

Minutes General Assembly Be-cause health

14 March 2019

List of participants: **see annex 1**

Felipe Rojas Lopez from Médecins du Monde welcomes Be-cause health at its headquarters for its General Assembly.

Elies Van Belle, President of the platform, opens the General Assembly with a welcoming word and the marking of the 15 years' anniversary of Be-cause health.

1. Update on Steering Group members (see annex 2)

See overview in ppt of current members. Dirk van Braeckel, Karel Gyselinck, Peter Eerens and Wim van de Voorde left in 2018. Joris De Keersmaecker and Thomas Dewaele, participated as representatives of the Medical Students – BeMSA, however indicate that from 2019 onwards BeMSA prefers to engage differently within BCH via working groups, instead of the Steering group.

Marlies Casier is proposed by the Steering group and formally elected at the Assembly as Steering group member.

2. New Member requests/ proposals + Alliances (see annex 2)

In 2019, there were no new member organisation requests. Currently, there are 49 currently member organisations and 3 government bodies which are observer member organisations. A letter has been sent recently to these 49 current member organisations to renew their commitment. They will be reminded of this to continue their commitment within the Be-cause health platform.

Handicap International has shown its interest to become a member organisation as well. They would be a major humanitarian organisation which would become member, of which there are only a few member within the platform. MSF withdrew its membership in the past but there is renewed engagement from MSF staff in working groups again.

Individual member requests continue to increase (to 288 individual members and 315 friends / followers, figures of end 2018).

3. Gender: Be-cause health's response to NGO Charter 'Stand up for Gender' (see annex 3)

What can we do as a platform, follow-up to the gender charter (2018), drafted and signed by the NGOs and the institutional actors in the Belgian Development Cooperation. This charter proposes 8 different action points.

Anne Fromont presents some guidelines (**see annex 4**) and a test survey to get to know the

current situation on gender within the platform. This framework acts as an appeal to reflect on by everyone.

Points of attention can be that the platform is conscient about it on a representative platform level (e.g. not participate in 'all male-panels') and that the different active working groups are also conscient about these issues in their own functioning and activities.

Charlene, consultant working with Marleen Bosmans – gender adviser at Enabel, is invited to give an overview on what has been done to make up a new gender strategy at Enabel. She presents how this gender strategy was necessary as Enabel was legally bound to make up a renewal of their gender strategy after June 2018. It was a participative process with a lot of consultations. There was also a good cooperation with the Board of Directors. The gender strategy is now a chapter in the business plan with specific KPI (key performance indicators) and also a new gender year action plan has been set up. A year action plan will be written every year. Also the HR department was involved for different actions on the more concrete follow-up. The strategy is available on the website, the action plan will follow.

Exchange :

Have all member organisations signed the charter? No, only NGOs and institutional actors, including umbrella organisations as VLIR/UOS, but not individual universities.

Could BCH sign or ask all its members to sign it? The aim is that Be-cause health builds on the action points suggested by the Charter signed by its members, develops action points itself and also implements them.

It would be a 1 year exercise maximum, that involves member organisations, including from the steering group. The proposal is to

1. involve the active Working Groups to complete the short “gender test survey”;
2. for a small group to review the results and decide on action points; this exercise would apply the principles from the charter into a practical action plan
3. to draw up/propose an action plan to the Steering group and then give a conclusion to the General Assembly next year. The charter and also the document of Anne will be put on the website so that people can be referred to these.

If people are interested to join in the exercise to work out gender actions they can contact Tim (troosen@itg.be) .

4. Realizations 2018 (see annex 2)

There is a draft annual report shared with realisations of 2018 yet to be finalized. A preliminary copy is available at the general assembly for consultation.

An overview of some realisations:

Network events:

- Annual conference with Educaid on “Health and Education: stronger together”
- European Development Days: High Level Panel Adolescents’ access to SRHR

- Health Systems Research Liverpool: support for networking and some speakers: Tim, Elies, Julie Steendam, Ketaki Das (West Bengal Volunteer Association – partner Memisa)
- Diaspora event on the theme of Women’s Rights and Sexual Reproductive Health , with a turn up of a different audience as usual for BCH, also on a Saturday. Cooperation with Federations of diaspora associations, 11.11.11, and supported by the City and the Province of Antwerp. This is also a new orientation for the WG DRC/(Congolese) Diaspora associations.

