



Annual General Assembly 2019

14/03/2019

Update Steering Group members

Until 2018

- Dirk van Braeckel, Ugent/ICRH (treasurer)
- Peter Eerens, individual member / Living Health Systems
- Wim van de Voorde, Sensoa
- Karel Gyselinck, Enabel
- Joris De Keersmaecker/Thomas Dewaele, BeMsa (tbd)

New since AGA 2018

- Marlies Casier, Sensoa

Update Steering Group members

2019

- Elies Van Belle, Memisa / Chair
- Tim Roosen, ITM / Coordinator
- Anselme Kananga, IYAD / Treasurer
- Stefaan Van Bastelaere, Enabel
- Marlies Casier, Sensoa
- Pieter Van Wolvelaer, CM
- Raffaella Ravinetto, Thérèse Delvaux, ITM
- Aline Labat; Anne Fromont, ULB ESP
- Eva Kayitesi, Hera
- Ignace Ronse; Catherine Dujardin, dgd / Observer

Internal guideline: 8-12 elected SG members

AGA 14/03/2019



Member organisations

52 active member organisations (38 voting and 14 observing);

2018 : 49 organisations and three observing gov. entities

BeMSA
SOLENTRA
Belgian Red
Cross-
Flanders

COTA

 CAVARIA
OPROEFING VOOR HOLLER'S EN TRANSINGENDES



ODAH

COOPAMI

MSF

2004

2009

2014

2019

BCH had its first General Assembly on October 11th 2004

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Member organisations



Note : no follow-up vzw Mama na Mtoto (2018 request)
Interest from **Handicap International** + renewed engagement of MSF
staff

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Individual Member requests 2018

- Veerle Van Bael, Rode Kruis Vlaanderen
- Sandy Groeninck, Coördinator LUMOS + collega's
- Ibukun Abejirinde, ITM
- Lenka Benova, ITM
- Dorothy Adobea, ITM
- Leen Lacroix, MSF
- Morfaw Rene, CEMREST vzw (Belgium/Cameroen)
- Doua Joachim, CARED - Consortium for African Regulatory Expertise Development (NL)
- Christophe Huysecom
- Christian Lauwers
- Sarah Hessein, Ugent
- Estelle Spoel, Médecins du Monde Belgique
- Cecile Vanheuverzwijn, Médecins du Monde Belgique
- Julie Seynaeve, Fracarita
- Joris Vandelanotte
- Mrs. Mahruba Khanam, UAntwerp (Bangladesh)
- Nikola Sklenovska, KULeuven (Swiss)
- Goedele Louwagie, Univ. Pretoria (Belgium)
- Sandy Heylen
- Laura Van Rillaer

**288 individual
member**

+

**315 friends /
followers**

End of 2018 figures

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Gender

Charter Gender Charte Genre

Een gemeenschappelijk kader voor Belgische actoren van de civiele maatschappij en institutionele actoren

Un socle commun pour les organisations de la société civile et acteurs institutionnels belges

Elke actor van de civiele maatschappij en institutionele actor die het charter onderschrijft, engageert zich om een positief elan te creëren of te behouden rond gendergelijkheid binnen de eigen organisatie. Elke ondertekenende organisatie zal de nodige acties ondernemen om haar intenties rond gendergelijkheid te realiseren.

Toute organisation de la société civile (OSC) ou acteur institutionnel (AI) qui ratifie la charte Genre s'engage à soutenir un élan positif dans son organisation autour de l'égalité de genre et à mettre en place les actions nécessaires pour que les intentions se matérialisent.

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Gender

Gender Charter **Be-causehealth ACTION POINTS** :

BCH Mission statement : *Based on a rights perspective to health and healthcare, Be-cause health values: Constructive dialogue in an open and learning mind-set; Creativity and Innovation; Equity; Autonomy; Solidarity; and Ownership.* **Suggested : add (gender) equality : Equality and equity as one of BCH values**

