Information on IMIA

WELCOME TO IMIA!

General

The International Medical Informatics Association (IMIA) is the world body for health and biomedical informatics. As an ‘association of associations’, IMIA acts as a bridging organization to bring together its constituent organizations and their members. IMIA provides leadership and expertise to the multidisciplinary, health focused community and to policy makers, to enable the transformation of healthcare in accord with the worldwide vision of improving the health of the world population. Inherent in IMIA’s role is to bring together, from a global perspective, scientists, researchers, users, vendors, developers, consultants and suppliers in an environment of cooperation and sharing.

IMIA was established as an independent, not for profit organization under Swiss law in 1989. IMIA was originally 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. It 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) in official relations, with appointed Liaison Officers from both the WHO and IMIA. IMIA is also a Liaison Category organization in cooperation with the International Organization for Standardization (ISO).

The working language of IMIA is English.

Vision

The IMIA vision is that there will be a worldwide 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. This vision is described in the IMIA Strategic Plan.

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.

Membership

IMIA membership consists of Member Societies, Institutional and Affiliate Members, Honorary Fellows and Corresponding Members.

Member Societies are generally societies with individual membership, or similar appropriate bodies, which are representative of the biomedical and health informatics activities within a country. In general, only one Member Society is admitted from a country, although in special circumstances, and as approved by the IMIA General Assembly, a country may have more than one Member Society in IMIA. In the absence of a Member Society, IMIA accommodates involvement by individuals through “Corresponding” membership, in particular for developing countries as a means of providing encouragement and support to form a representative Member Society. Information about Member Societies is on the IMIA website, and IMIA assists in promoting the activities and events of its members through the IMIA News site and other channels.
IMIA Member Societies may organize into regional groups. IMIA regions exist for all parts of the world; Asia/Pacific (APMI), Europe (EFMI), Latin America and the Caribbean (IMIA-LAC), Africa (HELI-NA), North America (Canada and the U.S.A.) and the Middle East and North African (MENAHIA). Regions are represented at the IMIA General Assembly and Board by Vice Presidents appointed by their respective regional organizations.

**Institutional Members** include academic institutions, corporations, and other bodies. Corporate members can include vendors, consulting, and technology firms, publishers and other professional organizations. Academic members include universities, medical centers, research centers and other similar institutions. IMIA encourages academic members to meet on an annual basis in conjunction with the IMIA General Assembly, to heighten connectivity and deal with areas of mutual interest.

**Affiliate Members** consist of international organizations that share an interest in the broad field of health and biomedical informatics. In addition to the WHO and IFIP, the International Federation of Health Information Management Associations (IFHIMA) is an affiliate member of IMIA. IMIA has Liaison Officers to WHO, to IFIP, and to ISO, who are working collaboratively on activities and 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. IMIA currently has two Special Interest Groups (Nursing Informatics and the Francophone SIG). Many of IMIA’s 25 active Working and Special Interest Groups hold working conferences on leading edge and timely health, medical and biomedical informatics issues.

**Governance**

IMIA is governed by a General Assembly, which meets annually. It consists of one representative from each IMIA Member Society and Institutional Member, Honorary Fellows, chairs of IMIA’s Working Groups and SIGs, and representatives from Affiliate Members (the WHO, IFIP, IFHIMA), and each of IMIA’s Regions. Only IMIA Member Societies 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 IMIA Office and CEO. The officers of the Board and IMIA’s Vice Presidents vigorously pursue IMIA’s mission to:

- 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 facilitator of medical informatics issues in the international community.

**MedInfo and NI Congress**

IMIA organizes the internationally acclaimed “World Congress on Medical and Health Informatics”, MedInfo. MedInfo 2017 was held in Hangzhou, China, and was hosted by the Chinese Medical Informatics Association, CMIA.


MedInfo 2019 will be held in Lyon, France and hosted by the French Medical Informatics Association (Association Française d’Informatique Médicale (AIM)) from August 26-30, 2019. In 2021, MedInfo will be held in Sydney, Australia, hosted by HISA, the Health Informatics Society of Australia (Australia’s Digital Health Community).

The NI (nursing informatics) Congress has been held since 1982, under the auspices of the IMIA Special Interest Group in Nursing Informatics (IMIA NI SIG). The first NI Congress was held in London, UK, followed by Calgary, Canada (1985), Dublin, Ireland (1988), Melbourne, Australia (1991), San Antonio, Texas, USA (1994), Stockholm, Sweden (1997), Auckland, New Zealand (2000), Rio de Janeiro, Brazil (2003), Seoul, Korea (2006), Helsinki, Finland (2009), Montreal, Canada (2012), Taipei, Taiwan (2014), Geneva, Switzerland (2016) and Guadalajara, Mexico (2018). NI2020 will be held in Brisbane, Australia.

**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, and is freely available to the public at IMIA’s website. The updated 2016 IMIA Code of Ethics for Health Information Professionals were approved by IMIA’s General Assembly on August 28th, 2016 in Munich, Germany. IMIA acknowledges great appreciation of the revision of the “code” to Dr. Eike-Henner W. Kluge, Professor of the Department of Philosophy at the University of Victoria in Victoria, BC, Canada, for his time and dedication in providing IMIA with this valued document. The updated version and accompanying handbook are available on the IMIA website at http://imia-medinfo.org/wp/imia-code-of-ethics/.

**Official Journals**

Four scientific publications have been accorded the status of “an Official Journal of the International Medical Informatics Association: Methods of Information in Medicine (Schattauer Publishers Stuttgart); Applied Clinical Informatics (Schattauer Publishers Stuttgart); International Journal
New Initiatives and Activities

An important aspect of IMIA is the development and strengthening of our partnerships and synergies, both within IMIA’s community, and by reaching out to other organizations, in particular in the fields of standards and global health. IMIA will also leverage the capacity and diversity of our members and of our regions, which represent the true richness of IMIA. IMIA seeks to continually develop appropriate new initiatives.

Communications and Interaction

IMIA continues to develop its communication with members and others through its website (www.imia.org); this contains profiles of its members, working groups and activities. IMIA is constantly striving to improve 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 biomedical and health informatics community at large. IMIA publishes newsletters several times a year along with timely announcements to its members and contacts. Through input from the IMIA Social Media Working Group, further modes of interaction with and between IMIA members and the wider global health and biomedical informatics communities are being developed.

IMIA has presences on social media sites, including Twitter (@IMIAtweets), Facebook and LinkedIn, and continues to explore new methods of access to information.