

SfGH 2026-2030 Strategic Plan

SfGH2030: Engage. Educate. Empower.

Adopted

Table of Contents

Acknowledgement.....	1
1. Context and Strategic Review.....	2
1.1. National and Global Imperatives for Action.....	2
1.2. Background of the Strategy 2022-2026.....	3
1.3. The Strategic Planning Project (2026-2030).....	3
1.4. Strategic Review.....	3
2. SfGH2030: Engage. Educate. Empower.....	4
2.1. Vision.....	4
2.2. Mission.....	4
2.3. Unique Value Proposition.....	5
2.4. Goal.....	5
2.5. Strategic Priorities.....	5
2.6. Strategic Enablers.....	5
2.7. Strategic Framework.....	6
3. Strategy Implementation Tactics.....	6
3.1. Priority 1: Championing Health Equity and Institutionalising Youth Engagement.....	6
3.2. Priority 2: Upscaling Members' Education and Capacity Building.....	8
3.3. Enabler 1: Sustainable Governance and Operations.....	9
3.4. Enabler 2: Membership Engagement and Network Strengthening.....	11
3.5. Enabler 3: Meaningfully Engaging and Strengthening Partnerships.....	13
4. Monitoring, Evaluation, Accountability and Learning.....	14
4.1. Strategic Priorities.....	16
4.2. Strategic Enablers.....	18
References.....	24

Acknowledgement

Author: Mahmood Fakhri Abdulameer Al-Hamody, Strategy Consultant

The Monitoring and Evaluation (M&E) framework structure was adapted from the M&E framework template by tools4dev, accessible through [this link](#).

1. Context and Strategic Review

1.1. National and Global Imperatives for Action

The global health architecture (GHA) is currently facing unprecedented strain. Since its 2022 peak, official development assistance (ODA) has been shrinking with significant cuts in 2025. Combined with escalating geopolitical conflicts, fluctuating economies and volatile global energy prices, this has put the global health multilateral order under immense pressure. (1, 2) These compounding financial and political crises threaten to reverse decades of hard-won global health successes. (2)

Within the United Kingdom, these global shifts intersect with acute domestic challenges. The national economy has recently flatlined, exacerbating already profound economic inequalities and deepening the cost-of-living crisis. (1, 3) The public health and social fabric are visibly fracturing. The UK has increasingly been labelled the "sick person" of the wealthy world due to rising preventable deaths from drugs and violence, (4) and the recent, alarming loss of the country's measles elimination status represents a major regression for public health domestically. (5, 6) Moreover, the UK government is downsizing its international commitments, recently axing flagship global health projects while navigating deeply polarised, hostile domestic debates surrounding immigration and international development. (7, 8)

The National Health Service (NHS) is in "critical condition", faced with ballooning waiting lists for hospital and community care, demoralised staff, and lagging outcomes on major killers like cancer. (9) In response, the government has laid out three radical shifts to reimagine the health service by 2035: moving from hospital to community, transitioning from analogue to digital, and shifting from sickness to prevention. (9) Furthermore, the lived reality for patients navigating this fractured system underscores a deepening crisis of health equity. Recent data from Healthwatch in 2026 reveals that persistent barriers to access across primary, elective, mental, and social care are actively worsening health outcomes and fueling a dangerous shift toward a two-tier healthcare system. (10) Between 2023 and 2025, reliance on private healthcare nearly doubled to 16%, driven by excessive waiting times that take a severe toll on the physical, mental, and financial well-being of those left behind. (10) This structural failure disproportionately impacts marginalised communities, including low-income households, ethnic minorities, and disabled individuals, who face compounding inequalities. With administrative challenges further eroding public trust, the foundational principle of a universal NHS is under severe threat, making the defence of equitable health access more urgent than ever.

Yet, amid these challenges, many critical windows for influence are approaching. The UK prepares to host the G20 in 2027, the implementation of the NHS's 10 Year Health Plan for England, a general election upcoming, global health and multilateral reform negotiations likely to unfold in 2026 and 2027, and the Sustainable Development Goals approach their 2030 target year. Hence, the voices of young people and future health professionals must not be sidelined.

It is within this challenging and rapidly evolving context that we, in Students for Global Health (SfGH), launch our 2026-2030 Strategic Plan: "Engage. Educate. Empower".

1.2. Background of the Strategy 2022-2026

The Students for Global Health (SfGH) 2022-2026 Strategy was developed to guide the network through a critical period of rebuilding following the COVID-19 pandemic. Titled "A Fair and Just World," its primary vision was enshrined in the organisational vision of SfGH: to establish health equity as a reality for all. The strategy was structured around three core Strategic Priorities (SPs) and one Underpinning Principle:

- SP1: Policy, Advocacy, and Campaigning (PAC): Aiming to position the network at the forefront of global health campaigning, with a focus on intersectional topics such as Climate Change, Non-Communicable Diseases (NCDs), and Economic Disparities.
- SP2: Global Health Education (GHE): Focused on re-engaging the student body through capacity building, decentralised regional conferences, accredited training, and addressing curriculum gaps in UK medical schools.
- SP3: Engagement and Partnership: Designed to foster strategic relationships with global health, social justice, and human rights partners to amplify the student voice.
- Underpinning Principle: Governance and Leadership: Aiming to optimise organisational processes, reduce loss of institutional memory through structured handovers, and ensure financial sustainability beyond restricted grants.

Implementation relied on the involvement of the National Committee (NC), Trustees and Branches. The strategy period (2022-2026) was funded primarily through a restricted grant from the Bill & Melinda Gates Foundation.

1.3. The Strategic Planning Project (2026-2030)

As the 2022-2026 strategy approaches its conclusion, SfGH initiated a comprehensive strategic review in late 2025 to develop the Students for Global Health Strategy for 2026-2030. This project serves four purposes: to conduct an end-of-project evaluation of the 2022–2026 strategy, to review SfGH's governance in light of its recent growth and evolving context, to identify strategic priority areas for the new 2026-2030 strategy and to assess its resource and financial implications. The project is managed by an external consultant and overseen by the SfGH National Director and Coordinator.

1.4. Strategic Review

The evaluation utilised a mixed-methods approach involving interviews, surveys, and a retrospective logic model, covering activities from August 2022 to December 2025. Overall, SfGH's performance on the strategy during this period is concluded to be approaching expectations. In Strategic Priority 1 (Policy, Advocacy and Campaigning), after a slow start, momentum accelerated significantly in 2023/24 and 2024/25, achieving tangible results through Parliamentary Days of Action and numerous campaigns. However, not all proposed outcomes were met. In Strategic Priorities 2 (GHE and Re-Engaging the Student Body) and 3 (Engagement and Partnerships), steady progress was noted, and specific outputs like the Sub-Regional Training (SRT) and new MoUs were successfully achieved. However, effectiveness was rated below expectations due to, among others, low general engagement,

poor alumni engagement, and a lack of systematic documentation. Finally, in the Underpinning Principle (Governance Structure), organisational culture and structural expansion improved (meeting expectations for the Process criteria), but effectiveness was undermined by institutional memory gaps and the absence of a Monitoring and Evaluation (M&E) framework, leaving the network unable to evidence its impact.

