Global Health Program Handbook

Canadian Federation of Medical Students’ Global Health Program
2012 - 2013
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What is the CFMS Global Health Program?

The CFMS Global Health Program (CFMS-GHP) is a branch of the Canadian Federation of Medical Students (CFMS). The CFMS has over 8000 members at 14 medical schools across Canada. The CFMS stands on three pillars: representation, services and communication. The first pillar is to represent the national voice of Canadian medical students within any national or international body which can affect the nature of medical education in this country. The second pillar commits to providing members with needed and affordable services for use during different stages of their medical school training. Finally, the CFMS serves to facilitate and improve communication within the membership, as well as among members and external organizations.

The CFMS-GHP was developed over the last 14 years in response to a growing need for coordinated programming and collaboration focused specifically on global health. The program is based on the following principles:

**Vision:** Recognizing that its members, as future physicians, are uniquely and strategically placed to promote the values of health equity and social responsibility, the CFMS-GHP will strive to empower students with all the tools they may need to grow as global health leaders and global citizens.

**Mission:** In the spirit of responsible and sensitive global collaboration, we will facilitate ethical global health education, advocacy, action and experiences through coordinated national programming.

The GHP is composed of a diverse team of student leaders from across the country:

- **Global Health Liaisons** (GHLs): 1-2 students at each member university who act as the official link between the CFMS-GHP and students at their medical school.

- **Global Health Advocates** (GHAs): 1 student at each member university who engages in local and national advocacy around a particular yearly theme. This year’s theme is Immigrant and Refugee Health.

- **Local Exchange Officers** (LEOs): 1-2 students at each member university who work specifically on coordinating the clinical and research exchange programs.

- **National Officers** (NOs): Roles created to provide specific services and/or representation on behalf of Canadian Medical Students.
  - National Exchange Officer Jr. and Sr. (NEO)
  - National Officer of Human Rights and Peace (NORP)
  - National Officer of Global Health Education (NOGHE)
  - National Officer of Partnership (NOP)
  - National Officer of Reproductive and Sexual Health (NORSH)
  - Aboriginal Health Liaison (AHL)

- **VP-Global Health** (VP-GH): Responsible for guiding and coordinating GHP activities. Also sits on the CFMS Executive Board.

The structure and governance of the GHP is described in detail in the *Internal Operating Guidelines (IOGs)*. It is strongly recommended that you review this document and refer to it frequently throughout your term.
The CFMS is an official member of the International Federation of Medical Students’ Associations (IFMSA). The IFMSA is an independent, non-governmental and non-political federation of medical students' associations throughout the world. The IFMSA has national member organizations from over 100 countries, representing over 2 million medical students worldwide. The IFMSA is recognized internationally by such bodies as the World Medical Association, the World Health Organization (WHO), United Nations agencies including UNICEF and UNHCR, with whom it collaborates regularly.

Through our membership with the IFMSA, we are able to offer many clinical and research exchange opportunities to Canadian medical students. We are also able to connect with student leaders from around the world through resource-sharing, online forums, and in-person collaboration at IFMSA meetings. The National Officers and VP-Global Health act as the official liaisons between the IFMSA, but other GHP members and outside students have the opportunity to attend the IFMSA meetings in March and August of each year. Applications to attend these meetings are available in November and April, respectively.

For more information on the IFMSA, go to www.ifmsa.org.
Roles & Responsibilities

A) **Global Health Liaisons (GHLs)**

Global Health Liaisons are selected by each medical school through a process specific to their university. In most universities, the GHL Jr is elected in first year and continues on as GHL Sr in second year. This ensures good handover.

The GHL’s local responsibilities are set by their own faculty or medical society, and thus vary between schools. In addition to these mandated responsibilities, GHLs have specific responsibilities within the GHP. These include:

- Representing local medical students’ interests within the CFMS-GHP
- Actively participating in discussions and sharing ideas/feedback on the GHP listserv (to subscribe, send an email to cfmsghp+subscribe@googlegroups.com)
- Publicizing GHP opportunities at their medical school
- Forwarding relevant news, information, and reports to their medical school
- Attending the CFMS Global Health Program meetings in September and May of each year
- Participating in a CFMS-GHP small working group (optional)
- Taking on additional leadership roles within the CFMS-GHP if possible
- Reading and becoming familiar with this manual as well as with the GHP’s Internal Operating Guidelines

B) **Global Health Advocates (GHAs)**

Global Health Advocates (GHAs) are selected by each medical school, through a process specific to their university. They operate within the Global Health Advocacy Program (GHAP), a branch of the CFMS-GHP. The National Officer of Human Rights and Peace (NORP) is the leader of the GHAP. Their role is to organize local and national advocacy initiatives surrounding a particular theme in global health. This year’s theme is **Immigrant and Refugee Health.** As with GHLs, GHA local responsibilities will vary between schools. However, through the CFMS-GHP, the GHAs have specific national responsibilities. These include:

- Developing local advocacy initiatives around the yearly theme (it is recommended that GHAs partner with local interest groups, GHLs, etc)
- Actively participating in national advocacy initiatives around the yearly theme
- Collaborating with GHAs from other member schools to raise awareness about the GHAP theme
- Publicizing Global Health Advocacy Program (GHAP) opportunities at their medical school
- Forwarding relevant GHAP news, information, and reports to their medical school
- Actively participating in discussions and sharing ideas/feedback on the GHA listserv (to subscribe, send an email to global-health-advocate+subscribe@googlegroups.com)
- Submitting reports bi-annually (January and April) to the National Officer of Human Rights and Peace (NORP)
- Taking on additional leadership roles within the GHP if possible
- Reading and becoming familiar with this manual as well as with the GHP’s Internal Operating Guidelines
C) National Officers

National Officers (NOs) have a specific portfolio on which their activities focus. Within their portfolios, National Officers may provide specific services and/or support to the GHP and Canadian medical students. Alternatively, the National Officers may focus their activities on advancing the GHP’s vision through representation and advocacy work rather than providing direct-to-student services. A detailed description of each position is provided in the GHP’s Internal Operating Guidelines (IOGs).

