

## Information on IMIA

### International Medical Informatics Association

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2007 - 2010

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##### Working & Special Interest Groups

Hyeoun-Ae Park, Korea  
2008 - 2011

##### Special Affairs

Hiroshi Takeda, Japan  
2007 - 2010

##### Strategic Planning Implementation

Peter Murray, United Kingdom  
2008 - 2011

#### Acting Executive Director

Peter Murray, United Kingdom  
2009 - 2010

IMIA Web site: [www.imia.org](http://www.imia.org)

#### IMIA REGIONS

##### EFMI: European Federation for Medical Informatics

George Mihalas, Romania, Vice President

##### IMIA-LAC: Federation of Health Societies in Latin America

Alvaro Margolis, Uruguay, Vice-President

##### APAMI: Asian Pacific Association for Medical Informatics

Yu-Chuan (Jack) Li, Taiwan, Vice President

##### HELINA: African Region

Ghislain Kouematchoua, Germany, Vice President

##### North America Region

David Bates, USA, Vice-President

## WELCOME TO IMIA!

### General

The International Medical Informatics Association (IMIA) is an independent organization established under Swiss law in 1989. IMIA was founded in 1967 as Technical Committee 4 of the International Federation for Information Processing (IFIP). Since 1979, IMIA has evolved from a Special Interest Group of IFIP to its current status as a fully independent international organization, although continues to maintain its relationship with IFIP as an affiliate organization and has an appointed Liaison Officer.

IMIA also has close and collaborative ties with the World Health Organization (WHO) as a NGO (Non Government Organization) with appointed Liaison Officers from both the WHO and IMIA.

The working language of IMIA is English.

### IMIA's Strategic Plan - Towards IMIA 2015

Following almost five years of work by the Strategic Planning Taskforce, which represented national members, working groups, corporations, academic members and IMIA headquarters, and which was initiated and lead by Dr. Nancy Lorenzi, IMIA Past President, IMIA's Strategic Plan, 'Towards IMIA 2015', was unanimously approved by the IMIA General Assembly at its meeting at MedInfo2007 in Brisbane, Australia in August, 2007 (and in conjunction with IMIA's 40th birthday). The development of the IMIA Strategic Plan drew on the results of a 2003-04 world-wide survey conducted to assess what IMIA members would like to see IMIA do or become by the year 2015. The IMIA Strategic Planning Task Force reported to,

and gained valuable input from, the IMIA General Assembly in 2005 (Geneva) and 2006 (Washington, DC) and the IMIA Board in 2007 (Nashville); IMIA is indebted to all who contributed. The IMIA Strategic Plan, 'Towards IMIA 2015', is available on the IMIA website, and has been presented, and its development process discussed, in the IMIA Yearbook and other publications [1, 2, 3].

### Vision

There will be a world-wide systems approach for healthcare. Clinicians, researchers, patients and people in general will be supported by informatics tools, processes and behaviours that make it easy to do the right thing, in the right way, at the right time to improve health care for all. This systems approach will incorporate and integrate research, clinical care and public health. To achieve this vision it will require everyone being supported by informatics-based information and communication systems and technologies.

IMIA will provide leadership and expertise to the multidisciplinary health focused community and policy makers to enable the transformation of healthcare in accord with the world-wide vision to improve the health of the world population. IMIA will fulfil its vision by:

- Being the scientific informatics association through which the world's knowledge leaders come together to effectively and efficiently create, assemble, integrate, synthesize or assimilate intellectual knowledge that is required worldwide to advance biomedical informatics in its role of improving health and healthcare.
- Being the informatics association that effectively and efficiently connects people and the nations of the world to be able to accomplish the above purpose.

The IMIA Strategic Plan details the vision, guiding principles and strategic framework model [1]. However, the development of a Strategic Plan is the first step of a longer process of organisational transformation. IMIA has developed a Transition Plan (available on the IMIA website), which acts as a flexible roadmap, or bridge, to the future, identifying specific areas of activity to guide and monitor evolution towards achieving the vision outlined in the IMIA Strategic Plan. The IMIA Board, meeting in Dublin, Ireland in April 2009, devoted a full day to discussion of practical activities needed to ensure successful transformation and will continue this work during 2009-10. Proposals for the expansion of IMIA's 'office' and services will be presented to the 2009 General Assembly meeting in Hiroshima, Japan in November 2009.

## 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 for developing countries as a means of providing encouragement and support to form a representative national 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). A North American Region is in formation. Regions are represented at the IMIA General Assembly and Board by Vice Presidents appointed by their respective regions.

**Institutional Members** consist of corporations and academic institutions.

Corporate members currently include vendor, consulting, technology firms, publishers and national professional organizations. Academic members include universities, medical centres, research centres and other similar institutions. Academic members have recently organized to meet on annual basis in conjunction with the IMIA General Assembly to heighten connectivity and deal with areas of mutual concern. **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. IMIA's Liaison Officers to WHO (Dr. Antoine Geissbuhler, Switzerland) and IFIP Dr. Hiroshi Takeda, Japan) are working collaboratively on projects of mutual interest.