The strategic review identified eight critical findings regarding the organisation's operations and strategy implementation:

- Members and Branch engagement is arguably the most cited operational challenge facing SfGH. There is a profound gap between the National Committee (NC), local branches and general members. Some interviews suggest that this issue may be due to the NC being perceived as an "abstract" and "far" entity by branches and students, and national opportunities fail to effectively reach members.
- There is a profound lack of awareness about the 2022-26 strategy across the National Committee (NC) and branches. Many reported not reading the document or finding it inaccessible, leading to implementation gaps.
- A lack of robust institutional memory processes is evident. New committees often start from scratch annually, wasting time reinventing resources due to the absence of a standardised national handover system and institutional memory system.
- The absence of a formal Monitoring and Evaluation (M&E) framework undermines the documentation of SfGH's impact and results in SfGH measuring success by "outputs" (e.g., holding an event) rather than "outcomes" (impact). Consequently, strategic effectiveness is very hard to measure due to an inability to evidence change.
- The current functional division of the NC (e.g., Policy and Advocacy, Partnerships, Education, etc) creates inefficiency and isolation. There is a strong consensus for shifting toward thematic divisions (whether in the form of national working groups, national officers or other mechanisms) to pool resources and allow members to work on specific passions rather than abstract administrative functions.
- The paid Coordinator acts as a vital "conduit" for stability but has become an operational crutch. This reliance creates a single point of dependence and hinders student autonomy, with institutional memory often tied to the individual rather than the structure.

2. SfGH2030: Engage. Educate. Empower.

2.1. Vision

A fair and just world in which equity in health is a reality for all.

2.2. Mission

To create a network of students empowered to effect tangible social and political change in health on a local, national and global level through education, advocacy and community action.

2.3. Unique Value Proposition

We are a "bridge" organisation, offering professional simulation and meaningful access while retaining the authenticity of a student movement.

2.4. Goal

By 2030, SfGH will be an established champion for health equity, a reference proponent for institutionalising youth engagement in decision-making, and an empowering space for its members by strengthening governance and operations, engaging the network and grassroots action, and leveraging strategic partnerships.

2.5. Strategic Priorities

Priority 1: Championing Health Equity and Institutionalising Youth Engagement

We will be the leading student voice for health equity in the UK and the reference proponent for institutionalising youth engagement in national decision-making by mainstreaming our policy, advocacy and campaigning efforts.

Priority 2: Upscaling Members' Education and Capacity Building

We will scale up our global health education and capacity building to empower our branches and members with the knowledge, skills and resources to take action on pertinent "glocal"¹ health issues and to empower their peers within the network and outside.

2.6. Strategic Enablers

Enabler 1: Sustainable Governance and Operations

We will optimise our governance and operations by building the National Committee's operational autonomy, moving from functional to thematic operations, sustaining institutional memory, documenting the network's impact and diversifying income sources.

Enabler 2: Membership Engagement and Network Strengthening

We will strengthen our network, fostering belonging and a cohesive "One SfGH" identity across the local (Branches and individual members) and national (National Committee) levels, through efficient communication, decentralising support to branches through regions, expanding recruitment to non-medical health disciplines and leveraging our alumni.

Enabler 3: Meaningfully Engaging and Strengthening Partnerships

We will expand our engagement and relations with local decision-makers and stakeholders, upholding the principle of meaningful engagement in the process. We will also leverage our IFMSA membership to collaborate with and learn from other student associations worldwide and to provide unique intercultural, training and advocacy opportunities to our members.

¹ Glocal: Global and local.

2.7. Strategic Framework

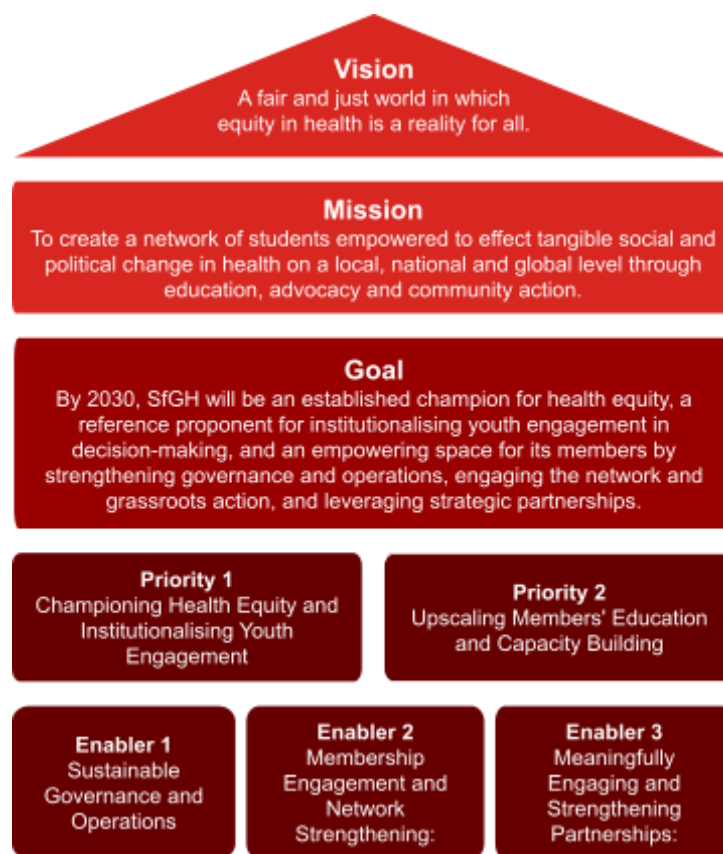


Figure 1: SfGH 2026-30 Strategic Framework

3. Strategy Implementation Tactics

In this section, the Strategy document outlines how tactics will be applied to deliver the vision, mission, goal and strategic priorities and enablers as set out above. These work tactics are building blocks of SfGH's 2026-30 Strategic Plan. They are not meant to be restrictive or static. Rather, they are meant to provide a basis for future detailed strategy implementation planning and may be modified as deemed relevant by the National Committees. The NC may decide where such modifications might be necessary, and must update the Board of Trustees and Branches about them. Finally, changes to the strategy objectives may be made in extreme circumstances where their achievement is no longer feasible. Such changes must be approved by the Board of Trustees, ideally upon input from Branches.

3.1. Priority 1: Championing Health Equity and Institutionalising Youth Engagement

Students for Global Health will:

- **Strengthen our policy, advocacy and campaigning planning and work**, including by organising dedicated time for annual policy and advocacy planning at the first National Committee (NC) Meeting of the term, and ensuring interdisciplinary planning among NC members. Such a planning session(s) should end with at least one concrete action point

for each committee member in their respective areas to work and develop, with deadlines given. Furthermore, the planning should be followed up on at subsequent NC meetings to ensure implementation and monitor progress.