National Officers are hired by a selection committee for a 12-month term (with several exceptions). Their responsibilities include:
- Attending the CFMS AGM and SGM meetings within their term
- Actively participating in the GHP/GHA listserv (and/or exchange program listserv)
- Sharing information about global health opportunities through the listserv
- Acting as leaders within GHP projects and working groups
- Providing regular reports and updates
- Drafting a yearly action plan with specific goals and objectives
- Providing support to GHP members
- Developing and maintaining partnerships with local, national and international organizations related to their area of interest
- Creating and maintaining a NO binder to be passed along to the next National Officer
- Ensuring a smooth handover between themselves and the next National Officer

D) Vice President Global Health (VP-Global Health)

The VP-GH is an elected member of the CFMS Executive. This term is one year in length. The VP-GH is responsible for overseeing projects that develop on a national level (via the National Officers), and supporting projects on the local level (via the Global Health Liaisons, or GHLs). The VP-GH is a liaison between these parties, as well as external persons and organizations such as the IFMSA.

The VP-GH is also responsible for:
1. **General Administrative duties**
   a. Moderating the GHP listserv
   b. Creating and compiling regular reports and updates
   c. Updating and distributing the GHL manual
   d. Facilitating the creation of GHP working groups and providing support to these groups throughout the year
   e. Providing regular support to GHP members through email communication, phone meetings, and teleconferences
   f. Hiring and training new National Officers according to the policy outlined in the Internal Operating Guidelines
   g. Organizing two GHP meetings each year (September and May)
   h. Communicating with GHP members through the CFMS GHP listserv - sharing global health opportunities and information in a timely and consistent manner
2. **Acting as CFMS President within the IFMSA**
   a. Attending all IFMSA meetings
   b. Organizing the CFMS delegation to IFMSA meetings
   c. Voting on behalf of Canadian students at the IFMSA plenary sessions
   d. Participating in IFMSA online forums
   e. Maintaining two-way communication between the IFMSA and the GHP

3. **Representing the GHP on the CFMS executive**
   a. Completing all reports and summaries required by the CFMS
   b. Attending CFMS executive meetings throughout the year
   c. Voting on behalf of the entire GHP
   d. Maintaining communication between the executive and the GHP

4. **Financial responsibilities**
   a. Creating a yearly budget
   b. Managing all expenditures within the GHP
   c. Keeping up-to-date financial records
   d. Submitting financial reports as needed
**Communication**

A) **GHP Listserv**

The listserv acts as the GHP’s virtual headquarters. *It is extremely important that all NOs and GHLs are subscribed to it and are receiving all messages. Be sure that when a new GHL is selected at your school that they subscribe to the listserv as soon as possible.* While this listserv is more GHL focused, GHAs are also encouraged to subscribe. Please be sure to adjust your junk mail folder settings so that you don’t miss anything.

To subscribe, send an email to [cfmsghp+subscribe@googlegroups.com](mailto:cfmsghp+subscribe@googlegroups.com) and you should be added within 48 hours. If not, contact the VP Global Health ([globalhealth@cfms.org](mailto:globalhealth@cfms.org)).

All GHP members are encouraged to use the listserv regularly to maintain ongoing discussion and interaction.

B) **GHAP Listserv**

The listserv acts as the GHAP’s virtual headquarters, and is moderated by the NORP. *It is extremely important that all GHAs are subscribed to it and are receiving all messages. Be sure that when a new GHA is selected at your school that they subscribe to the listserv as soon as possible.* Please be sure to adjust your junk mail folder settings so that you don’t miss anything.

To subscribe, send an email to [global-health-advocate+-subscribe@googlegroups.com](mailto:global-health-advocate+-subscribe@googlegroups.com) and you should be added within 48 hours. If not, contact the National Officer of Human Rights and Peace ([norp@cfms.org](mailto:norp@cfms.org)).

All GHAs are encouraged to use the listserv regularly to maintain ongoing discussion and interaction.

C) **Open CFMS Global Health Listserv: global@cfms.org**

This listserv was created in early 2009 to create an open forum to share information about global health related news and opportunities. ANYONE can join this listserv. All GHP members are encouraged to subscribe, and promote this new listserv at their schools.

To subscribe, visit [www.cfms.org/globalhealth](http://www.cfms.org/globalhealth) and click on Join Our Mailing List.
D) **CFMS Global Health Website: cfms.org/globalhealth**

Our new website contains news and information about CFMS-GHP activities, exchanges, and National Officer portfolios. There are links to applications and important documents, as well as to global health related websites. You can also join our mailing list on this site or read about updates on our Global Health Blog. All GHP members are encouraged to visit this site regularly for news and information.

E) **Reports**

In January, April, and September of each year all NOs will be asked to complete an official report. These reports will be compiled and distributed to all CFMS members. Additional information may also be collected for use within the GHP. The VP-GH will provide at least two weeks notice to complete these reports.

Outside of formal reports, the VP-GH and National Officers will be providing progress updates throughout the year. It is strongly encouraged the GHLs provide brief, regular updates on activities at their school when possible.

F) **Working groups**

Over the course of the year, several ad hoc working groups may be established for both one time projects and longer term initiatives. These groups will be chaired by any member of the GHP who has interest to do so. Chairs are responsible for updating the entire GHP on their progress. Working groups may interact through email, online chat, phone calls, or Skype/teleconferencing. Participation on working groups is strongly encouraged, but optional.

G) **Phone meetings with VP-GH or NOs**

The VP-GH and NOs are eager to discuss with and support the GHLs whenever needed. Perhaps you are facing a particular obstacle and you would like guidance. Perhaps you have a great idea that you would like to discuss. Perhaps you are simply the type of person that works better with regular person-to-person contact. Whatever the reason may be, please do not hesitate to request a meeting with the VP-GH or NOs; they are always happy to hear from you.