**Honorary Fellows** are individuals who have demonstrated exceptional meritorious service in furthering the aims and interests of IMIA; fellowship is conferred for life.

**Working and Special Interest Groups** provide opportunities for collaboration among individuals who share common interests in a particular focal field. The Nursing Informatics Special Interest Group (IMIA-NI) hold a triennial congress (the next will be NI2012 in Montreal, Canada), and other 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 and a summary is included in the IMIA Yearbook.

## Governance

IMIA is governed by a General Assembly, which meets annually, and consists of one representative from each IMIA National and Institutional member, Honorary Fellows, Chairs of IMIA's Working Groups and a representative from IFIP, the World Health Organi-

zation, and each of IMIA's Regions. Only National Members have full voting rights.

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 triennial "World Congress on Medical and Health Informatics", MedInfo. MedInfo 2010 will be held in Cape Town, South Africa on September 13 -16, 2010, hosted by the South African Health Informatics Association (SAHIA). This marks the first time that a MedInfo will have been held on the African Continent. Potential participants, sponsors and exhibitors are

encouraged to visit their web site at <http://www.medinfo2010.org>

Previous MedInfo's have been held in Stockholm, Sweden (1974), Toronto, Canada, (1977), Tokyo, Japan (1980), Amsterdam, The Netherlands (1983), Washington, USA (1986), Beijing/Singapore (1989), Geneva, Switzerland (1992), Vancouver, Canada (1995), Seoul, Korea (1998), London, UK (2001), San Francisco, USA (2004), and Brisbane, Australia (2007).

### Current Major Initiatives

IMIA has been investing in the development of its Regions, notably HELINA (Africa) and IMIA-LAC (Latin America and Caribbean). In Africa, in collaboration with the WHO, IMIA assisted in the hosting of a major pan-African Conference (2007) in Mali, which was followed up by another stakeholder meeting in Yaoundé, Cameroun in November, 2007, and a successful HELINA conference was held in Abidjan, Cote d'Ivoire in April 2009. SAHIA, in preparation for MedInfo 2010, has been expanding its conferences, in Durban in 2008 and Johannesburg in 2009.

To facilitate growth and progress in Latin America, IMIA provided funding to IMIA-LAC to support representative participation at the very successful "InfoLAC 2008 - Advances in medical informatics and their impact on healthcare systems" congress, held in October, 2008, in conjunction with meetings of the IMIA Board and the Education in Health and Medical Informatics Working Group.

In addition, IMIA's Vice-president Special affairs, Hiroshi Takeda (Japan) continues to liaise with Middle East countries in preparation for a future Middle East region.

These initiatives are completely aligned with the Strategic Plan and the philosophical personal vision of IMIA's new President, Prof. Dr. Reinhold Haux who has taken on the difficult task of overseeing the implementation and execution of the Plan and to foster his personal vision:

*"That IMIA provides a model example for successful, tolerant and peaceful collaboration of individuals, beyond any nations and cultures, for the sake of health and quality of life of the people in our world".*

### IMIA Code of Ethics

IMIA adopted the "IMIA Code of Ethics for Health Information Professionals" in 2002. The code has been translated into several languages, is being translated into others, and is freely available to the public at IMIA's website.

### Official Journals

Two scientific publications, Schattauer GmbH's *Methods of Information in Medicine* and Elsevier Science's *International Journal of Medical Informatics*, have been accorded the status of "an Official Journal of the International Medical Informatics Association" since 2003. *Methods of Information in Medicine* also publishes IMIA news and a calendar of events in each issue. A third official journal, titled

*Applied Clinical Informatics*, will be launched by Schattauer Verlag in 2009, and will act as a bridge to the practical application of health and biomedical informatics.

### Communications and Interaction

IMIA continues to develop its communication capabilities through its website (<http://www.imia.org>). The site is undergoing expansion and development, and 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 bio-medical and health informatics community at large. Through input from the IMIA Web 2.0 Exploratory taskforce, further modes of interaction with and between IMIA members and the wider global health and biomedical informatics communities are being developed.

### References

1. Murray PJ. The IMIA Strategic Plan - Towards IMIA2015. In: Geissbuhler A, Haux R, Kulikowski C, editors, IMIA Yearbook of Medical Informatics 2008. *Methods Inf Med* 2008; 47 Suppl1:7-15.
2. Lorenzi N et al. Strategy in a Fishbowl: An Invitation to Determine the Shape of IMIA in 2015. *Methods Inf Med* 2006; 45 235-9.
3. Murray P, Haux R, Lorenzi N. Let a Thousand Flowers Bloom: Transition towards Implementation of the IMIA Strategic Plan. *Methods Inf Med* 2007; 46:625-8.