

Japan Medical Association Junior Doctors Network Report on the WMA General Assembly, Moscow, 2015

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Introduction

The Junior Doctors Network (JDN), approved by the World Medical Association (WMA) in 2010, is an international network of junior doctors. The Japan Medical Association Junior Doctors Network (JMA-JDN) was established as the national JDN in Japan in 2012 under the JMA Global Health Committee and started its activities as a member of the WMA-JDN in 2013. This is the report of the 3 JMA-JDN members who participated in the 2-day JDN Conference held on October 12 and 13 preced-

ing the 2015 WMA General Assembly in Moscow.

More than 30 junior doctors from 17 countries—Japan, South Korea, Myanmar, the Philippines, the United States, Canada, Peru, Brazil, Turkey, Greece, Portugal, Spain, Germany, Macedonia, Kuwait, Nigeria, and South Africa—gathered at this year's JDN Conference. Three members from Japan—Abe, Mishima, and Kishi—attended the conference. The 2-day conference included activity reports by each country, proposals for policy statements, and a board member election, and we received encourage-



WMA President Dr. Hoven and JDN members from various countries

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ment and lectures from the WMA leaders.

Policy Statements Proposed by the JDN

Our report begins with the policy statement proposals. Proposing policy statements to the WMA is one of the JDN's most important tasks. JDN members discuss various policies and propose them to the WMA Council for final review. In particular, physicians' well-being is a key topic that the JDN has been working on since its launch in 2010. Physicians, who are in the position of providing care for patients, often ignore their own health. Medical students and junior doctors who rotate among different departments are especially prone to suffering from depression because their interpersonal relationships and work hours frequently change. Overwork is also a major problem; in Greece, where the national economy is in crisis, as well as in South Korea, there are junior doctors who reportedly are unable to go home for days. Even in European countries where work hours are limited by law, the system apparently is not functioning in areas that have a shortage of physicians. Harassment prevention, swift support for physicians who are ill, and privacy protection will play important roles in maintaining the health of junior doctors. The JDN recently finalized a policy statement consisting of 12 items pertaining to physicians' well-being, and the statement was resolved by the WMA Council.¹

Other topics in which the JDN has been involved recently include smallpox, the elimination of nuclear weapons, and climate change. The issue of climate change will likely become a key topic in the future. The United Nations adopted the Sustainable Development Goals (SDGs) in August 2015, which include the need for urgent measures to address climate change and accessibility to sustainable energy by all people. The Millennium Development Goals (MDGs) will expire at the end of 2015 and be replaced by the SDGs, allowing medical professionals to shape what we can do for the SDGs. The WMA continues to expect the JDN to take a proactive role in policy proposals. The JMA-JDN shall actively speak out at the JDN meetings while improving the language proficiency for debates and learning about policy proposals.

Social Exchanges with Other Countries

Social exchanges with junior doctors of other countries are one of the most enjoyable aspects of the JDN. The JMA-JDN particularly emphasizes exchanges with JDN members of our neighboring nation, South Korea. During the WMA General Assembly sessions in Moscow, we had a discussion with the chair and vice-chair of the Korean Association of Public Health Doctors (KAPHD) and agreed to hold the Japan-Korea JDN exchange project in January 2016. We are also making progress on our unique project to accept trainees for simple, short-term training in Japan. The JDN has been considering an exchange program, and its pilot program is finally going to begin. It is likely that issues such as proof of study and insurance will be entrusted to the Educational Commission for Foreign Medical Graduates (ECFMG). We have a lot to expect from these programs.

A Country Presentation session was also held during the JDN Conference. This session involved presentations about the activities and developments of the participating national JDNs and was one of the liveliest aspects of the conference. For example, Myanmar, in which democratization is progress, introduced the "black ribbon movement," a nonviolent resistance campaign in which medical professionals who fear the militarization of the health ministry show their objection by wearing black ribbons. Photos of smiling physicians and medical students in white coats wearing black ribbons were shown



From left: Kishi, Abe, and Mishima of JMA-JDN, and Dr. Murt, Chair of JDN (Turkey)

to the audience. The report from Peru, meanwhile, was a shocking one. Medical professionals in Peru are obliged to complete 1 year of medical service in a remote area, and the work environment to which some are sent can be quite rigorous—for example, the only medical device available is a manometer, or it takes 10 hours to reach the nearest secondary-care facility on foot, or there is no phone, so a dispatched junior doctor cannot consult a senior physician about treatment methods. Some physicians in training develop mental health problems from cultural and/or language differences, and some become victims of violence from local residents. Every year, about 10 junior doctors in Peru are forced to suspend their term of service, and in some extreme cases, doctors go missing or die. This story renewed our awareness that the work environment and well-being of junior doctors are important issues in any nation.

Representing Japan, the JMA-JDN presented developments of the past 3 years and introduced JMA-JDN seminars, Japan-Korea exchanges, and our plan for a study-abroad program. To our delight, Japan won first place in the vote to determine the most excellent presentation. Learning about the efforts of other countries gave us a good opportunity to evaluate our activities in Japan in relation to theirs and to consider what initiatives we junior doctors are expected to take.

Conclusion

This report has provided a brief overview of the

JDN Conference at the WMA General Assembly in Moscow. This was the fourth time for Abe and Mishima, who participated in the 2013 Fortaleza General Assembly, the 2014 Tokyo Council, and the 2014 Durban General Assembly, joined the JDN Conference. The election for 2015/2016 JDN board members was also held, and Mishima of JMA-JDN was elected to be in charge of membership. This is a sign of the friendship and trust JMA-JDN has nurtured with the national JDNs worldwide.

The next WMA General Assembly will be held in Taiwan in October 2016. The JMA-JDN shall strengthen the network of junior doctors in Asia and Pacific region even further with the upcoming Taiwan General Assembly in mind.

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Reference

1. World Medical Association. WMA Statement on Physicians Well-Being. 2015. <http://www.wma.net/en/30publications/10policies/p9/index.html>. Accessed December 2015.