The VP-GH and NOs will strive to have at least one phone conversation with each GHL over the course of the year.
APPENDIX 1: ABBREVIATIONS

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tr>
<td>AGM</td>
<td>Annual General Meeting (CFMS)</td>
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<tr>
<td>AHL</td>
<td>Aboriginal Health Liaison</td>
</tr>
<tr>
<td>AM</td>
<td>August Meeting (IFMSA)</td>
</tr>
<tr>
<td>CCIH</td>
<td>Canadian Conference on International Health</td>
</tr>
<tr>
<td>CFMS</td>
<td>Canadian Federation of Medical Students</td>
</tr>
<tr>
<td>CFMS-GHP</td>
<td>CFMS-Global Health Program</td>
</tr>
<tr>
<td>CSIIH</td>
<td>Canadian Society for International Health</td>
</tr>
<tr>
<td>DOH</td>
<td>Determinants of Health</td>
</tr>
<tr>
<td>FMEQ</td>
<td>Fédération médicale étudiante du Québec</td>
</tr>
<tr>
<td>GA</td>
<td>General Assembly (IFMSA)</td>
</tr>
<tr>
<td>GSHI</td>
<td>Globally Significant Health Issues</td>
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<tr>
<td>IFMSA</td>
<td>International Federation of Medical Students’ Association</td>
</tr>
<tr>
<td>IFMSA-Qc</td>
<td>IFMSA-Québec</td>
</tr>
<tr>
<td>IOGs</td>
<td>Internal Operating Guidelines</td>
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<tr>
<td>GHL</td>
<td>Global Health Liaison</td>
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<tr>
<td>GHEC</td>
<td>Global Health Education Consortium</td>
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<tr>
<td>LEO</td>
<td>Local Exchange Officer</td>
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<tr>
<td>MonWHO</td>
<td>Montreal World Health Organization Simulation</td>
</tr>
<tr>
<td>MSF</td>
<td>Medecins sans Frontieres</td>
</tr>
<tr>
<td>NEO</td>
<td>National Exchange Officer</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-Governmental Organization</td>
</tr>
<tr>
<td>NOGHE</td>
<td>National Officer of Global Health Education</td>
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<tr>
<td>NORSH</td>
<td>National Officer of Reproductive and Sexual Health</td>
</tr>
<tr>
<td>NORP</td>
<td>National Officer of Human Rights and Peace</td>
</tr>
<tr>
<td>NOP</td>
<td>National Officer of Partnership</td>
</tr>
<tr>
<td>PAMSA</td>
<td>Pan-American Medical Students’ Association</td>
</tr>
<tr>
<td>PDT</td>
<td>Pre-departure training</td>
</tr>
<tr>
<td>SC</td>
<td>Standing Committee</td>
</tr>
<tr>
<td>SCOME</td>
<td>SC on Medical Education</td>
</tr>
<tr>
<td>SCOPE</td>
<td>SC on Professional Exchange</td>
</tr>
<tr>
<td>SCOPH</td>
<td>SC on Public Health</td>
</tr>
<tr>
<td>SCORA</td>
<td>SC on Reproductive Health including AIDS</td>
</tr>
<tr>
<td>SCORE</td>
<td>SC on Research Exchange</td>
</tr>
<tr>
<td>SCORP</td>
<td>SC on Refugees and Peace</td>
</tr>
<tr>
<td>SGM</td>
<td>Spring General Meeting (CFMS)</td>
</tr>
<tr>
<td>UNAIDS</td>
<td>Joint UN Programme on HIV/AIDS</td>
</tr>
<tr>
<td>UNESCO</td>
<td>UN Educational, Scientific and Cultural Organization</td>
</tr>
<tr>
<td>UNDP</td>
<td>UN Development Programme</td>
</tr>
<tr>
<td>UNFPA</td>
<td>UN Population Fund</td>
</tr>
<tr>
<td>UNICEF</td>
<td>UN Children’s Fund</td>
</tr>
<tr>
<td>VP-GH</td>
<td>Vice President Global Health</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
</tr>
<tr>
<td>WAD</td>
<td>World AIDS Day</td>
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# APPENDIX 2: GHP CONTACT LIST