- **Shift our policy, advocacy and campaigning work from one-off campaigns to multi-year thematic advocacy programmes/projects** (e.g. women's health, migrant and refugee health, youth participation), ensuring sustained engagement, reducing duplication year-to-year, and making SfGH's advocacy more accessible for branch members, credible and impactful. These projects should include defined policy goals, mapping of relevant stakeholders and decision-makers, and a clear theory of change and success indicators.
- **Leverage expertise in our networks through supporters or alumni** (professors, researchers, professionals or policy makers) to strengthen our policy, advocacy and campaigning work through their insights and to collaborate in delivering advocacy goals.
- **Diversify our strategies to meaningfully engage individual members in national advocacy work**, including by providing concrete opportunities for branches or individuals to opt into discrete pieces of work (e.g. developing a briefing, consultation response, or campaign output) through small, time-limited groups that allow different levels of involvement, depending on time and confidence (e.g. National Working Groups, and a shorter small working groups at regional/branch level)
- **Empower the National Committee and branches with the tools and skills to mobilise on nationally agreed advocacy priorities** (defined based on the policies and thematic focus areas), including through trainings, adaptable templates (e.g. advocacy letters/emails, campaign plans, social media posts), policy briefs on core priorities (one- or two-pagers) and through developing a centralised, accessible advocacy resource hub, with parallel national and branch-facing components. The latter could include a shared national advocacy folder containing the templates and tools suggested above, as well as clear signposting to training, support, and points of contact, and documentation mechanisms to capture lessons learned, on impact and follow-up to support continuity, learning, and more distributed engagement in advocacy work.
- **Increase its engagement with international and European global health decision-making spaces and policy forums** (e.g. Commission on the Status of Women, World Health Assembly, World Health Summit, WHO EURO Regional Committee, European Union and Commission), in close collaboration with the IFMSA and its National Member Organisations.
- **Campaign and lobby for youth representation** as part of official UK delegations to UN, WHO and other multilateral meetings, including through the establishment of a National Youth Delegate Programme.
- **Strengthen our online presence and information accessibility**, including by improving our social media presence across all major platforms to increase engagement and visibility of SfGH's work, actively monitoring engagement, utilising online platforms to engage with other organisations, mainstreaming messaging across all channels, and

strategically utilising platforms according to the target audience. Furthermore, this could also be achieved by improving and maintaining our website, including by ensuring human resources dedicated to the website and its maintenance (e.g. PR&C director, national assistant or outsourcing pro-bono services).

- **Ensure all our operations and advocacy work are guided by human rights, health equity and decolonial considerations**, including in activities planning, guiding social media messaging, policy and advocacy messaging, and in engaging in decision-making processes. This could be supported by developing an anti-oppression and participative framework to include young people's lived experience of inequity.

3.2. Priority 2: Upscaling Members' Education and Capacity Building

Students for Global Health will:

- **Deliver branch-targeted capacity building**, including organising a training, in-person or online, for branches at the start of an academic year for new committee members, and develop a system to promote and track continued branch members' involvement. This opportunity could be used to relay the most crucial skills in project management, organisational management, advocacy and campaigning. These efforts facilitate bridging the knowledge gap, eliminating barriers between branches and the National Committee, facilitating networking and collaboration between branches, and delivering a basic skillset to be utilised for projects/events back at the branch level.
- **Develop a standardised, asynchronous competency module for the National Committee, branches and members**, including by developing a set of pre-recorded, short sessions, creating standardised presentations on core competencies (topics and skills), and engaging NC members, alumni and experts in designing the competency module. This would ensure that everyone has a basic understanding of knowledge and skills essential for the operation of SfGH and the professional development of our members (e.g. a basic concept of global health, case studies, policy and advocacy, project management, decolonial practices, positionality). These are better delivered in regional workshops in person by NC members and experts.
- **Digitalise access to capacity building and facilitate flexible upskilling**, including by establishing a dedicated training portal on the website with asynchronous modules for NC members and the wider student membership, or establishing a Google Drive/Classroom of structured, asynchronous training. These online hubs could also allow the organisation of online 'education' activities (webinars, short courses, sessions, and discussion spaces) more regularly (e.g. once a month on a set day/date), addressing a variety of topics while aligning with the work of the branch or thematic priorities of that year. Moreover, this could also be achieved by establishing a comprehensive, accessible digital capacity building resources centre to facilitate asynchronous professional development, including a continuously updated directory of recommended resources (e.g. case studies, articles, reports, etc.) and toolkits accessible via the website and social media channels.

- **Upscale our network's capacity for peer-to-peer training and facilitation**, including by institutionalising the annual delivery of an IFMSA SRT event with inclusive organising committee recruitment and targeted domestic participation, and by embedding dedicated, national 'Train the Trainer' and facilitation and soft skills sessions into the core programming of national events. This could also be supported by establishing a national trainers database to keep track of those who are IFMSA qualified, and expect trainers to contribute to the SfGH network by committing to delivering a set number of hours of sessions per year, adding up to many hours of sessions and workshops being delivered by different trainers throughout the year.
- **Leverage our IFMSA membership to strengthen our human resources**, including by hosting SRTs or online workshops to train its members and have more IFMSA-qualified trainers available to build and spread capacity throughout the network, or by collaborating with other NMOs to host training or exchange capacity building resources (materials and human resources).
- **Facilitate and support horizontal knowledge exchange and collective learning across branches**, including by establishing regular, cross-branch forums (facilitated by regional coordinators) that enable the peer-to-peer sharing of best practices and successful initiatives, and by organising optional drop-in sessions/calls immediately following committee handovers to build community without hierarchical pressure.
- **Incentivise member engagement in national events and capacity-building activities**, including by establishing means to support their professional portfolio development through institutionalising a formal certification/recognition system, including issuing credentials for individual workshop attendance and distinct accreditation for the completion of the comprehensive "Core Global Health Training" curriculum. This could also be achieved by exploring means to subsidise members attending national events from geographically distant regions, or those attending IFMSA's pre-GA training, SRTs, or National Officer weekends, including through seeking discounts from travel agencies and transport lines (e.g. airlines, bus companies).
- **Raise awareness about career pathways in global health**, including by running panels and mentorship spaces highlighting diverse routes into global health (e.g. policy, public health, humanitarian, research, media), especially showcasing professionals from the Global South, marginalised, and underrepresented UK backgrounds.

3.3. Enabler 1: Sustainable Governance and Operations

Students for Global Health will:

- **Strengthen our work planning, reporting and strategic review**, including by:
 - Implementing an annual work planning (AWP) system for the National Committee, including creating a standardised "annual working plan" document, building the capacity of NC members on planning, and engaging Trustees in providing guidance and feedback (e.g. through regular reports to the trustees on the AWP).

