A REPORT OF THE 2ND INTERNATIONAL STUDENTS’ MEETING ON PUBLIC HEALTH 
(ISMOPH 2012)

22ND APRIL 2012
MILLENIUM HALL
ADDIS ABABA, ETHIOPIA

Introduction

The 2nd International Students’ Meeting on Public Health (ISMOPH 2012) is a satellite event of the 13th World Congress on Public Health (WCPH), which was organized by the World Federation of Public Health Associations (WFPHA) and hosted by the Ethiopian Public Health Association (EPHA). It took place in Addis Ababa, Ethiopia, on the 22nd of April of 2012, one day before the World Congress was held on the 23rd of April. ISMOPH 2012 was orchestrated by the joint efforts of the International Federation of Medical Students’ Associations (IFMSA) and students from the Ethiopian Medical Students’ Association (EMSA) and various countries from around the world. In addition, it was sponsored by the American Public Health Association (APHA) and the University of Toronto, Dalla Lana School of Public Health.

ISMOPH 2012 was organized for all students at different stages of their educational endeavors regardless of their academic disciplines (e.g., public health, health and medical sciences, pharmacy, dentistry). Like the World Congress on Public Health, it centered on the theme of “Moving Towards Global Health Equity: Opportunities and Threats.” In accordance with the conference theme, the following areas of focus were addressed:
• Health as a ‘fundamental right’, advocacy, and social responsibility for global health equity;
• Health promotion, disease prevention, and the determinants of global health equity (including topics associated with specific biological, behavioral, and social health determinants and SES factors like age, gender, race, faith, etc.);
• Capacity building, participation, collaboration, and empowerment for global health equity;
• Health communication and other technological strategies in global health equity; and
• Attention to social context and relevance in global health equity: focus on the Horn of Africa.

The title for ISMOPH 2012 was “Building Capacity for Global Health Equity: A Collaborative Vision for Students.” ISMOPH 2012 had a vision of a truly global event and colloquium that served as a platform for international collaboration that brings together students from various academic disciplines, including, but not limited to, public health and the health and medical sciences, to study, strengthen, and advocate for global health equity, based on the realizations that health is a ‘fundamental right’ and that a ‘public health approach’ is essential to conquering the vast global burden of disease. The purpose of ISMOPH 2012 was to coordinate a student conference to analyze global health disparities and initiate partnerships to strengthen national public health systems, collaborate towards the advancement of future generations of public health professionals, and advocate for greater global health equity. As such, the following aims were targeted through ISMOPH 2012:

1. Bequeath students with a triumphant event that offers a prelude to the World Congress and creates a meeting place and colloquium that caters to their diversity and intellectual, professional, collaboration, and capacity building needs;
2. Provide an opportunity for undergraduate, graduate, and post-graduate students in various academic disciplines to present ‘Global Health Equity Case Studies’ – or local public health matters with global health equity implications – and encourage them to submit abstracts to the World Congress to present their public health research and interventions;
3. Gain insights into the determinants of health and health inequalities in the world;
4. Voice perspectives on student integration into local, national, and international efforts in the field of public health;
5. Discuss the role of students and international organizations in public health;
6. Revisit the Declaration of ISMOPH 2009; and
7. Establish an international platform or organization to unite all students interested in public health from around the world.

Venue and Participants

ISMOPH 2012 was held at Wangari Maathai Hall (named in commemoration of a former Kenyan Nobel Prize Winner) within the Millennium Hall. It was attended by approximately 45 participants, most of whom whose country of citizenship/residency was Ethiopia. Other nationalities were represented at ISMOPH 2012. These included Tanzania, Indonesia, the United Kingdom (UK), the United States of America (USA), Brazil, Belgium, Canada, Denmark, Austria, and India. In terms of gender, the number of participants was somewhat in favor of the females though the difference was very small. In addition, the participants represented a wide variety of academic disciplines, including, but not limited to, medicine, epidemiology, pharmacology, health and behavioral sciences, pharmacy, business, global health, and neuroscience.

Moderation and Program
ISMOPH 2012 began at 10.00 AM local time, an hour later of the program schedule. This was due to the ongoing registration processes that lead to a delay in the program as some of the attendees of the event were queued to complete their registration processes.

I and my co-worker partner, Ms. Joyonna Gamble-George were the moderators of the program for ISMOPH 2012. We started with an introductory note by introducing ourselves followed by introductions from the participants. Following this short triage, Ms. Gamble-George gave a brief overview of the agenda for the meeting. The agenda for the meeting included the following activities:

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### PLENARY SESSION I

- **09.00-09.30** Opening Ceremony
- **09.30-10.10** Samir Banoob, MD, DM, DPH, PhD - State of Global Health Equity
- **10.10-10.30** Peter Delobelle, MD, PhD, FRSPH - Strategies for Maximizing Synergy in Professional Collaboration: Using ISECN as a Case Study

**International Organizations and Student Panel Discussion**

**Student Participation & Collaboration for the Achievement of Global Health Equity**

- **11.30-12.30** Lunch with Mr. James B. Chauvin, VP & President-Elect of WFPHA (2010-12) Co-hosted by Dalla Lana School of Public Health, University of Toronto