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Email</th>
<th>School</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Halpine</td>
<td>Mary</td>
<td><a href="mailto:mhalpine@gmail.com">mhalpine@gmail.com</a></td>
<td>Dalhousie</td>
<td>GHL Sr.</td>
</tr>
<tr>
<td>Stymiest</td>
<td>Laura</td>
<td><a href="mailto:lcstymiest@mta.ca">lcstymiest@mta.ca</a></td>
<td>Dalhousie</td>
<td>GHL Jr.</td>
</tr>
<tr>
<td>Godin</td>
<td>Danielle</td>
<td><a href="mailto:danielle.godin@mail.mcgill.ca">danielle.godin@mail.mcgill.ca</a></td>
<td>McGill</td>
<td>GHL</td>
</tr>
<tr>
<td>Kerr</td>
<td>Denali</td>
<td><a href="mailto:elizabeth.kerr@medportal.ca">elizabeth.kerr@medportal.ca</a></td>
<td>McMaster</td>
<td>GHL Sr.</td>
</tr>
<tr>
<td>Gibson</td>
<td>Gillian</td>
<td><a href="mailto:gillian.gibson@medportal.ca">gillian.gibson@medportal.ca</a></td>
<td>McMaster</td>
<td>GHL Jr.</td>
</tr>
<tr>
<td>Lee</td>
<td>Theresa</td>
<td><a href="mailto:theresa.lee2@gmail.com">theresa.lee2@gmail.com</a></td>
<td>MUN</td>
<td>GHL Sr.</td>
</tr>
<tr>
<td>Pridham</td>
<td>Allison</td>
<td><a href="mailto:a_pridham1@hotmail.com">a_pridham1@hotmail.com</a></td>
<td>MUN</td>
<td>GHL Jr.</td>
</tr>
<tr>
<td>Robinson</td>
<td>Emily</td>
<td><a href="mailto:emily.robinson@nosm.ca">emily.robinson@nosm.ca</a></td>
<td>NOSM</td>
<td>GHL Sr.</td>
</tr>
<tr>
<td>Delorme</td>
<td>Tamara</td>
<td><a href="mailto:tdelorme@nosm.ca">tdelorme@nosm.ca</a></td>
<td>NOSM</td>
<td>GHL Jr.</td>
</tr>
<tr>
<td>Brace</td>
<td>Chantelle</td>
<td><a href="mailto:cbrace@qmed.ca">cbrace@qmed.ca</a></td>
<td>Queen's</td>
<td>GHL Sr.</td>
</tr>
<tr>
<td>Jindal</td>
<td>Priya</td>
<td><a href="mailto:pjindal@qmed.ca">pjindal@qmed.ca</a></td>
<td>Queen's</td>
<td>GHL Jr.</td>
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<tr>
<td>Subramanian</td>
<td>Yazhini</td>
<td><a href="mailto:yazhini@ualberta.ca">yazhini@ualberta.ca</a></td>
<td>U of A</td>
<td>GHL Jr.</td>
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<tr>
<td>Bana</td>
<td>Rabia</td>
<td><a href="mailto:rbana@ualberta.ca">rbana@ualberta.ca</a></td>
<td>U of A</td>
<td>GHL Jr.</td>
</tr>
<tr>
<td>Heyd</td>
<td>Chris</td>
<td><a href="mailto:chris.heyd@gmail.com">chris.heyd@gmail.com</a></td>
<td>UBC</td>
<td>GHL Sr.</td>
</tr>
<tr>
<td>Fairley</td>
<td>Jillian</td>
<td><a href="mailto:fairleyj@interchange.ubc.ca">fairleyj@interchange.ubc.ca</a></td>
<td>UBC</td>
<td>GHL Jr.</td>
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<tr>
<td>Williams</td>
<td>Kimberly</td>
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<tr>
<td>Watterson</td>
<td>Rita</td>
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<tr>
<td>Yurkowski</td>
<td>Christine</td>
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<tr>
<td>Shrom</td>
<td>Yael</td>
<td><a href="mailto:yaelshrom@hotmail.com">yaelshrom@hotmail.com</a></td>
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<td>GHL Jr.</td>
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<tr>
<td>Randhawa</td>
<td>Pal</td>
<td><a href="mailto:grand058@uottawa.ca">grand058@uottawa.ca</a></td>
<td>U of O</td>
<td>GHL</td>
</tr>
<tr>
<td>Rouleau</td>
<td>Desiree</td>
<td><a href="mailto:desiree.rouleau@gmail.com">desiree.rouleau@gmail.com</a></td>
<td>U of S</td>
<td>GHL Sr.</td>
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<tr>
<td>El-Hadi</td>
<td>Hadal</td>
<td><a href="mailto:hadal_7@hotmail.com">hadal_7@hotmail.com</a></td>
<td>U of S</td>
<td>GHL Jr.</td>
</tr>
<tr>
<td>Karas</td>
<td>Dominique</td>
<td><a href="mailto:dominique.karas@mail.utoronto">dominique.karas@mail.utoronto</a></td>
<td>U of T</td>
<td>GHL Sr.</td>
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<tr>
<td>Sandhu</td>
<td>Sherry</td>
<td><a href="mailto:simarjot.sandhu@mail.utoronto">simarjot.sandhu@mail.utoronto</a></td>
<td>U of T</td>
<td>GHL Jr.</td>
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<tr>
<td>Ghumman</td>
<td>Ammara</td>
<td><a href="mailto:ammaraghumman@gmail.com">ammaraghumman@gmail.com</a></td>
<td>UWO</td>
<td>GHL Sr.</td>
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<tr>
<td>Langer</td>
<td>Benjamin</td>
<td><a href="mailto:blanger2015@meds.uwo.ca">blanger2015@meds.uwo.ca</a></td>
<td>UWO</td>
<td>GHL Jr.</td>
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## APPENDIX 3: MAJOR THEME DAYS

### October

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<th>Date</th>
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<tbody>
<tr>
<td>1</td>
<td>International Day for Older Persons</td>
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<tr>
<td>4 - 10</td>
<td>World Space Week</td>
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<tr>
<td>5</td>
<td>World Teacher’s Day</td>
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<td>9</td>
<td>World Post Day</td>
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<tr>
<td>10</td>
<td>World Mental Health Day</td>
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<tr>
<td>16</td>
<td>World Food Day</td>
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<td>17</td>
<td>International Day for the Eradication of Poverty</td>
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<tr>
<td>24</td>
<td>United Nations Day and World Development Information Day</td>
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<td>24-30</td>
<td>Disarmament Week</td>
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### November

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
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<tbody>
<tr>
<td>6</td>
<td>International Day for Preventing the Exploitation of the Environment in War and Armed Conflict</td>
</tr>
<tr>
<td>16</td>
<td>International Day of Tolerance</td>
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<tr>
<td>Third Sunday</td>
<td>World Day of Remembrance for Road Traffic Victims</td>
</tr>
<tr>
<td>20</td>
<td>Universal Children’s Day, and Africa Industrialization Day</td>
</tr>
<tr>
<td>21</td>
<td>World Television Day</td>
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<tr>
<td>25</td>
<td>International Day for the Elimination of Violence against Women</td>
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<tr>
<td>29</td>
<td>International Day of Solidarity with the Palestinian People</td>
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### December

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<thead>
<tr>
<th>Date</th>
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<tbody>
<tr>
<td>1</td>
<td>World AIDS Day</td>
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<td>2</td>
<td>International Day for the Abolition of Slavery</td>
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<tr>
<td>3</td>
<td>International Day of Disabled Persons</td>
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<td>5</td>
<td>International Volunteer Day for Economic and Social Development</td>
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<td>7</td>
<td>International Civil Aviation Day</td>
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<td>9</td>
<td>International Anti-Corruption Day</td>
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<td>10</td>
<td>Human Rights Day</td>
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<tr>
<td>11</td>
<td>International Mountain Day</td>
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<tr>
<td>17</td>
<td>International Day to Stop Violence Against Sex Trade Workers</td>
</tr>
<tr>
<td>18</td>
<td>International Migrants Day</td>
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<tr>
<td>19</td>
<td>United Nations Day for South-South Cooperation</td>
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<tr>
<td>20</td>
<td>International Human Solidarity Day</td>
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<tr>
<td>27</td>
<td>International Day of Commemoration in memory of the victims of the Holocaust</td>
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<tr>
<td>28</td>
<td>International Day for the Eradication of Poverty</td>
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<tr>
<td>29</td>
<td>International Day of Solidarity with the Palestinian People</td>
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<tr>
<td>30</td>
<td>United Nations Day and World Development Information Day</td>
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<tr>
<td>31</td>
<td>Disarmament Week</td>
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### January

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<tbody>
<tr>
<td>27</td>
<td>International Day of Commemoration in memory of the victims of the Holocaust</td>
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### February

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<tr>
<th>Date</th>
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<tbody>
<tr>
<td>12</td>
<td>Sexual and Reproductive Health Day</td>
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<tr>
<td>21</td>
<td>International Mother Language Day</td>
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### March

