try and nourish the relationship between the BMA's MSC and Medsin, as there were several shared areas of work.

I then continued to work within the BMA moving into the Junior Doctors Committee once I graduated, and joined the BMA's Equality and Inclusion committee where I was deputy chair for year; working on increasing the diversity of BMA leadership, contributing to the introduction of a mentoring programme, leadership training and committee induction.



Elly, speaking on behalf of BMA at a recent talk in Cardiff.

Johnny Currie

Former President

Jonny is undergoing GP and Public health training in Liverpool with a 'little one/radical in the making' on the way! He is looking forward to seeing what Medact and other comrades in the North West and elsewhere are looking to do!

Beth Thomas

Former Training Director

Beth will be attending the youth delegation to the world health summit in May and running a Medsin TNT in April. She is standing in the March elections for BMA council, to try to get a vote to more junior doctors (currently the most junior member is a ST3). Additionally she presented the global health education findings at the AMEE conference in September, chaired the Medsin autumn weekend, and is currently advocating to improve patient safety in her hospital.

Karthick Selvakumar

Former Secretary

Hey all! My name is Karthick. I'm a medsinner. Through and through from 1st year of medical school, from the first day till present (graduated working as a doctor). Not only did Medsin motivate me to do my intercalated BSc in international health but my involvement with society has completely changed my life. I was willing to take more risks and explore global health more after my involvement with medsin: I did my elective in Nepal and was there during the earthquake - seeing first hand the effect off a natural disaster on a health system! I was quite lucky to get out alive.

Medicine is huge field - being part of medsin has taught me that the bigger picture is always ever so beautiful. Whilst I work currently in the respiratory department (after having done my first rotation in A&E), I've managed to find time to volunteer for Nightsafe, a local charity for 16-24 year old young people that are homeless/ at risk of being homeless and Samaritans, a mental health, suicide prevention charity. My experience with medsin has taught me that it's always important to step out of my comfort zone to see the world through another person's perspective and that's going to stay with me for the whole of my life.

Having understood the importance of "educate, advocate and act" throughout my time at medschool with my involvement with medsin, I've now helped set up quality improvement committee in my hospital and am leading the committee to make change in the grass roots level. I'm also a 'lessons learnt' lead - a project that aims to learn from never events/ near misses - where a patient's safety has been/ close to being compromised - such that change is made where it needs to be to help improve care.

The most exciting thing that I've been to post graduation is going to Medsin Global Health Conference on sustainable development goals this weekend. I've decided after attending it over the weekend that I am going to try and write up some workshops that I can deliver at my local hospital to raise awareness about the SDGs and their importance. Having been involved with medsin locally, regionally and nationally, I strongly urge every one of you reading this, whether student or not, whether you know anything about global health or not - if you're incredibly passionate or just merely curious about some of the global health issues that exist - get involved!

Medsin is a truly a light in the dark for all those who want to carry the torch of change, to create a world in which equity in health is a reality for all. In the immortal words of Mahatma Gandhi, "Be the change you want to see in the world".

SPOTLIGHT:

From the Lancet to World Congress: National Working Groups lead the way in research.

You can publish with Medsin! Whether that is news to you or not, you will be excited to know that some of the incredible work by our network are recognised at the highest levels in research and academia.

For our first research corner, we are proud to be showcasing work from two of our fantastic National Working Groups: Global Surgery and Material & Child Health.

Future Leaders: Our Global Surgery National Working Group have written an excellent piece of discussion, which was published in the Lancet in November last year [1]. It raised concerns and prompted thoughts on the application of surgery at a global level. Their piece highlighted the inequalities and areas for better communications, as well as putting forward recommendations of how to effectively support the next generation of surgical leaders in the world.

Earlier this month, the group reflected on the future of global surgery further by hosting the world's first ever student-run global surgery conference, which was held at the prestigious Royal Society of Medicine. It received excellent feedback and imparted inspiration to students and professionals across the world.

Raising awareness: Meanwhile, the sensitive topic of abortion was explored by our Maternal and Child Health National Working Group, led by Lotte Elton and Lisa Murphy, who are also on this year's National Committee. They conducted a study into the attitudes of medical students' on abortion in undergraduate medical education [2]. Their work was recently accepted for oral presentation at the upcoming Royal College of Obstetricians and Gynaecologists' World Congress, taking place later this year in June.

Marks, IH. Patel, SB. Holmer, H. Billingsley, ML. Philipo, GS. Letter to Editor: "Letter from the future surgeons of 2030". Lancet. 2015 Nov. 14;386(10007):1942. doi: 10.1016/S0140-6736(15)00829-6.

Lotte Elton and Lisa Murphy. Abortion in undergraduate medical education: a survey of UK medical students' attitudes". RCOG World Congress in Birmingham in June 2016.

Have you published any research through your work with Medsin or are you interested in learning more research skills?

Drop us an email at research@medsin.org.

We would love to hear about what you are passionate about, and what you have been up to!





SUPPORT US?

As a student charity, we rely on generous supporters for the development and expansion of Medsin, to further our work and maximise our impact and we really value your support to enable us to achieve this. Your contributions would not only widen access for students to attend national and international Medsin events, but also mean that our student leaders don't have to pay to volunteer. The following priorities show exactly where your donations would go, and if you have a particular project from the list below that you would like your donation to contribute to, or if you have any other queries, please email partners@medsin.org

New Priorities:

A new website (£1500-3000 one-off)
Costs of Youth Delegate to World Health Assembly (£3000)
Branch travel subsidies for distant meetings

Ongoing Priorities:

National Director salary/expenses (c. £20k a year)
National committee travel expenses to meetings (£6000 a year)
International costs; IFMSA fee, travel for delegation lead (£3500)
Please follow this link to show your support by giving a one-off or regular donation to Medsin.



Medsin-UK, Global Health Offices, Weston Education Centre, Denmark Hill, SE5 9RJ

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Medsin-UK is a student network and registered charity tackling local and global health inequalities through education, advocacy and community social action. Our work is only possible through the continued support of charitable donors. Please visit our website to find out more.

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