

Minutes General Assembly 19 February 2015

List of attendance: see annex 1.

1. Approval report GA 2014

The suggestion is made to add the year 2014.

The report of the last General Assembly is approved.

2. Validation new members

There are a number of new member candidates and some of them present their organisation shortly:

- Presentation SOLENTRA by Kim Heijnen.
- Presentation Belgian Red Cross-Flanders by Axel Vandeveegaete.
- Presentation BeMSA by Thomas Tackaert (Annex 2).

Two other organisations could not be present. These are Amnesty International francophone and Rotary Clubs for Development. Rotary was already an observer in the past few years and Alice Gentile is also taking up the secretariat of the working group DRC.

The new members are validated by the General Assembly.

3. Elections Steering Committee

Sara Van Belle is at this point the only new candidate for the steering group. As she could not be present, Karel Gyselinck reads her letter of motivation. Her candidacy is approved by unanimity.

The new steering committee will thus be composed as follows:

- Karel Gyselinck, BTC President
- Lut Joris, Be-cause health Secretary
- Jessica Martini, ULB-ESP
- Dirk Van Braeckel, ICRH
- Wim Vande Voorde, Sensoa
- Elies Van Belle, Memisa

- Steven Lauwers, Hera
- Anselme Mubeneshayi, Iyad
- Sara Van Belle, ITG

As there is still room for one person, Karel launches another appeal for a French-speaking candidate, as the language balance is not reached at the moment.

4. Activities & budget 2014

Presentation by Lut Joris (Annex 3).

As for the result of 2014, Lut points out that the budget for the working groups has not been used sufficiently. The reasons for this differ. For some working groups, plans change during the year and activities do not all take place. The working groups SRHR&HIV invested most of their time and energy in the organisation of the annual seminar, and the network activity of the working group HRH within the European initiative Health Workers 4 All was finally covered by a different budget line. In 2015 new efforts will be made to stimulate the working groups to make use of this budget line.

5. Planning 2015

Presentation Lut Joris (Annex 4).

Key new elements in the planning for 2015 are the cancellation of the annual seminar on the one hand and the extra support for regional seminars on the other. As for the first, the 2016 annual seminar will be organised in May as this is the period in which attachés and diplomats visit Belgium and Be-cause health would like to invite them to participate. At this moment two themes have been proposed (Non-communicable diseases and Innovation & digitalisation) and they will be reviewed by the SC in March. As for the regional seminars, 2 initiatives have been proposed to the secretariat. They will also be reviewed by steering committee.

Proposals for regional seminars can still be submitted. Lut will send out a call to the working groups. Criteria as for now: it has to be a local initiative and there should be a link with Be-cause health (expertise or networking).

Comments & discussion:

- Activities working group SRHR/HIV: the suggestion is made to better define and identify the actors to be reached by sensitisation.
- There is a possibility that the 'Staten-Generaal'/'Etats Généraux' and the DGD days will be merged into a one day DGD seminar, which will also be open for external public. The working group SRHR/HIV is hoping to be able to organise an information session during this event. The theme for this DGD seminar might also be digitalisation but this is not confirmed yet.
- Activities working group DRC: The next meeting (24th of February) will be dedicated to the preparation of the formulation for a new bilateral programme Belgium-DRC. This could also be of interest to the members of the working groups on Medicines & NCDs.

- Regarding the regional seminars, the suggestion is made to have the proposals assessed by a larger group than the steering committee. There is a possibility to consult the working groups by e-mail. The secretariat will take this up with the secretariat.

6. Process strategy note on health

Presentation by Ignace Ronse (Annex 5).

He briefly presents the structure of the revised strategy note, but also the process and timing that will be followed. In due time, Be-cause health and its members will be asked to provide input. For some specific modules of the note input from working groups will be asked at an early stage. In nearly every working group DGD is represented. Input for the strategy note will be put forward by this person.

At this very moment the present strategy note is being evaluated. Geert Laleman is coordinating focus group discussions with different stake holders. (DGD colleagues, BTC, Be-cause health members).

Discussion:

- The question is raised why DGD is opting for a specific medical approach? Ignace: There is a strong focus on the right to health and health care. The choice for the WHO building blocks was made because of an operational strategy, namely of integrated health services.
- The issue of linkages with the national health programmes is also put forward. Ignace: the partner countries will be asked to complete the list of priorities. In general Belgium gives support to the national health plan. Apart from that Belgium looks at what others donors are not doing and where we can fill the gaps.