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<th>Date</th>
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<tbody>
<tr>
<td>8</td>
<td>International Women’s Day and United Nations Day for Women’s Rights and International Peace</td>
</tr>
<tr>
<td>21</td>
<td>International Day for the Elimination of Racial Discrimination</td>
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<tr>
<td>21-28</td>
<td>Week of Solidarity with the Peoples Struggling against Racism and Racial Discrimination</td>
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<tr>
<td>22</td>
<td>World Water Day</td>
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<tr>
<td>23</td>
<td>World Meteorological Day</td>
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<tr>
<td>24</td>
<td>World TB Day</td>
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### April

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<tr>
<th>Date</th>
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<tbody>
<tr>
<td>4</td>
<td>International Day for Mine Awareness and Assistance in Mine Action</td>
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<tr>
<td>7</td>
<td>World Health Day</td>
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<tr>
<td>23</td>
<td>World Book and Copyright Day</td>
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<tr>
<td>25</td>
<td>Africa Malaria Day</td>
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### May

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<tr>
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<tr>
<td>3</td>
<td>World Press Freedom Day</td>
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<tr>
<td>15</td>
<td>International Day of Families</td>
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<tr>
<td>17</td>
<td>World Information Society Day (formerly World Telecommunication Day)</td>
</tr>
<tr>
<td>21</td>
<td>World Day for Cultural Diversity for Dialogue and Development</td>
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<tr>
<td>22</td>
<td>International Day for Biological Diversity</td>
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<tr>
<td>25-June 1</td>
<td>Week of Solidarity with the Peoples of Non-Self-Governing Territories</td>
</tr>
<tr>
<td>29</td>
<td>International Day of United Nations Peacekeepers</td>
</tr>
<tr>
<td>31</td>
<td>World No-Tobacco Day</td>
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APPENDIX 4: IMPORTANT DATES

Meetings/conferences:
CFMS Annual General Meeting (AGM): September 28-30, 2012; Winnipeg, Manitoba
IFMSA March Meeting: March 9-15, 2013; Washington DC, USA
CFMS Spring General Meeting (SGM): April 19-21, 2013; Quebec City, Quebec
IFMSA August Meeting: August 2013; Vina del Mar, Chile

Application deadlines:
Election of VP Global Health: September 29, 2012
Hiring of all other NOs: October 2012
Funding application for IFMSA March Meeting: November 2012
Funding application for IFMSA August Meeting: April 2012
APPENDIX 5: INTERNAL OPERATING GUIDELINES

General Operation

1. Name
   1.1 The official name is the Canadian Federation of Medical Students Global Health Program (GHP)

2. Nature
   2.1 The GHP is a subsection of the CFMS

3. Mission
   3.1 Recognizing that its members, as future physicians, are uniquely and strategically placed to promote the values of health equity and social responsibility, the CFMS-GHP will strive to empower students with all the tools they may need to grow as global health leaders and global citizens.

4. Vision
   4.1 In the spirit of responsible and sensitive global collaboration, we will facilitate ethical global health education, advocacy, action and experiences through coordinated national and international programming.

5. Positions
   5.1 Local Officers at CFMS-member universities:
      a. Global Health Liaisons
      b. Local Exchange Officers
   5.2 National Officers appointed by a GHP selection committee:
      a. National Officer of Reproductive and Sexual Health (NORSH)
      b. National Officer of Human Rights and Peace (NORP)
      c. National Officer of Partnerships (NOP)
      d. National Officer of Global Health Education (NOGHE)
      e. National Exchange Officer Senior (NEO)
      f. Aboriginal Health Liaison (AHL)
   5.3 Vice President Global Health elected by the CFMS general assembly

6. Finances
   6.1 The income of GHP is composed of a portion of the CFMS general budget
   6.2 The GHP proposes their yearly budget at the Annual General Meeting of September of each year for approval by the General Assembly
       6.2.1 The GHP operational budget must include projected expenses for travel, conference fees, communications, administrative costs, exchange pocket money, and any other costs related to the yearly functioning of the program
   6.2.2 The GHP may also consider applying for one-time funding for new projects or initiatives
   6.2.3 The VP Global Health’s travel expenses to and from CFMS executive meetings are not considered part of the GHP budget
   6.3 Travel spending should follow the guidelines set in the CFMS travel policy
   6.4 The GHP must submit records and original receipts to the CFMS VP Finance for all spending
       6.4.1 Reimbursement request must be accompanied with a completed copy of the CFMS Expense Claim Form
   6.5 Submissions to the VP Finance must be completed no less than every 4 months
   6.6 The VP Global Health is responsible for monitoring and managing spending within the GHP
       6.6.1 Expenditures from the GHP budget by GHP members must first be approved by the VP Global Health
       6.6.2 GHP members must submit original receipts and the Expense Claim Form to the VP-Finance within 4 months of spending
       6.6.3 GHP members must email a summary of their financial claims to the VP Global Health upon submitting them to the VP-Finance
       6.6.4 GHP members are responsible for keeping photocopies of all receipts and claims they submit
       6.6.5 GHP members must receive their reimbursements within 4 months of submitting their claim
   6.7 Funding for national meetings
       6.7.1 Local Officers do not receive any funding from the GHP budget to attend national meetings. They are encouraged to pursue funding external to the GHP budget
       6.7.2 All National Officers receive full funding to attend both national meetings within their term (SGM, AGM)
       6.7.3 The VP Global Health receives full funding to attend national meetings from the CFMS general budget, not the GHP budget

7 National Meetings
   7.1 The GHP meets twice yearly.
      a. The Annual General Meeting in mid-late September
      b. The Spring General Meeting in early May
   7.2 All GHP members are welcome to attend the national meetings
   7.3 The agenda for the National Meetings are set at least two weeks in advance of each meeting
      7.3.1 The VP Global Health is responsible for creating and distributing the agenda
7.3.2 The VP Global Health will consult and collaborate with GHP members on agenda content.
7.3.3 The VP Global Health will collaborate with the CFMS Executive to harmonize the GHP agenda with the general CFMS agenda to ensure that GHP members can attend relevant general sessions.