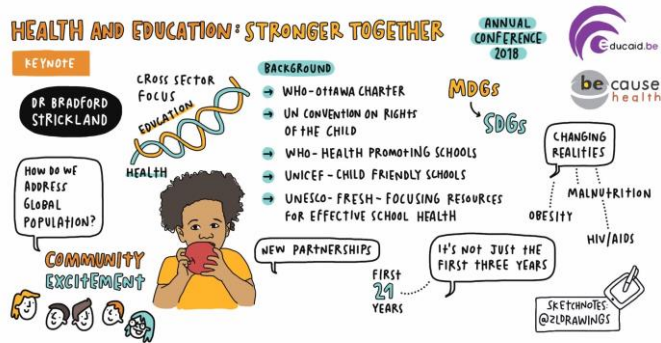
Gendermainstreaming (to be monitored across working groups and platform events); Specific actions on gender, in particular actions for rights of women and respect of (gender) diversity.

Develop a **plan of action**, including to ensure non-discriminatory and balanced communication and representation (ex. refuse “ALL MALE PANELS”)

Code of conduct to be developed & adopted; Develop procedure to react /follow-up on intimidation and sexual behavior on the workfloor.(incl. guidelines for working groups);

Realisations 2018 - Network events

Health and Education: stronger together -
17th May 2018, Brussels



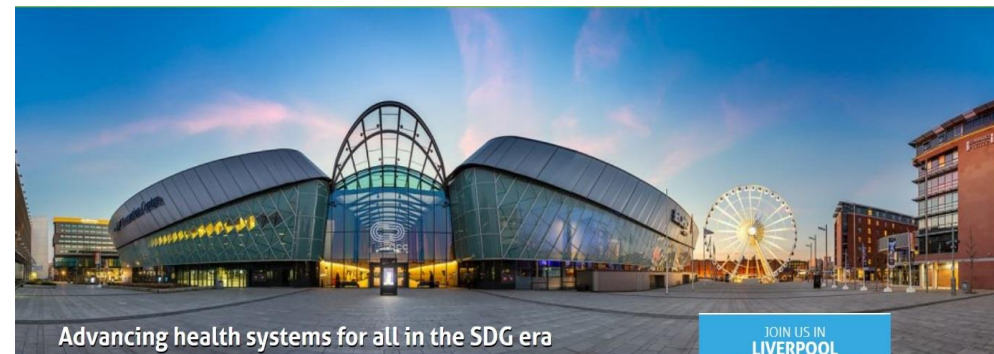
December 2018 | [Inspiration day of diaspora and ngo's on Women's Rights and Health](#)

Over 70 people inspired Saturday 15th December Diaspora event, on the theme of Women's Rights and Sexual Reproductive Health.



June 2018 | [Adolescents' access to SRHR High Level Panel @ European Development Days](#)

SPOTLIGHT ON HEALTH AND RIGHTS OF ADOLESCENT GIRLS



JOIN US IN
LIVERPOOL
8-12 OCTOBER 2018

Realisations 2018 - WG events

Access to Quality Medicines | Seminar on quality assurance for pharmaceutical manufacturers



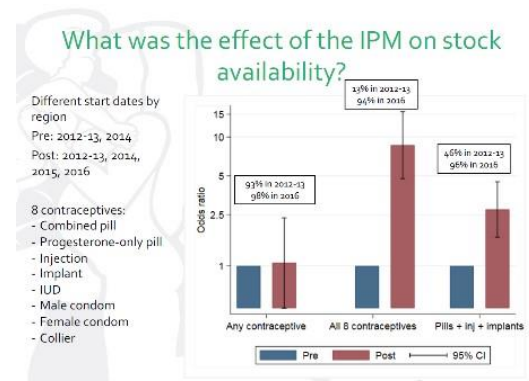
Social Determinants of International Health | Belgian launch of 5th Global Health Watch report



E-health academy

Mental health in Rwanda, in Guinea

Sexual and Reproductive Health and Rights | 'Public Private Partnerships for Reproductive Health - What does it take to succeed?'



Realisations - Communication

Mailinglist - Newsletter

End of 2018 figures

Increase of reach (of members & friends)
from 200 (2009) to 379 (2014) to 420 by 2016

288 individual
member +
315 friends /
followers

Website

2005 – revised 2016

a yearly average of 200 regular users
and 4400 sessions

Facebook

Launched 2013

373 followers & 377 likes up to now

Twitter

Launched 2017

108 followers

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Update working groups

Mental Health(2019)

Research(2019)

E-health(2017)

Democratic Republic of Congo

People Centred Care
Sexual and
Reproductive Health
and Rights'

Social health protection (2010, with MASMUT);

HIV/Aids (2010);

Social determinants of health (2011);

Chronic non-communicable diseases (2012);

Addressing complexity (2014).

