NCDs in medical curricula – perspectives from students

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136 National Member Organisations representing 1.3 million medical students from 127 countries
Agenda

1. The Budva Youth Declaration – a call to action on NCDs
2. IFMSA activities promoting public health in the medical curriculum
   1. Small working group on public health in the curriculum
   2. Social accountability toolkit
   3. Primary care and public health exchanges
3. Key recommendations to address NCDs in curricula
The Budva Youth Declaration

A Call to Action on Noncommunicable Diseases
Process

• IFMSA General Assembly in Budva, Montenegro March 2017

• NCD Youth Caucus
  • Keynote Dr Bente Mikkelsen
  • Two panel discussions

• Survey of National Member Organisations on current medical education practices around NCDs
Key themes

1. Financing NCD prevention and control
2. Protecting health in the urban environment
3. Empowering vulnerable populations and reducing inequity
4. Youth and NCDs
5. Health systems for NCDs
6. Investing in the health workforce
Investing in the health workforce

- Ensure that NCDs are an integral part of medical school curricula
  - Prevention of NCDs including through attention to social determinants of health
- Innovation in the field of medical education
- Multidisciplinary work and task shifting
- Recognise the importance of primary health care and family doctors
  - Including recognition of the general lack of exposure to primary healthcare in medical school
Most non-communicable diseases are influenced by upstream determinants of health (environmental, social, geographical, political etc.). Do you believe that there needs to be more teaching on these factors in your medical degree?

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<tr>
<th>Percentage of respondents ‘strongly agree’ by region</th>
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<tr>
<td>Africa</td>
<td>50%</td>
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<td>Americas</td>
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<td>Asia-Pacific</td>
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<td>Eastern Mediterranean Region</td>
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<td>Europe</td>
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N = 128
How would you rate the quality of your country's medical teaching on preventative health, such as addressing the common risk factors of NCDs (physical inactivity, unhealthy diet, harmful use of alcohol, tobacco use)?

- **Very poor**: 9%
- **Insufficient**: 4%
- **Sufficient**: 25%
- **Good**: 30%
- **Excellent**: 32%

Percentage of respondents ‘very poor’ or ‘insufficient’ by region:

- **Africa**: 50%
- **Americas**: 40%
- **Asia-Pacific**: 20%
- **Eastern Mediterranean Region**: 35%
- **Europe**: 30%

N = 128
IFMSA activities promoting public health in the curriculum
Small working group on public health in the curriculum

• Gather more information on the state of public health education
• Survey and face-to-face input at regional meetings
• Outcome – toolkit for students to advocate on public health education in the curriculum
Primary care and public health exchanges

• IFMSA has an active student-lead exchange program

• Students gain expertise in the fields of public health and primary healthcare by temporarily working in foreign countries’ public health system
1. Think beyond diagnosis and treatment
2. Address the social, environmental and commercial determinants
3. Think across the lifecourse
4. Train your students to be health advocates
Questions

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