8 Relationship with the IFMSA
8.1 The CFMS is represented at the IFMSA through the CFMS-GHP.
8.2 Canada CFMS has a full membership with the IFMSA while IFMSA-Quebec/FMEQ is an associate member.
   8.2.1 CFMS retains the only voting right for Canada.
   8.2.2 Whenever possible, the VP Global Health collaborates with IFMSA-Quebec to reach an agreement on voting issues or to abstain from voting on an issue where an agreement cannot be made.
8.3 The VP Global Health acts as President of CFMS-Canada at the IFMSA meetings.
8.4 Members of the GHP liaise with the various standing committees of the IFMSA, including attending relevant sessions if attending IFMSA meeting and subscribing to their email listservs.
   a. NEOs liaise with the Standing Committees on Professional and Research Exchange.
   b. The NORSH liaises with the Standing Committee on Reproductive Health and HIV/AIDS.
   c. The NORGHP liaises with the Standing Committee on Human Rights and Peace.
   d. The NOP liaises with the Pan American Medical Students Association.
   e. The NOGHE liaises with the Standing Committee on Medical Education.
   f. The VP Global Health liaises with the IFMSA Presidents.
8.5 The GHP will send delegates to the IFMSA General Assemblies (GA) in March and August.
   a. The VP Global Health receives full funding to attend both meetings.
   b. The NEOs receive full funding to attend the August Meeting.
   c. The other NOs may receive full or partial funding to attend one IFMSA GA during their term should they submit a relevant proposal related to their attendance.
   e. Other GHP members and external students may receive full or partial funding on a case-by-case basis to attend an IFMSA GA should they submit a relevant proposal related to their attendance.
      i. Proposals will be assessed according to a standardized rubric.
8.6 Delegates at the IFMSA GAs must complete a post meeting report.
   8.6.1 The VP Global Health is responsible for creating the reporting format, collecting the reports, and compiling the reports into a one-page summary or another format approved upon by the delegates.
8.7 The VP Global Health is responsible for coordinating the group logistical and financial issues related to attending the GAs.
   8.7.1 The VP Global Health will ensure that all delegates register within deadline.
   8.7.2 The VP Global Health will coordinate with the CFMS VP Finance to transfer the registration fees within deadline.
   8.7.3 The VP Global Health will provide travel details, agenda, and other relevant information to delegates well in advance of the meeting.
   8.7.4 The VP Global Health will keep records of emergency contact information, flight details, and relevant medical information for delegates.
   8.7.5 All delegates are responsible for arranging their own transport to and from the meeting.
   8.7.6 Delegates receiving travel funding must seek approval from the VP Global Health before making their travel arrangements and they must stay within the allocated budget.
8.8 The VP Global Health is responsible for maintaining CFMS full membership status at the IFMSA.
   8.8.1 The VP Global Health will assure that yearly membership and exchange fees are paid within deadline.
   8.8.2 The VP Global Health will assure that the required online reports and contact information are submitted within deadline.

9. Relationship with the FMEQ/IFMSA Quebec
9.1 The GHP cooperates with the IFMSA-Quebec President through the VP Global Health and the NOP.
9.2 The GHP strives for maximum communication and cooperation with the IFMSA-Quebec President.
9.3 The GHP commits to exploring joint projects and/or initiatives with IFMSA Quebec.

Roles & Responsibilities

10. Vice President Global Health

10.1 Selection Process
10.1.1 The VP Global Health is elected by the CFMS General Assembly at the Annual General Meeting in September.
10.1.2 Position description and candidacy requirements will be distributed to students at all medical schools in early September.
10.1.3 Candidates must submit the appropriate paperwork in advance of the meeting or at the meeting itself (deadlines are provided in the “call for applications” distributed in early September).
10.1.4 Candidates have the opportunity to give a speech to the CFMS general assembly. If a candidate cannot attend the meeting, it is possible to arrange for a video presentation, to have the candidate phone-in, or to have someone present on their behalf.

10.2 Term
10.2.1 The VP Global Health holds a one-year term beginning at the CFMS AGM at which they are elected and terminating at the following CFMS AGM.
10.2.2 The past VP Global Health is expected to provide handover support to the new VP Global Health in the first few months of their term.
10.2.3 The past VP Global Health is expected to provide guidance and support when requested over the course of the new VP Global Health’s term.
10.2.4 The VP Global Health may resign from their position as follows:
   a. The VP Global Health must provide written notification to the CFMS Executive and the CFMS GHP at least 2 weeks in advance of resignation.
   b. The VP Global Health must assist in the recruitment of a replacement for the position.
   c. The VP Global Health must provide training and hand-over support to their replacement.
   d. The resigned VP Global Health must remain available for support and guidance throughout the rest of the year.

10.3 Relationship with CFMS Executive
10.3.1 The VP Global Health is a voting member of the CFMS Executive.
10.3.2 The VP Global Health attends all Executive meetings including in-person meetings and teleconferences.
10.3.3 The VP Global Health acts as a link between the CFMS Executive and the GHP.
   a. The VP Global Health represents the interests and concerns of the GHP to the Executive.
   b. The VP Global Health updates the GHP on the relevant activities of the Executive.
   c. The VP Global Health provides regular communication and updates on the GHP to the Executive.

10.4 General Duties
10.4.1 The VP Global Health moderates the GHP listserv and assures that all GHP members join the listserv at the beginning of their term.
10.4.2 The VP Global Health maintains an updated GHL manual which is distributed to GHP members at the start of their term. This manual must contain:
   a. a copy of the GHP constitution.
   b. a contact list for GHP members.
   c. a calendar of important days and events.
10.4.3 The VP Global Health provides monthly activity updates to the CFMS Exec and the GHP.
10.4.4 The VP Global Health facilitates the creation of working groups based on priorities identified by GHP members at the CFMS meetings.

10.4.5 The VP Global Health maintains ongoing communication with the National Officers and working group chairs through regular telephone meetings or emails.
10.4.6 The VP Global Health organizes and conducts a teleconference with all National Officers a minimum of two times per year.
10.4.7 The VP Global Health collects and compiles triannual reports from the NOs to be distributed within the GHP to GHP members, the CFMS executive, and the CFMS representatives.
10.4.8 The VP Global Health provides letter of support/reference for GHP members when requested.