- Institutionalising a comprehensive MEAL (Monitoring, Evaluation, Accountability, and Learning) framework and tracking system that defines clear, core deliverables and measurable metrics, such as attendance, engagement, satisfaction and policy outputs, and mandates regular National Committee reflection sessions to synthesise data into generalised lessons learned for reporting and strategic improvement.
- Institutionalising a cycle of reporting and strategic review (e.g. aligned with the SfGH term or academic calendar) to enhance accountability and impact documentation, including by publishing quarterly NC reports, publishing annual impact reports, and implementing thematic and strategic reporting to track individual contributions towards broader organisational goals rather than purely functional tasks. Annual reporting of branch committees to the NC should also be considered to ensure the documentation of our impact across the organisation.
- **Strengthen our institutional memory and operational continuity**, including by:
 - Institutionalising robust and transparent handover planning to prioritise long-term strategic stability, including by mandating a two-month overlap period for National Committee transitions where incoming and outgoing members collaborate to ensure comprehensive skills transfer and operational continuity. The Ex-officio Trustee should be an integral part of the handover process.
 - Establishing a system for institutional memory and knowledge management, including reorganising digital infrastructure (e.g. Google Drive) for enhanced usability, enforcing clear documentation and archiving policies with mandatory pre-term training, and integrating committee members into operational tasks to foster continuity and reduce the knowledge turnover.
 - Undergoing the process of establishing SfGH as an incorporated charity.
- **Prioritise financial sustainability and income diversification**, including by mainstreaming standardised management and budgeting tools throughout the network, introducing self-generated income schemes (e.g. launching a merchandise strategy to increase visibility, and monetising high-value digital or ticketed events, reintroducing branch affiliation fees), introducing means for alumni donations, and mapping and applying to diverse grants and funds. This could also be achieved by building the capacity of National Committee members on financial management, fundraising and grant applications, allowing them to have autonomy over diversifying funding and reducing pressure on the Finance Director.
- **Strengthen the National Committee's operations and governance accountability**, including by clearly defining decision-making protocols and role descriptions, implementing performance standards for task and communication management, and utilising select meetings as collaborative co-working sessions for joint operational outputs. This could also be achieved by expanding National Committee capacity and operational resilience to mitigate burnout, including by implementing a supporting tier of appointed officers to distribute directors' workload, establishing co-positions or deputy

roles, and implementing capacity assessments before adopting new projects to ensure alignment between ambitions and resources.

- **Institutionalise a culture of continuous learning** to optimise future operations and activities, including by convening calls for cross-branch reflection, establishing a centralised "living" feedback repository populated via form submissions, documenting good practices and challenges in the organisation's operations (how it runs), roles and responsibilities (who does what), and synthesising these insights into formal "lessons learned" documentation on an annual basis for future planning.
- **Enhance the supervisory and advisory roles of the Board of Trustees**, including by reviewing and clarifying the responsibilities of trustees in the Constitution and Bylaws, inviting Trustees to participate as observers in select NC meetings, strengthen the recruitment of Trustees, linking Trustees to NC members through a buddy system based on their expertise, and define Trustees role in relation to the decision-making mechanisms of the organisation.
- **Strengthen our operational engagement and impact**, including by illustrating our activities, objectives and vision in a user-friendly and accessible manner (e.g. through a Theory of Change framework) and transitioning from functional to thematic operational structures. The latter could be achieved by identifying time-bound, core thematic focus areas of SfGH agreed by its membership (aligned with IFMSA Standing Committee structure), establishing national coordinator roles for each theme, establishing annual national working groups for each theme, recruiting members based on their thematic interests, and empowering individuals to execute cross-cutting functions (such as advocacy, policy, or capacity building) within their chosen thematic focus. Furthermore, this could also be achieved by enhancing the reporting of our work to universities and supporting individual award (branches and individual members) nominations for awards at the university level, as well as national award nominations of SfGH (e.g. Third Sector Awards, Social Enterprise Awards, Diana Awards).

3.4. Enabler 2: Membership Engagement and Network Strengthening

Students for Global Health will:

- **Strengthen the organizational identity and sense of belonging among its membership**, including by creating spaces for members (including branches) to share their experiences and perspectives, developing organisational traditions or unique practices that foster a sense of shared belonging, utilise internal merchandise and brand to reinforce identity, using mentoring and buddy systems to help new branches immediately feel connected, and promoting psychological safety and safe spaces (e.g. a Code of Conduct, EDI sessions).
- **Decentralise its support to branches through a regionalised approach**, including by re-establishing the regional coordinator roles, maintaining a directory of branch leadership contact details, organising regional events (online/in-person), establishing regular check-ins between the regional coordinators and their relevant branches, and

conducting branch visits (where feasible). This could also be achieved by developing an activities map, highlighting branch engagement over the year to the public and partners.

- **Strengthen our membership management and engagement system**, including by establishing a membership framework/database and centralised registration, utilising working groups to deliver projects (e.g. policy documents), establishing consultation spaces, supporting the establishment of local officers (e.g. LEO/LOREs), and including general members in delegations to conferences/external events. This could also be achieved by studying the feasibility of introducing membership fees and a well-defined, meaningful benefits package for members, and by strategically planning for members' recruitment at freshers' fairs, including through unified messaging, SfGH 101 presentation, promotion materials, merchandise and checklists/toolkits. Where personal data collection will be needed, the General Data Protection Regulation (GDPR) and a clear privacy policy must be followed while mitigating the privacy requirements of the student unions and universities.
- **Support members' networking and cross-branch collaborations**, including by providing guidance and feedback on proposals, sharing contact details and connecting branch representatives, providing space (e.g. monthly calls, social media posts) for branches to share their work among them, and establishing nationally-agreed themes/priorities as a means to align branches' work. This could also be achieved by facilitating regular networking and social events to foster connections between branches/members, including by dedicating a time-block at national events, integrating ice-breaking activities in in-person and online capacity building activities, and supporting branches organising bilateral or multilateral in-person or online meet-ups.
- **Establish structured opportunities for communication and alignment between the National Committee and branches**, including by holding quarterly all-branch meetings with set agendas to coordinate priorities and track progress, organising thematic termly calls (for interested branches) to support planning, and establishing a regular (e.g. weekly, monthly) drop-in system where rotating National Committee members provide consistent Q&A support for branch leadership. This could also be achieved by establishing centralised communication channels through diverse media with direct, coordinated access by the NC members (such as email servers/lists, WhatsApp channels, IG channels).
- **Cultivate an extensive and engaged alumni network** to support institutional memory and mentorship, including by incentivising branches to establish local alumni communication channels for advice and support, creating an alumni database accessible to local branches, organising (or supporting) alumni gatherings, inviting alumni to present at/ engage in national events and network with members, and implementing end-of-term processes to secure consent for ongoing contact with outgoing committee members. This could also be achieved by establishing a mechanism to meaningfully engage alumni and leverage their expertise (e.g. through a board of recommendations/extensive experience, serving as a consultative body and a sustainable scheme for mentorship).