7. Any other business

FESTMIH:

- i) Conference ECTMIH Basel: The working groups Complexity and NCD will participate and (co)organise sessions. A call for abstracts is launched and registration is open. First deadline with reduced fees is 29th April. All information can be found on the website: http://www.ectmihbasel2015.ch/.
- ii) Journal on Tropical Medicine & International Health: members of Be-cause heatlh get a reduced subscription rate. See http://ordering.onlinelibrary.wiley.com/subs.asp?ref=1365-3156&doi=10.1111/(ISSN)1365-3156.

- Global Health Report:

Natalie Van Gijsel (G3W) shortly presents the new report and its different sections. The digital version is still available online (for free): www.ghwatch.org.

8. Results evaluation 2014

Presentation by Barbara Simaeys (Annex 6).

Discussion:

- The suggestion is made to look at a US-based platform on child survival, which is quite big and very dynamic, for inspiration . It is called the CORE group: http://www.coregroup.org/
- Questions arise on activities related to advocacy within Be-cause health and to improve the formulation of strategic goals of the network.
 Barbara: It has a broad meaning now, but largely interpreted as participating in the policy debate. It could also include policy influencing, but this does not have to be the case. It is up to the working groups to decide if and how they take up advocacy initiatives. There needs to be a balance, as Be-cause health is not a lobby platform. There is no consensus on this point between the members, but it could be clarified in the internal regulations.
- The question is raised if results from the platform should be relevant for Be-cause health as a platform or for its members?
 Barbara: In the logical framework, the results indicated are relevant for Be-cause health as a platform. This is not necessarily in contradiction with the results that are relevant for the member organisations.
- Another question raised, relates to the involvement of Be-cause health by DGD in the discussion about the SDGs and the post-2015 agenda. Which role can Be-cause health play in the post-2015 process?
 Marc De Feyter: The reflection phase in the process of the strategy note will take into account the outcome of the September event on the post-2015 agenda. Be-cause health will be part of that reflection. The mandate of this note is to be a decisional and a prioritizing tool for the

decision makers in Development Cooperation. The difficulties that arise now are that the post-2015 process is a more comprehensive exercise where every subject is related to other subjects. Whereas the work of DGD becomes more and more specific and punctual.

Annex 1: List of attendance

First name	Last name	Organisation/Affiliation
Alex	Brezina	BeMSA
Nathalie	Brouwers	ITM
Christian	De Clippele	Louvain Coopération
Hedwig	Deconinck	Université catholique de Louvain
Thérèse	Delvaux	ITM
Tine	Demeulenaere	Damiaanactie
Martinus	Desmet	DGD
Hugo	Devlieger	LUMOS
Fahdi	Dkhimi	ITM
Anne	Fromont	ESP-ULB
Philippe	Goyens	ARSOM/KAOW
Isaline	Greindl	AEDES
Karel	Gyselinck	BTC
Kim	Heijnen	Solentra
Sarah	Hiff	SOS Villages d'Enfants
Lut	Joris	Be-cause health
Yves	Kluyskens	Memisa - AZV - CIFG
Geert	Laleman	ITM - DGD
Jacques	Laruelle	retraité
Vincent	Litt	ULB-Coopération
Francis	Monet	Collaborateur IMT
Mathieu	Noirhomme	Consultant
Chika	Onyejiuwa	AFRICA EUROPE FAITH & JUSTICE NETWORK
Vicente	Pardo Iniesta	AEDES
Ndudi	Phasi	Benelux Afro Center
Voahangy	Ramahatafandry	
Christian	Roberti	AEFJN antenne belge
Ignace	Ronse	DGD
Thomas	Rousseau	RIZIV-COOPAMI
Barbara	Simaeys	South Research
Thomas	Tackaert	BeMSA
Elies	Van Belle	Memisa
Dirk	Van Braeckel	ICRH - UGent
Wim	Van de Voorde	Sensoa
Natalie	Van Gijsel	G3W
Axel	Vande veegaete	Rode Kruis-Vlaanderen
David	Verstockt	FOS