10.5 Financial Responsibilities
10.5.1 The VP Global Health is responsible for all financial activities of the GHP.
10.5.2 The VP Global Health must create a yearly budget which is adopted at the October Executive meeting.
   a. this budget should be based on the budget from previous years with amendments for new expenses.
   b. the outgoing VP Global Health should prepare the tentative budget.
   c. National Officers and other GHP members requiring significant funding should be actively involved in creating the budget.
   d. the tentative budget should be presented to the GHP at the AGM.
   e. the new VP Global Health will collaborate with the outgoing VP Global Health and the VP-finance to finalize the budget.
   f. the new VP-Global Health will present the final budget to the CFMS Executive in October for approval.
10.5.3 The VP Global Health will review the claims submitted by GHP members.
10.5.4 The VP Global Health will provide triannual financial updates to the VP-finance including a summary of all the claims over the preceding 4 months.
10.5.5 Spending outside of the original budget must be approved by the CFMS executive.
   a. The VP Global Health must submit a proposal to the executive.
   b. The executive will vote on the proposal either at an Executive meeting or online.
10.5.6 Smaller budgetary changes (less than $400) may be approved directly by the VP Global Health through consultation with the VP Finance.

11. National Officers

11.1 Selection Process
11.1.1 National Officer applications will be distributed to all CFMS students at least two weeks in advance of application deadline.
   a. applications for NEO, NOP, NOGHE, NORSH, NORP, and AHL will be distributed in October.
11.1.2 Applications will be reviewed by a selection team including the outgoing National Officer, the VP Global Health, and a member of the CFMS Exec.
11.1.3 Candidates will be short listed to 2-4 candidates by the application committee and phone interviews will be conducted by the VP Global Health and out-going relevant NO.

11.2 Term
11.2.1 the NOP, NEO, NOGHE, NORSY, NORSN, NORSH, NORSY and AHL will begin their terms in November

11.3 General Duties
11.3.1 Attend the CFMS AGMs and SGMs which fall within their term
11.3.2 Subscribe to the GHP listserv (and other listservs if relevant)
11.3.3 Disseminate global health opportunities to GHL and LEOs as appropriate through the GHL or LEO listserv
11.3.4 Send the VP Global Health summaries of all reimbursement requests (to be sent at the same time as submitting the request and receipts to the VP Finance)
11.3.5 Submit a report to the VP Global Health tri-annually (September, January, and April). This includes:
   a. a brief report on completed activities including quantitative estimates of impact
   b. a description of ongoing efforts within committees
   c. fundraising efforts as appropriate
11.3.6 Provide key resources, opportunities, and links in their area to GHP members
11.3.7 Create and maintain a specific NO binder which will be submitted to the VP Global Health and passed on to the succeeding NO prior to the SGM. This binder should include:
   a. copies of the tri-annual reports for the preceding 2 years
   b. brief, chronological summaries of all conference calls, meetings and conferences from the most recent term only
   c. appropriate contact lists
   d. ideas collected during his/her term

11.4 Specific Duties
11.4.1 National Officer of Partnerships (NOP)
   a. Responsible for creating new and sustaining existing appropriate partnerships with external global health-related organizations, such as federal bodies, multilateral organizations and NGOs.
   b. Provide support and national linkages for Liaison Officers of nationwide global health projects, such as the Global Health Mentorship Project and the StopTB Campaign.
   c. Seek out new and existing national global health projects that should be liaising with the CFMS GHP.
   d. In conjunction with Liaison Officers, submit funding proposals and seek funding on behalf of National Global Health projects, including the Global Health Mentorship Project (UWO).
   e. Maintain and update the CFMS Global Health website, synthesizing input from NOs and GHLs as needed. Ensure continuous website input from all other NOs.
   f. Strategize to improve communications between VP Global Health, National Officers, GHLs and LEOs as appropriate.
   g. Administrate the CFMS Global Health listserv.

11.4.2 National Officer of Reproductive and Sexual Health (NORSY)
   a. Implement projects which seeks out, creates or provides access to sexual health and/or reproductive health related opportunities directly to individual students and grassroots initiatives at medical schools. This initiatives should be guided by the VP Global Health and the GHLs, with input provided at the SGM.
   b. Provide resources regarding sexual and reproductive health where relevant or requested.
   c. Understand and document the sexual and reproductive health projects happening at CMFS medical schools.
   d. If interested, attend one IFMSA General Assembly (preferably August Meeting), by submitting a relevant proposal and work plan to the VP Global Health for consideration.
   e. Subscribe to the IFMSA Standing Committee on Reproductive Health and HIV/AIDS (SCORA) listserv and monitor international action in the realm of SCORA.

11.4.3 National Officer of Human Rights and Peace (NORSN)
   a. Coordinate the Global Health Advocacy Program, uniting Global Health Advocates at each school to advocate in unison towards a national theme to be reviewed at each AGM.
   b. Implement projects which seek out, create or provide access to human rights and peace -related opportunities directly to individual students and grassroots initiatives at medical schools. Initiatives should be guided by the VP Global Health and the GHLs with input provided at the SGM.
   b. Provide resources regarding human rights and peace where relevant or requested.
   c. Understand and document the human rights and peace-related projects happening at CMFS medical schools.
   d. If interested, attend one IFMSA General Assembly (August Meeting), by submitting a relevant proposal and work plan to the VP Global Health.
   e. Subscribe to the IFMSA Standing Committee on Human Rights and Peace (SCORP) listserv and monitor international action in the realm of SCORP.
ii. Distributing the Application Forms of outgoing students among host countries
iii. Distributing the received Cards of Acceptance to outgoing students
iv. Gathering the Evaluation Forms of outgoing students from local officers and forwarding them to the Evaluation Coordinator and the National Officer of host countries
d. Coordinate incoming students:
   i. Gathering the Application Forms of incoming students from partner countries
   ii. Distributing the Application Forms of incoming students to the regional officers
   iii. Gathering the Cards of Acceptance from REOs and sending them to partner countries
   iv. Managing the research project database and ensuring that these are available to incoming students.
e. Draft reports to the IFMSA:
   i. Submitting statistic reports upon completion of exchanges
   ii. Obtaining approval for research projects before accepting incoming students

11.4.5 National Officer of Global Health Education
a. Actively participate as the on the AFMC Global Health Interest Group as the representative of the CFMS.
   i. Participate in regular email discussion, and attend both biannual teleconference calls and the yearly AFMC Global Health Interest Group meeting in May (in the same location as the SGM/CCME).
   ii. Understand the current status of GH education at all CFMS medical schools through regular communication with GHLs or their designates.
   iii. Liaison between GHLs, faculty members and the AFMC to help establish standardized global health curricula across medical schools.
   iv. Participate in researching, drafting and implementing GH curriculum guidelines.

b. Actively participate on the Global Health Education Consortium Board of Directors as the representative from the CFMS.
   i. Participate in biannual teleconference calls, and attend both the November GHEC Board Meeting and the April GHEC Conference.
   ii. Co-chair or actively participate on the GHEC Student Advisory Committee, providing input to GHEC projects and strategic planning.