3.5. Enabler 3: Meaningfully Engaging and Strengthening Partnerships

Students for Global Health will:

- **Define clear criteria for 'meaningful engagement' in the context of partnerships**, including clear criteria about roles, time commitment, partnership's role in achieving SfGH goals and shifting power, and what students are actually contributing to, to ensure partnerships are more intentional, equity-driven and mutually beneficial.
- **Strengthen our external relations and partnerships management and tracking**, including by developing (NC, with support from branches) a database of partners and external stakeholders, including MPs, partner organisations, and individual experts, to maintain their contact details and track SfGH's engagement and collaboration with them. Such a database ensures the sustainability of SfGH's external relations, documentation of external collaborations and tracking the history of engagement. This could also be achieved through publishing a newsletter (trimestral or biannual) targeted to partners, providing updates on the activities and impact of SfGH. Moreover, SfGH will prioritise a selected few, deeper partnerships to formalise, centred around nationally-identified thematic areas, ensuring longer-term relationships and consistent opportunities for students to contribute substantively to policy, research, or advocacy outputs.
- **Empower Branches with the skills and resources to engage and partner with their universities, other student societies and local stakeholders** to exchange information and resources (e.g. trainings), publish on their platforms (e.g. social media, website) about SfGH/branch's activities and impact, and work on joint community-based initiatives. This might involve sharing examples of local partnerships' success stories, sharing checklists/guidance and organising capacity building sessions on how branches can approach and sustain local relationships. This could be achieved by developing templates for SfGH branches and committees to use when engaging these stakeholders, offering clear practical guidance on how to operationalise these relationships.
- **Strengthen our engagement in the International Federation of Medical Students' Associations**, including by:
 - Re-operationalising the IFMSA professional and research exchanges programs in SfGH as one global health education mechanism and a core element of its unique value proposition, including by seeking endorsements from local universities and establishing a clear structure of local exchanges teams.
 - Enrolling at least one SfGH activity (national or branches) per year in IFMSA programs, and subsequently presenting SfGH activities at IFMSA's Activities Fair.
 - Promoting members' awareness of IFMSA and the opportunities it provides, including by sharing a one-page brief about IFMSA within the welcome packs for fresher's fairs, organising an IFMSA 101 session in national events, and sharing opportunities promptly through the relevant communication channels to branches and members.

- Strengthen our relations with IFMSA National Member Organisations, including by starting a partnership/buddy system, cross-sharing of and participation in capacity building sessions, working on joint projects and applying for collaborative grants/funds.
- **Build a network with other youth organisations also engaged in working with high-level stakeholders focused on health-related issues** (e.g. British Youth Council, BMA Resident Doctors, Reimagine Youth, UAEM, Incision, Solidaritee), including by mapping national and local youth-led organisations and mobilising a group of well-established ones to develop a Youth in Healthcare (working) group (consisting of members of multiple other health-focused youth organisations) to collaborate to be a consultant group to Local Authorities and High-Level Stakeholders looking to engage youth voices in their decision-making.
- **Establish a mechanism for members attending international events** (IFMSA events or external events like the World Health Summit) **to report back to the organisation** their contributions, connections made (and their contacts), outcomes of the event and lessons learnt, as a commitment to the DIA signing their candidature. Such mechanisms may be in the form of a centralised reporting form to the NC or a presentation/talk at a national event (in-person or online).
- **Ensure our membership (branches and individual members) is updated regularly on the partnerships**, including the outcomes of these partnerships, who they affect, what SfGH actually does with/for the partner and what the partner does with/for SfGH. This could be achieved through SfGH's social media platforms, membership newsletters, or presentations in national events, among others.

4. Monitoring, Evaluation, Accountability and Learning

To ensure the effective implementation of the strategy and impact documentation, rigorous tracking of our progress is essential. This section outlines the Monitoring, Evaluation, Accountability, and Learning (MEAL) framework for the 2026-2030 strategic plan.

First, a comprehensive Logic Framework (Logframe) was developed that outlines the progression from our strategic inputs and activities to our desired outcomes and impact. The logframe can be accessed through the following sheet [SfGH 2026-30 Strategy Logframe](#). Building upon this logframe, a detailed monitoring and evaluation (M&E) framework has been developed. This framework outlines proposed outcome and output indicators for each strategic priority and enabler. For each indicator, the framework specifies the data source (how it will be measured), the measurement frequency (how often it will be measured), the responsible individual (who will gather the information), and the reporting channel (where it will be reported). Recognising the dynamic nature of our network, this framework remains open to change, where the proposed indicators may be adjusted according to the eventual implementation activities.

To accurately measure our progress, a comprehensive baseline assessment shall be conducted during the first two years of the strategy's implementation. This assessment shall be used to establish baseline values for the indicators before implementing the given activities, to

ensure the measurement and documentation of change and impact over the strategy period. Furthermore, our commitment to equity and inclusion must be reflected in our data collection. Ideally, wherever data is collected on individuals, it should be thoroughly disaggregated by gender, speciality or field of study, region, and education level.

Finally, our measurement approach must go beyond quantitative output metrics to assess the true value of our activities and actions. The monitoring and evaluation process shall also strongly consider appropriateness and quality indicators. This includes measuring participant satisfaction, accessibility of the resources/activities, and relevance of topics covered to participants, among other indicators. This focus ensures our impact is not quantity-focused but genuinely effective and contextually appropriate.

4.1. Strategic Priorities

Priority 1: Championing Health Equity and Institutionalising Youth Engagement

	INDICATOR	DATA SOURCE How will it be measured?	FREQUENCY How often will it be measured?	RESPONSIBLE Who will gather the information?	REPORTING Where will it be reported?	
Outcomes	• Improved policy, advocacy and campaigning work planning. (% Satisfaction, % goals and objectives achievement)	• Membership (capacity, satisfaction) surveys	Bi-annually (2026 for baseline, 2028, 2030)	National Director, Policy and Advocacy Director (s), National Officers	Strategy mid-term (evaluation) report and end evaluation report	
	• Members' engagement in campaigns.					
	• Credibility and impact of SfGH's advocacy.					
	• Engagement of supporters or alumni in policy and advocacy work.	• Membership (capacity, satisfaction) surveys				
	• Increased meaningful engagement of members in national advocacy work.	• Activity reports				
	• NC and branches are empowered to mobilise on national advocacy priorities.					
	• Increased SfGH engagement with international and European global health decision-making spaces and policy forums.	• Annual organisational reports				
	• Strengthened SfGH's online presence and information accessibility.	• Organisational annual (impact) report				
	• Local MPs/Officials respond to SfGH campaigns.	• Individual NC members' annual or biannual reports				
	• SfGH policies cited by partners and MPs.	• Branches reports (where applicable)				
	• SfGH reacts to emerging public health issues.					
	• UK sends a Youth Delegate to the WHA.					
	• Human rights, health equity and decolonial considerations guide our operations.					
Outputs	• Planning session(s) minutes/report.	Session(s) minutes/report.	Annually	National Director Policy and Advocacy Director (s), National Officers	• Organisational annual (impact) report • Individual NC members' annual or biannual reports • Branches reports (where applicable)	
	• # of national advocacy campaigns/activities organised.	• Activity reports	Annually			
	• # of multi-year thematic advocacy programmes/projects established.	• Annual organisational report				Year 4 (2030)
	• # of opportunities for branches/individuals to contribute to national advocacy work.		Annually	Branches Team, Policy and Advocacy Director (s), National Officers		
	• National advocacy priorities adopted.	National delegate report				
	• UK National Youth Delegate Programme to the WHA established					
	• # of local advocacy campaigns/activities organised (branches).	• Event reports		Annually		Partnership Director
	• # of trainings organised for NC/branches to act on national advocacy priorities.	• Branch reports				
	• # of NC and branch members trained.	• Annual organisational report				
	• # of tools developed for NC/branches to mobilise on national advocacy priorities.					National Director, Director of International Affairs, Policy and Advocacy Team
	• NC and branches' satisfaction rate on advocacy, policy and campaigning work.					
	• # of MPs/Officials contacted.					
	• # of communications with supporters or alumni for input/support.					
	• % of calls for IFMSA delegations shared.					
	• % of members supported in their applications.	• NC reports				
	• # of inputs provided to IFMSA advocacy plans and delegation plans.	• Branch reports	PR and Comms Director			
	• # of advocacy letters sent to the relevant UK missions/ministeries.					
	• # of collaborations with interested/relevant NMOs on joint advocacy efforts.					
	• Social media engagement metrics.	SfGH social media accounts	Trimesterly or Bi-annually			
	• Website updated and maintained.		Annually	National Director, Trustees		
	• Review of all activities planning, social media messaging, policy and advocacy messaging, and engagement in decision-making for human rights, health equity and decolonial considerations.	• Trustee reports				
	• An anti-oppression and participatory framework has been developed.	• NC reports				
		• Annual organisational report	Year 2 (2028)			