Access to quality Medicines'

Human Resources for Health

2006

2004

2

2009

-> 5

- > 10

2014

-> 6, 7

2019

| Working group | created | Active/non-active | Chair / lead |
|---|---------|--|----------------------------------|
| Human Resources for Health | 2006 | + - Active mailinglist | Stefaan Van Bastelaere |
| Access to QA Medecines | 2006 | Active WG | Raffaella Ravineto |
| Sexual and Reproductive Health and Rights' - SRHR | 2009 | Active WG | Marlies Casier |
| People Centred Care | 2009 | Non active | - |
| Democratic Republic of Congo | 2009 | + - active / extended to 'diaspora' | Anselme Kananga |
| Social health protection | 2010 | Non active / created outside BCH | - |
| Hiv-Aids | 2010 | subgroup of SRHR WG – cf. UNAIDS action 2019 | |
| Social determinants of (intern.) health | 2011 | Active WG | Liesbet VanGeel / Julie Steendam |
| Chronic non-communicable diseases - NCDs | 2012 | Non-active | - |
| Complexity | 2014 | + - Active mailinglist | Frank Signoret |
| E-health | 2017 | Active WG | Stefaan Van Bastelaere |
| Mental Health | 2019 | Active WG | Willem van de Put |
| Health Systems Research | 2019 | Active WG | Elisabeth Paul / Dimitri |

Update working groups

NEW Working group on Mental Health
Willem van de Put

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Update working groups

NEW working group of
Researchers in Global Health – Health
Policy and Systems
Elisabeth Paul
Dimitri Renmans

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Plans for 2019

I. Working group:

- SRHR
- Determinants for International health
- E-health
- Access to Medicines
- DRC / diaspora

II. Inter-WG / platform plans

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Plans for 2019

II. Inter-WG / platform plans

- Urban health conference, Brussels
- International fora :
 - EDD, Brussels – Health inequities
 - ECTMIH, Liverpool – Social health Protection,
 - ...
- Tools & publications : BodyandRights, Thematic modules
- Research/policy advice (SRHR, ...)
- Policy support UNAIDS, Belgian Commitment QA Medicines, ...

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Plans 2019: Urban health conference

16, 17th October, Brussels

➤ Linking global health and urban planners

Address two elements:

How to realise Universal Health Coverage in an urban setting: how to adapt health policy and health service delivery in urban setting; review the 'rural bias' of health cooperation policies and health systems in LICs

How to maintain an 'urban advantage' for health - **maximise urban planning** on mobility, housing, water and sanitation that determine health and take leverage of urban planning/assessment to benefit Health service delivery

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Plans 2019: Urban health conference

6 suggested (sub)themes :

Health themes (HSS / Epidemiologie / Patients Rights & health equity..)

Urban planning themes (eco-health / health mapping / Security)

- Urban Health system : organization & management of health care – avoiding a rural bias of existing (district) models; roles of medical staff (doctors, nurses, community health worker, ..) AND Organising “Mega” health services (megamaternities) in urban setting;
- Leverage urban advantage to tackle Communicable / avoidable diseases ; influenza, hiv-aids, TB, ... AND/OR Tackle Non-Communicable Diseases (mal +over nutrition; diabetes, ...); ...
- Health equity : ensuring patients rights, using citizens/community participation in design of urban health, ..
- Eco-health : linking health & environment : impact of air-polution; noise pollution; ...taking advantage of urban mapping/geopgraphie, ...transform urban mobility
- Ensure Safety in the city : (sexual) violence; child proof cities; ...
- Urban planning : Urban Governance / Coordinated policies / include Health Assessments in mapping & planning ...

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Financial reporting

Expenses/bilan 2018 + Budget 2019

Anselme Kananga, IYAD / Treasurer

14/03/2019



AOB

14/03/2019



Networking Lunch

Research

SRHR

E-health

Mental
Health

Social Determinants

Access to Medicines

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