11.4.6 Aboriginal Health Liaison
a. Engage and collaborate with students interested in Aboriginal health at each of the CFMS 14 member schools
b. Promote the adoption of core competencies in Aboriginal health as mandatory components of undergraduate medical education in Canada
c. Liaise between the CFMS and the Indigenous Physicians Association of Canada
d. Create and sustain new partnerships with external Aboriginal health-related organizations as required
e. Disseminate Aboriginal health related opportunities via the Global Health listserv

12. GHLs

12.1 Selection Process
12.1.1 the selection of GHLs is determined by the MedSoc and/or faculty at each university
12.1.2 the use of a Jr./Sr. system for GHLs is up to the discretion of the MedSoc and/or faculty, but it strongly encouraged by the GHP

12.2 Term
12.2.1 the term of GHLs is determined by the MedSoc and/or faculty at each university

12.3 Duties
12.3.1 The duties of a GHL are mandated by their MedSoc and/or faculty at each university according to their unique needs, priorities, and curricula

12.4 Responsibilities within the GHP
12.4.1 Represent their medical school in the GHP
12.4.2 Attend the CFMS AGM and SGM
12.4.3 Subscribe to the CFMS-GHP listserv (subscribe by sending an email to cfmsghp+subscribe@googlegroups.com)
12.4.4 Forward important emails, notices, and applications to their medical classes within a timely manner
12.4.5 Forward global health news items and other information to medical classes when relevant
12.4.6 Provide feedback, guidance, and resources to other GHP members via the listserv
12.4.7 Take on additional leadership roles or initiatives within the GHP if possible.

12.5 Funding
12.5.1 The GHLs are funded by their MedSoc or Faculty
12.5.2 The VP Global Health and National Officers will distribute information about other funding opportunities when available
12.5.3 Funding for working group-related expenses is available pending approval by the VP Global Health

GHP Activities

13. Awareness Days
13.1 A list of major awareness days will be distributed by the VP Global Health within the GHL manual in September
13.2 GHP members will share resources for awareness days through the GHP listserv whenever possible
13.2.1 National Officers liaising with IFMSA standing committees will distribute relevant information and/or resources they
14. Working Groups
14.1 Working groups will be formed at the CFMS AGM in September.
14.1.1 The topic of the working groups will be decided at the AGM based on the needs and priorities of the GHP.
14.1.2 Working groups are expected to present the results of their efforts to the entire GHP at the SGM in May.
14.1.3 Working groups may continue into the summer depending on need and working group member availability.
14.2 Chairs or co-chairs will be selected on a volunteer basis.
14.2.1 Chairs/co-chairs are responsible for guiding the efforts of the working group, facilitating online discussion, ensuring the deadlines are met, and arranging for phone meetings when necessary.
14.2.2 Funding for phone meetings must be approved in advance through the VP Global Health.
14.2.3 Chairs/co-chairs are responsible for providing regular updates and meeting minutes to the VP Global Health.

15. AGMs and SGMs
15.1 The GHP meets twice per year, at the AGM in September and the SGM in May.
15.2 Funding to attend these meetings are outlined in “Roles and Responsibilities”, section 10-14.
15.3 The agenda for the meetings will be distributed at least 2 weeks in advance of the meeting date.
15.3.1 The VP Global Health will create the agenda in collaboration with the National Officers, working group chairs, and other GHP members, where relevant.
15.3.2 The VP Global Health will work with the CFMS Exec to harmonize the GHP meeting agenda with the general CFMS meeting agenda.
15.4 The GHP must submit a report to the CFMS in advance of the meeting.
15.4.1 The AGM/SGM report will be compiled from the tri-annual NO reports described in “Roles and Responsibilities”, section 10-14.
15.4.2 The VP Global Health is responsible for compiling and submitting the AGM/SGM reports within the deadline set by the CFMS executive.
15.5 The GHP must make a presentation to the entire CFMS delegation at each meeting.

16. Decision-Making
16.1 Most of the decision-making within the GHP occurs through informal consensus and discussion.
16.2 Any member can request to call a vote on a particular decision.
16.3 Members with voting rights are as follows:
   a. one GHL (or their representative) from each university.
   b. NEOs, NORSH, NOP, NOGHE, and NORP.
16.3.1 In the case of a tie, the VP-Global Health may also vote.
16.4 There are three types of voting:
   a. In-person voting at AGMs and SGMs. Simple majority is required.
   b. Online voting: Voting members must be granted at least one week to vote by email. Simple majority is required.
   c. Voting by special resolution (for bylaw changes only). 75% majority is required.

17. Changes to the IOGs
17.1 Amendments to the Internal Operating Guidelines may be made by special resolution, as defined below:
17.1.1 Special resolution is defined as:
   a. a resolution passed at a General Meeting of the membership of the GHP. The resolution must be distributed to GHP members at least 2 weeks in advance of the General Meeting. 75% majority is required.
   b. a resolution passed over email. Voting members must be given at least 2 weeks to vote. 75% majority is required.
17.2 The VP Global Health will recruit a constitutional review committee following the AGM of 2-3 GHP members.
17.2.1 The constitutional review committee is responsible for identifying outdated or unclear sections of the IOGs.
17.2.2 The constitutional review committee is responsible for identifying any spelling, grammatical, or formatting errors.
17.2.3 The constitutional review committee is responsible for proposing the necessary amendments to the constitution in order to keep the document up-to-date, accurate, and relevant.
17.2.4 The constitutional review committee may be consulted by any GHP member about issues related to GHP IOGs.