Priority 2: Upscaling Members' Education and Capacity Building

	INDICATOR	DATA SOURCE How will it be measured?	FREQUENCY How often will it be measured?	RESPONSIBLE Who will gather the information?	REPORTING Where will it be reported?
Outcomes	• Branch members' capacity (knowledge, skills and confidence).	• Membership (capacity, satisfaction) surveys • Pre- and post-session surveys	Annually	Education Team (Training Director, Global Health Education Director)	Strategy mid-term (evaluation) report and end evaluation report
	• NC members' capacity (knowledge, skills and confidence).				
	• Members' accessibility to digital capacity building resources.	Branch reports			
	• Awareness about career pathways in global health among SfGH members.				
	• Knowledge exchange and collective learning across branches.	Event reports			
	• Member engagement in national events and capacity-building activities. (# of applicants to events, # of attendees)	Trainers database, Branch reports, Annual report			
	• SfGH's capacity for peer-to-peer training and facilitation (# of trainers, # of trainings delivered).				
Outputs	• Induction training organised.	• Event reports • Branch reports • Annual organisational report	Annually	Education Team (Training Director, Global Health Education Director)	• Organisational annual (impact) report
	• Competency module for the NC, branches and members developed.		Year 2 (2028)		
	• Members have digital access to capacity-building resources.		Annually		
	• # of members accessing the digital capacity building resources.		Year 1 (2027)		
	• Training portal established.		Annually		
	• # of online 'education' activities organised.		Year 2 (2028)		
	• # of topics addressed aligning with the work of the branch or thematic priorities of that year.		Annually + Year 4 (2030)		
	• Digital capacity building resources centre is established and made accessible via the website and social media channels.		Annually		
	• # of IFMSA SRT events or online IFMSA workshops organised.		Year 1 (2027)		
	• # of nationally-accredited 'Train the Trainer' organised.		Annually		
	• # of facilitation and soft skills sessions organised.		Year 1 (2027)		
	• National trainers database established.		Annually		
	• # of hours delivered by SfGH trainers per year.		Year 1 (2027)		
	• Means to support members' professional portfolio development are established and operated.		Annually	Branches Team	• Individual NC members' annual or biannual reports • Branches reports (where applicable)
	• # of cross-branch forums organised for peer-to-peer sharing of best practices and successful initiatives.				
	• # of optional drop-in sessions/calls organised following committee handovers.		Annually	National Director, Director of International Affairs	
	• # of collaborations with other NMOs to host trainings or exchange capacity-building resources.				
	• # of members subsidised to attend national events from geographically distant regions, or those attending IFMSA's pre-GA training, SRTs, or National Officer weekends.		Annually	National Director, Partnerships Director	
	• # of panels and mentorship spaces organised, highlighting diverse routes into global health.				

4.2. Strategic Enablers

Enabler 1: Sustainable Governance and Operations

	INDICATOR	DATA SOURCE How will it be measured?	FREQUENCY How often will it be measured?	RESPONSIBLE Who will gather the information?	REPORTING Where will it be reported?
Outcomes	- Improved work planning, reporting and strategic review. - Enhanced NC accountability and impact documentation. - Improved institutional memory and operational continuity. - Improved NC's operations and governance.	- Observation. - Documents shared on SfGH Google Drive. - Handover logs. - Attendance sheets and agendas from NC planning training sessions. - Minutes and documents from relevant meetings.	Annually	National Director, Secretary	Strategy mid-term (evaluation) report and end evaluation report
	Enhanced financial sustainability and diversified income sources.	- SfGH financial accounting reports and bank statements. - Grant award letters and donor agreements. - Alumni donation receipts.			
	Improved NC's capacity and operational resilience to mitigate burnout.	- NC organisational chart and recruitment records. - Attendance/calendar invites for collaborative co-working sessions. - NC self-assessment surveys.			
	Established organisational culture of continuous learning to optimise future operations and activities (self-reported, assessed by observation).	- Attendance logs and meeting minutes from cross-branch calls. - NC and branches self-assessment surveys. - Observations from Regional Coordinators during branch check-ins.			
	Enhanced supervisory and advisory roles of the Board of Trustees.	- Documented feedback notes on the AWP drafts. - Trustee meeting minutes and attendance records. - Observing engagement logs or email threads.			
	Improved SfGH's operational impact.	- NC and alumni observations. - Annual Impact Report metrics mapped against the strategy logframe. - Feedback surveys from external partners.			
	Improved members' engagement in SfGH operations.	- Membership registration databases and thematic group application forms. - Attendance logs for thematic CB sessions. - Published structural charts confirming thematic coordinators and working groups are in place.			

