**Welcome to IMIA!**

**General**

The International Medical Informatics Association is an independent organization established under Swiss law in 1989. The organization was founded in 1967 as Technical Committee 4 of the International Federation for Information Processing (IFIP). In 1979, it evolved from a Special Interest Group of IFIP to its current status as a fully independent organization. IMIA continues to maintain its relationship with IFIP as an affiliate organization. As well, IMIA also has close ties with the World Health Organization (WHO) as a NGO (Non Government Organization). The working language of IMIA is English.

**Purpose, Goals, Objectives**

IMIA plays a major global role in the application of information science and technology in the fields of healthcare and research in medical, health and biomedical informatics. The basic goals and objectives of the association are to:

- promote informatics in health care and research in health, bio and medical informatics;
- advance and nurture international cooperation;
- to stimulate research, development and routine application;
- move informatics from theory into practice in a full range of health delivery settings, from physician’s office to acute and long term care;
- further the dissemination and exchange of knowledge, information and technology;
- promote education and responsible behaviour; and
- represent the medical and health informatics field with the World Health Organization and other international professional and governmental organizations.

In its function as a bridge organization, IMIA's goals are:

- moving theory into practice by linking academic and research informaticians with care givers, consultants, vendors, and vendor-based researchers;
- leading the international medical and health informatics communities throughout the 21st century;
- promoting the cross-fertilization of health informatics information and knowledge across professional and geographical boundaries; and
- serving as the catalyst for ubiquitous worldwide health information infrastructures for patient care and health research.

**Membership**

IMIA membership consists of National, Institutional and Affiliate Members and Honorary Fellows. **National Members** represent individual countries. A member is a society, or a similar appropriate body, which is representative of the bio-medical, and health informatics activities within that country. In the absence of a national member, IMIA accommodates involvement by individuals through a “Corresponding” membership in developing countries and provides encouragement to form a representative society. National IMIA members may organize into regional groups. Currently, such regions exist for Latin America and the Caribbean (IMIA LAC), Europe (EFMI), Asia/Pacific (APAMI) and Africa (Helina).

**Institutional Members** consist of corporate and academic members. Corporate members include vendor, consulting, and technology firms as well as national professional organizations. Academic members include universities, medical centres, research centres and other similar institutions.

**Affiliate Members** consist of international organizations that share an interest in the broad field of health and bio-medical informatics. In addition to WHO and IFIP, the International Federation of Health Records Organizations (IFHRO) is an affiliate member of IMIA.

**Honorary Fellows** are individuals who have demonstrated exceptional merititious service
in furthering the aims and interests of the IMIA; fellowship is conferred for life. The last honour of fellowship was awarded in 2004 to Dr. K.C. Lun, IMIA Past President, from Singapore for his demonstrated leadership and his many years of selfless service to IMIA.

Working and Special Interest Groups - the IMIA family includes a growing number of Working and Special Interest Groups, members consist of individuals who share common interests in a particular focal field. The groups hold Working Conferences on leading edge and timely health, medical and bio-medical informatics issues. Current and future activities of the Working and Special Interest Groups are posted on the IMIA Website at www.imia.org; a summary is included in the IMIA Yearbook.

Governance

IMIA is governed by a General Assembly that consists of one representative from each IMIA National and Institutional member, Honorary Fellows, Chairs of IMIA’s Working Groups and a representative from IFIP’s World Health Organization, and each of IMIA’s Regions. Only National Members have full voting rights. The General Assembly meets annually. The Board of IMIA, elected by the General Assembly, conducts the association’s affairs. The day-to-day operations are supported by the IMIA’s Executive Director who is also responsible for IMIA’s electronic services. The officers of the Board and IMIA’s vice presidents vigorously pursue IMIA’s mission to:

- Monitor the range of special interest areas and focus support on new developments.
- Capitalize on the synergies and collective resources of IMIA’s constituents.
- Minimize fragmentation between scientific and professional medical informaticians.
- Ensure successful adaptation to changes in the medical informatics marketplace and discipline.
- Raise the profile and awareness of IMIA within and outside of the IMIA organization.
- Encourage cooperation between the scientific and commercial health informatics communities.
- Equitably balance support to emerging and existing IMIA members.
- Establish and maintain cooperation and harmony with organizations that emerge to address medical informatics issues.
- Continue to position IMIA as the gatekeeper for medical informatics issues in the international community.

MedInfo’s

IMIA organizes the internationally acclaimed tri-annual “World Congress on Medical and Health Informatics”, MedInfo. MedInfo 2007 will be held in Brisbane, Australia August 20-24, 2007. Potential participants and exhibitors are encouraged to visit their web site at www.medinfo2007.org. The Health Informatics Society of Australia Ltd (HISA) is the hosting society for MedInfo 2004. This marks the 1st time that a MedInfo has been held “Down Under”.


Invitations for bids for the hosting of MedInfo 2010 have been sent out to IMIA’s European and African members; the location and host for MedInfo 2010 will be decided by the General Assembly in their Annual General meeting in the fall of 2006.

Current Initiatives - Strategic Planning Process

IMIA has instituted a comprehensive Strategic Planning Process to create a strategic alignment of IMIA’s goals with the needs of its stakeholders and in turn to create a framework of the IMIA agenda for the future. The Strategic Plan, still a ‘work in progress’, is expected to be completed in 2007. Dr. Nancy Lorenzi, IMIA President, championed this process in early 2004 and with the support of a multi-disciplinary Strategic Planning Committee has engaged the IMIA community through a highly interactive process to shape IMIA’s future - to be a more visible and important organization by better meeting the needs of members and the global health informatics community worldwide.

IMIA code of Ethics

IMIA reached a major milestone by the adoption of the “IMIA Code of Ethics for Health Information Professionals”. The approval of the code in 2002 was the culmination of years of ongoing effort on the part of IMIA’s Working Group on Data Protection in Health Information Systems. The code has been translated into several languages and is freely available to the public at IMIA’s website www.imia.org.

Official Journals

Schattauer GmbH’s Methods of Information in Medicine and Elsevier Science’s International Journal of Medical Informatics were accorded the status of “an Official Journal of the International Medical Informatics Association” in 2003. Methods of Information in Medicine, publishes IMIA news and a Calendar of events in each issue.

General

IMIA continues to develop its communication capabilities through its web-site www.imia.org. The site contains profiles on its members, working groups and activities. IMIA is constantly striving to further the services it provides to its members and the informatics community in general by promoting free interaction among and between its member network and the medical and health informatics community at large.