### PLENARY SESSION II

- **12.30-13.20** Round Table Discussion (Small Groups) - Declaration of ISMOPH & IFPHS
- **13.20-13.30** Tea Break
- **13.30-14.00** Round Table Discussion (Whole Group) - Declaration of ISMOPH & IFPHS

### PLENARY SESSION III

- **14.00-14.40** Samir Banoob - African Regional Approach to Global Health Equity
- **14.40-15.20** Student Perspectives on Addressing Global Health Equity Around the Globe
- **15.20-15.30** Closing Remarks

Ms. Gamble-George then highlighted briefly the outcomes of the former ISMOPH, which was held in Istanbul, Turkey in 2009. Next, I discussed the purpose and objectives of ISMOPH 2012. Ms. Gamble-George briefly thanked all of the partners and sponsors that contributed to the success of hosting ISMOPH 2012 in Addis Ababa, Ethiopia. We then introduced the speakers for the meeting. Finally, I introduced the concept of the roundtable discussions to the participants with respect to the theme and areas of focus of the meeting.

There were two keynote speakers for ISMOPH 2012. The first keynote speaker was Dr. Samir Banoob, President of the International Health Management, LLC in Florida, USA, who presented on the “State of Global Health Equity”. He touched on and stressed the aspects of the social determinants of health. The second keynote speaker was Dr. Peter Delobelle, EURO Regional Coordinator for the International Union for Health Promotion and Education Student & Early Career Network (ISECN), who presented on “Strategies for Maximizing Synergy in Professional Collaboration: Using ISECN as a Case Study”.

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Following these prime presentations, the participants were given a chance to ask the respective presenters questions regarding their presentations.

Next, an international organizations and student panel discussion was held. This panel discussion focused on the importance of student participation within the context of their active involvement in international collaborations through organizations with a public health focus. The panelists consisted of five members. These panelists were Dr. Banoob, Dr. Delobelle, Dr. Wendie E. Norris, who is the Editor for the Global Health and Tropical Diseases Bulletin at the Centre for Agricultural Bioscience International (CABI), Nadia Fazal, who is Vice President of the Graduate Student Alliance for Global Health and a PhD student at the Dalla Lana School of Public Health for the University of Toronto, and Dagemawi Tesfaye Werku, who is a medical student at Addis Ababa University and Treasurer of the Ethiopian Medical Students’ Association (EMSA). Each panel member discussed his/her perspective(s) in accordance to the career/educational field he/she is actively involved in. Throughout the panel discussion, the participants asked questions of the panelists. The participants appeared to enjoy the format of this panel discussion as exhibited by their constant interaction with the panelists throughout the panel discussion.

Before the closing of plenary session one, the President-Elect of WFPHA, Mr. James B. Chauvin spoke briefly to the participants about the importance of student participation in organizations that focus on tackling public health concerns, including WFPHA and public health associations throughout the world. Mr. Chauvin also stressed the importance of global awareness of public health issues. He then called upon the participants for global involvement and inter-sectorial collaboration in achieving the Millennium Development Goals (MDGs). Moreover, Mr. Chauvin commended positively about the current partnership between WFPHA and IFMSA and promised to strengthen and cement the collaboration between these two organizations throughout his tenure.

Next, the participants broke for lunch from 13.00 to 14.00 and came back to Wangari Maathai Hall to continue with the final part of ISMOPH 2012. For plenary session two, the roundtable discussions were conducted. According to the topics under discussion, students were asked to divide themselves into three groups according to the topics of their interests. The topics were as follows:

1. Student advocacy for global health
2. International organization to unite all students interested in public health
3. Brain drain and its effects on health sector in underdeveloped countries
4. Health communication and technology and its effect on global health equity

The leader of each group was called to come before the participants and present on behalf of his/her respective group. It was very interesting in deed to see how in-depth the students’ discussions were. Although the discussions were held for a short period of time due to security issues, time constraints, and the initial delay of the start of the program, the groups revealed a great deal of clarification and enumeration of the topics under discussion.

Overall, the following successful outcomes can be noted:

- Active participation from participants, especially during the panel discussion and the roundtable discussions;
- Brief, relevant, and well oriented presentations from the speakers;
- Laid foundation for the future formation for the students’ international organization on public health
• Recruitment of students committed to serving on the International Organizing Committee and Local Organizing Committee for ISMOPH 2015;
• It offered a chance for the students to network and interacts with one another; and
• Opened a door for collaboration between member organizations, such as IFMSA, ISECN, and CABI.

Nevertheless, there were some challenges that were endured at ISMOPH 2012 and should be addressed before ISMOPH 2015. These challenges were as follows:
• Registration process delayed the commencement of the program;
• The turnout of members was not very encouraging despite the fact there was a very big deal of publicity and promotion from the organizing committee;
• We could not reach the consensus towards the final formation of the international students’ organization on public health; however, students have made a commitment to work on establishing the organization before ISMOPH 2012;
• We had very limited time to discuss all that was in our mind with respect to the theme of the meeting. Ample time was needed to thoroughly finish all that could potentiate the future ISMOPH; and
• Although all of the presenters showed up for the meeting, we were not able to hear the student presentations as a result of security issues, time constraints, and the initial delay of the program for ISMOPH 2012.

It’s my view that IFMSA will make use of the close collaboration between them and WFPHA as the basis of strengthening and sharpening the partnership for the mutual benefits of all the students who are taking interest in the areas of public health.

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