Outputs	• The annual work planning system for the NC is implemented. ➡ A standardised "annual working plan" document is created. ➡ # of training/feedback sessions organised for NC members on planning. ➡ Planning resources shared with NC members. ➡ % of NC members submitting a complete AWP document. ➡ # of NC members' plans on which Trustees provided guidance and feedback. • # of NC reflection sessions organised to synthesise data into generalised lessons learned for reporting and strategic improvement. • The MEAL framework and tracking system are established and implemented. • A cycle of reporting and strategic review is implemented: ➡ # of quarterly NC reports published. ➡ # of annual impact reports published.	• Documents shared on Google Drive. • Attendance sheets and agendas from NC planning training sessions.	Annually	National Director, Secretary	• Organisational annual (impact) report • Individual NC members' annual or biannual reports • Branches reports (where applicable)	
	• # of NC reflection sessions organised to synthesise data into generalised lessons learned for reporting and strategic improvement. • The MEAL framework and tracking system are established and implemented. • A cycle of reporting and strategic review is implemented: ➡ # of quarterly NC reports published. ➡ # of annual impact reports published.	• Minutes and synthesised documents from sessions. • Google Drive				Year 1 (2027)
	• Standardised management and budgeting tools developed & shared with network. • # of self-generated income schemes implemented. • Funds generated from self-generated income schemes. • Means for alumni donations implemented. • Grants and funds mapping done. • # of grants/funds successfully received.	• Google Drive. • SfGH financial accounting report and bank statements. • Alumni donation receipts • Google Drive and email records.	Year 2 (2028)			Director of Finances
	• # of capacity building sessions/activities for NC members on financial management, fundraising and grant applications • Decision-making protocols and role descriptions are defined.	• Event reports. • Annual org. report.	Annually			
	• Performance standards for task and communication management are developed and implemented. • # of collaborative co-working sessions organised for joint operational outputs. • Supporting officers/national assistants established. • # of calls convened for cross-branch reflection. • A centralised "living" feedback repository is established. • A formal "lessons learned" document is developed. • # of NC meetings in which Trustees participated as observers. • Trustees-NC buddy system is maintained. • An organisational Theory of Change framework is developed.	• Google Drive. • Google Drive. • Trustee reports. • Session minutes. • Application forms and selection outcomes. • Call minutes. • Google Drive.	Year 1 (2027)	National Director, Secretary, Trustees		
	• # of collaborative co-working sessions organised for joint operational outputs. • Supporting officers/national assistants established. • # of calls convened for cross-branch reflection. • A centralised "living" feedback repository is established. • A formal "lessons learned" document is developed. • # of NC meetings in which Trustees participated as observers. • Trustees-NC buddy system is maintained. • An organisational Theory of Change framework is developed.	• Google Drive. • Google Drive. • Trustee reports. • Session minutes. • Application forms and selection outcomes. • Call minutes. • Google Drive.	Year 3 (2029)			
	• # of collaborative co-working sessions organised for joint operational outputs. • Supporting officers/national assistants established. • # of calls convened for cross-branch reflection. • A centralised "living" feedback repository is established. • A formal "lessons learned" document is developed. • # of NC meetings in which Trustees participated as observers. • Trustees-NC buddy system is maintained. • An organisational Theory of Change framework is developed.	• Session minutes. • Application forms and selection outcomes. • Call minutes. • Google Drive.	Biannually			
	• # of collaborative co-working sessions organised for joint operational outputs. • Supporting officers/national assistants established. • # of calls convened for cross-branch reflection. • A centralised "living" feedback repository is established. • A formal "lessons learned" document is developed. • # of NC meetings in which Trustees participated as observers. • Trustees-NC buddy system is maintained. • An organisational Theory of Change framework is developed.	• Application forms and selection outcomes. • Call minutes. • Google Drive.	Annually			
	• # of calls convened for cross-branch reflection. • A centralised "living" feedback repository is established. • A formal "lessons learned" document is developed. • # of NC meetings in which Trustees participated as observers. • Trustees-NC buddy system is maintained. • An organisational Theory of Change framework is developed.	• Call minutes. • Google Drive.	Year 1 (2027)	Policy and Advocacy Directors, National Officers		
	• # of NC meetings in which Trustees participated as observers. • Trustees-NC buddy system is maintained. • An organisational Theory of Change framework is developed.	• Meeting minutes. • NC and Trustee reports. • Google Drive.	Quarterly			
	• Trustees-NC buddy system is maintained. • An organisational Theory of Change framework is developed.	• NC and Trustee reports. • Google Drive.	Annually			
	• An organisational Theory of Change framework is developed.	• Google Drive.	Year 1 (2027)			
	• Thematic operational structure is implemented: ➡ Thematic focus areas of SfGH are agreed by its membership. ➡ National coordinator roles for each theme are established. ➡ Annual national working groups for each theme are established. ➡ # of applications to thematic groups. ➡ # of capacity building sessions/activities for working group members to execute cross-cutting functions within their chosen thematic focus.	• GA Minutes. • Application forms and selection outcomes. • Structural charts confirming thematic coordinators and working groups are in place. • Attendance logs for thematic CB sessions. • Activity/Event reports • Annual organisational report.	Annually			

Enabler 2: Membership Engagement and Network Strengthening

	INDICATOR	DATA SOURCE How will it be measured?	FREQUENCY How often will it be measured?	RESPONSIBLE Who will gather the information?	REPORTING Where will it be reported?
Outcomes	• Strengthened organisational identity and sense of belonging among membership.	• Membership, branches, NC and Trustee surveys. • Merchandise sales. • Attendance records for events. • NC, Trustee and Branch Committees occupancy/vacancy rate.	Annually	Branches Team	Strategy mid-term (evaluation) report and end evaluation report
	• Improved NC support to branches.	• Branch leadership/contact directory. • Regional Coordinators' meeting logs or check-in trackers. • Attendance and post-event feedback forms from regional events. • Branch committee surveys.			
	• Improved membership management and engagement system.	• The centralised membership registration platform (when active). • Annual freshers' recruitment plans. • Branch reports. • Application forms for events and opportunities. • Conference delegations and post-event delegate reports.			
	• Increased members' networking and cross-branch collaborations.	• Event reports. • Branch reports. • Membership surveys. • Social media tags or newsletter features highlighting cross-branch collaborations.			
	• Improved communication and alignment between the NC and branches.	• Meeting minutes and attendance. • Analytics from communication channels (e.g. WhatsApp message reads, IG, newsletter open/click rates). • NC and branch surveys.			
	• Well established and engaged alumni network.	• Alumni database. • Attendance from national events and dedicated alumni gatherings. • Documentation/terms of reference for the established alumni engagement mechanism. • NC surveys.			

Outputs	• SfGH merchandise and brand made accessible and promoted to members.	• Merchandise sales. • Brand utilisation rate on social media.	Annually	Director of Finances, PR and Comms. Director	• Organisational annual (impact) report • Individual NC members' annual or biannual reports • Branches reports (where applicable)
	• # of spaces organised for members to share their experiences and perspectives.	• Minutes and event reports.	Annually	Branches Team	
	• # of organisational traditions or unique practices are developed and implemented.	• NC reports and observations. • Membership surveys.			
	• Mentoring/buddy system is implemented.	• NC reports.			
	• # of activities promoting psychological safety and safe spaces.	• Event/activity reports.			
	• Regional coordinator roles re-established.	• Selection outcomes.			
	• A directory of branch leadership contact details is created and maintained.	• Google Drive + the directory.			
	• # of regional events (online/in-person) organised.	• Minutes.			
	• # of regular check-ins between regional coordinators and their relevant branches.	• Event reports.			
	• Branches' activities map developed and updated.	• Google Drive + the map.			
	• Membership framework/database and centralised registration are established.	• Google Drive + the database.	Year 2 (2028)		
	• # of consultation spaces with individual members.	• Minutes/reports.	Annually	Director of International Affairs, Partnership Director	
	• # of branches establishing local officers.	• Branch reports.			
	• # of delegations to conferences/external events, including general members.	• NC reports.			
	• # of delegates in delegations.	• Annual org. report.			
	• A feasibility study of introducing membership fees and a well-defined, meaningful benefits package for members is conducted.	• Feasibility study report.	Year 3 (2029)	Director of Finances, Branches Team	
	• An annual plan for members' recruitment at freshers' fairs is done.	• Planning document.	Annually	Branches Team	
	• # of spaces provided for branches to share their work among them.	• Event minutes/reports.			
	• # of networking and social events.				
	➡ # of networking/social time-blocks organised at national events. ➡ # of capacity building activities integrating ice-breaking activities. ➡ # of branches bilateral or multilateral in-person or online meet-ups.				
	• Structured opportunities for communication and alignment between the NC and branches are established: ➡ # of quarterly all-branch meetings held. ➡ # of thematic termly calls organised. ➡ Centralised communication channels are established.	• Minutes/reports.			
	• # of branches establishing local alumni communication channels.	• Branch reports.			
• An alumni database is created and made accessible to local branches.	• Google Drive.	Year 1 (2027)	Partnership Director		
• # of alumni gatherings organised or supported.	• Event report.	Annually			
• # of national events for which alumni were invited.					
• # of alumni attending.					
• At least 1 mechanism to meaningfully engage alumni and leverage their expertise is established.	• NC reports.	Year 2 (2028)			

Enabler 3: Meaningfully Engaging and Strengthening Partnerships

	INDICATOR	DATA SOURCE How will it be measured?	FREQUENCY How often will it be measured?	RESPONSIBLE Who will gather the information?	REPORTING Where will it be reported?
Outcomes	• SfGH engages meaningfully in the context of partnerships and external relations (assessed based on the # of deliverables from relations/collaborations).	• Self-reported through NC reports and annual org. report. • Signed Memorandums of Understanding (MoUs) or partnership agreements. • Annual partner feedback surveys.	Annually	National Director, Partnership Director, Coordinator	Strategy mid-term (evaluation) report and end evaluation report
	• Improved external relations and partnerships management and tracking.	• External stakeholder database. • Newsletter analytics (e.g., Mailchimp distribution logs for both partner and member newsletters). • NC reports.			
	• Increased branches' empowerment to engage and partner with local stakeholders.	• Branch resource drive (verifying guidance/templates are available). • Attendance for training sessions + pre- and post-session assessment. • Branch reports. • Branch surveys.			
	• Increased engagement with other youth organisations also engaged in working with high-level stakeholders focused on health-related issues.	• Youth organisation mapping document/directory. • Terms of Reference (ToR) and meeting minutes with other orgs. • Co-signed advocacy letters or joint policy briefs produced by the working group.			
	• Improved engagement in the IFMSA.	• IFMSA enrollment database • IFMSA GA/RM delegations. • Letters of endorsement from universities and exchange team organizational charts. • CFs signed by SfGH for applicants to international opportunities.		National Director, International Team	
Outputs	• Organisational criteria for 'meaningful engagement' is developed.		Year 2 (2028)	Partnership Director	• Organisational annual (impact) report
	• A database of partners and external stakeholders is established and updated.	• Google Drive + the database	• Year 1 (2027) • Annually for the updates		
	• # of newsletters targeted to partners published.	• Newsletter platform.	Annually	Branches Team	• Individual NC members' annual or biannual reports
	• Prioritised strategic partnerships are identified and formalised (where relevant). • Examples of local partnerships' success stories are collected and shared in at least 1 space annually.	• Partners' database. • Sstories document. • Email/event reports	Annually		

	• Checklists/guidance to engage with local stakeholders are developed and shared with branches.	• Google Drive.	Year 1 (2027)	Partnership Director, Branches Team	• Branches reports (where applicable)
	• Templates for SfGH branches and committees to use when engaging these stakeholders are developed and shared.				
	• # of capacity building sessions/activities organised on engaging with local stakeholders.	• Session/Event reports.	Annually		
	• IFMSA professional and research exchange programs are reactivated in SfGH: ➡ # of endorsements from local universities. ➡ Structure of local exchange teams is established.	• Google Drive • Branch reports	Annually	International Team	
	• # of SfGH activities enrolled per year in IFMSA programs.	• Enrollment form submission confirmation.			
	• # of SfGH activities presented at IFMSA's Activities Fair.	• GA/RM reports.			
	• % increase in members' awareness of IFMSA and the opportunities it provides. ➡ A one-page brief about IFMSA is developed and shared within the welcome packs for fresher's fairs. ➡ # of IFMSA 101 sessions organised in national events.	• Membership surveys. • Google Drive			
	• # of SfGH delegates participating in IFMSA GAs and RMs.	• Pre- and post-session surveys. • Session reports.			
	• A partnership/buddy system with IFMSA NMOs is established.	• Application forms. • Annual org. report.		National Director, International Team	
	• # capacity building sessions cross-shared or participated in between SfGH and other NMOs.	• NC reports. • Email logs.			
	• # of joint projects with other NMOs.	• Event reports. • Email logs. • Google Drive			
	• National and local youth-led organisations are mapped.	• Annual org. report			
	• A Youth in Healthcare (working) group is established.	• Google Drive + the map.			
	• A mechanism for members attending international events to report back to the organisation is established.	• Google Drive • Email logs	Year 1 (2027)	Partnership Director	
	• % of members attending international events reporting back to the organisation.	• Group Terms of Reference.	Year 4 (2030)		
	• # of updates to membership on the partnerships.	• Delegate reports.	Annually	National Director	
	• Email logs, newsletters. • Event reports.	Annually	Partnership Director		

References

1. Partington R. UK economy flatlined in January amid Iran war, global energy prices, and inflation [Internet]. London: Guardian News & Media; 2026 Mar 13. Available from: <https://www.theguardian.com/business/2026/mar/13/uk-economy-flatlined-january-iran-war-global-energy-prices-inflation>
2. World Health Organization. Reform of the global health architecture and the UN80 Initiative. Report by the Director-General. Document EB158/44 [Internet]. Geneva: World Health Organization; 2025 Dec 22. Available from: https://apps.who.int/gb/ebwha/pdf_files/EB158/B158_44-en.pdf
3. Equality Trust. The scale of economic inequality in the UK. 2024. Retrieved from <https://equalitytrust.org.uk/scale-economic-inequality-uk/> [accessed online 16 March 2026]
4. Campbell D. UK ‘sick person’ of wealthy world for deaths from drugs and violence [Internet]. London: Guardian News & Media; 2025 May 20. Available from: <https://www.theguardian.com/society/2025/may/20/uk-sick-person-of-wealthy-world-deaths-drugs-violence>
5. London School of Hygiene & Tropical Medicine. Rapid reaction: UK loses measles elimination status [Internet]. London: LSHTM; 2026. Available from: <https://www.lshtm.ac.uk/newsevents/news/2026/rapid-reaction-uk-loses-measles-elimination-status>
6. London School of Hygiene & Tropical Medicine. Measles in the UK: LSHTM unpacked [Internet]. London: LSHTM; 2026. Available from: <https://www.lshtm.ac.uk/newsevents/news/2026/measles-uk-lshtm-unpacked>
7. The Guardian. UK government axes flagship global health project [Internet]. London: Guardian News & Media; 2026 Mar 12. Available from: <https://www.theguardian.com/global-development/2026/mar/12/uk-government-axes-flagship-global-health-project>
8. Manning A. The problems with Reform UK’s immigration policy: LSE Blogs [Internet]. London: LSE; 2025 Sept 9. Available from: <https://blogs.lse.ac.uk/politicsandpolicy/the-problems-with-reform-uks-immigration-policy/>
9. UK Government. Fit for the Future: 10 Year Health Plan for England (Executive Summary) [Internet]. London: Department of Health and Social Care; 2025 Jul.
10. Healthwatch. The state of health and social care in 2026 [Internet]. London: Healthwatch England; 2026 Mar. Available from: <https://www.healthwatch.co.uk/report/2026-03-16/state-health-and-social-care-2026>