Working group events:

- WG Access to Quality Medicines: Seminar on Access to Quality Medicines
- WG Determinants of International Health: Belgian launch of 5th global Health Watch Report; including a ‘Belgian’ section on “Impact of free trade on health”, presented in poster session at Liverpool and People’s Health Assembly, Dhaka, Bangladesh; and the organisation of Soirée Santé on health & nutrition;
- WG Digitalization/E-health Academy: 2 exchange sessions on digital applications
- WG Mental health: start-up of the working group, 2 sessions on mental health in Rwanda and in Guinea
- WG SRHR: Seminar on Public Private Partnerships for Reproductive Health

Communication: (see also annex) Tim gives an overview of the communication efforts of the platform during the years. The reach of the newsletters and the (renewed) website has steadily increased as has the use and the reach of our social media (Facebook since 2013 and Twitter since 2017). In 2018, a general brochure (in English) has been published too.

5. Update working groups (see annex 2)

The working groups make up the core of the Be-cause health platform and are the framework to discuss, to exchange, to organize workshops and seminars. The working groups are not static and members are free to propose new subjects, in which they are interested to work on. During the past year (2018), 4 working groups have been active and have met regularly: SRHR, Determinants of International Health (DIH), Access to Quality Medicines, and E-health/Digitalization.

On several themes, the working groups have ceased to be active but their work has had interesting results, and a lot of information stays available for the platform, also on the website. These include: People Centred Care, NCDs, Social Protection (led by Masmut which ceased to exist), Complexity and UHC. The working group on Human Resources for Health (HRH) has still an active mailing list to which information is sent from time to time. The working group on HIV/Aids has been incorporated in the working group on SRHR. The working group on DRC has shifted its aim on working with diaspora associations (see below) – and is considering to ‘re-activate’/consider cooperation with a (new) “health hub” of Belgian actors in Kinshasa (led by Memisa) and the synergy meetings in RDC in Brussels.

Two new working groups on other themes present themselves for 2019:

Elisabeth Paul (ULg) and Dimitri Renmans (UA) present the goals of the new working group on Research, a “**Belgian Network of Researchers in Global Health & Healty Policy & Systems Research**” (GH&HPSR). The idea is to foster collaboration between member researchers. The overall objective is to contribute to the quality and visibility of GH&HPSR research performed by Belgian actors, to do a mapping exercise & to give a forum to exchange experiences.. Their next meeting is on 26 March. Those interested can contact Elisabeth Paul (Fr-En) and Dimitri Renmans (NI-En). A [survey](#) is created to map out what each Belgian (i.e. affiliated to a Belgian institution or organization) researcher on Global Health – Health Policy and Systems is working on. The intention is not to overlap with the existing working groups but possibilities for cross-working and cooperation can be explored. It is seen as a 1 year pilot project, to be reviewed at the Annual Assembly of 2020.

Willem van de Put (ITM) introduces a new working group on **Mental health**. The idea is to bring together all those who are interested in this theme. Do contact Willem at wvandeput@itg.be for more information. The field of mental health is much neglected, but there is a big need of mental health internationally. In 2018, 2 sessions have been dedicated to the field cases of Guinea & Rwanda. In a first meeting, 15 participants showed up. The group is at the very start, bringing together 15 people at a 1st meeting, to explore the theme of mental health through case studies, as well as find links with other working groups, for instances with the WG on SRHR.

6. Plans for 2019 (see annex 2)

The working groups on SRHR, DIH, E-health and Medicines plans for this year, :

SRHR:

- exchange with Enabel staff on plans in partner countries in She Decides framework,
- Evaluation Body & rights by HERA,
- Research with ITM on SRHR topic in bilateral cooperation,
- Celebration of Cairo programme on reference document on SRHR, starting point for possible seminar,
- provide policy advice to DGD on UNAIDS, to prepare role of DGD within UNAIDS Programme Coordinating Board (PCB), the governing board of the Joint United Nations Programme on HIV/AIDS.
- contribution to annual conference on Urban Health,
- Follow up the Belgian elections.

Determinants of International Health (see annex 5)

- Further exploration of the topic “Nutrition as a determinant of health”,
- Participation in Be-cause health conference on Urban Health and
- Participation in other health events.

Note: Liesbet Vangeel stops working at FOS and hence as co-chair of this working group. We thank her for all efforts in past years in the platform. Julie Steendam of Viva Salud will continue as co-chair.

DRC / Diaspora:

- new principal axe: try to network the Congolese medical diaspora and to capitalize their expertise,
- looking for synergies with actors who work in the DRC, in Kinshasa,
- reach out to the Congolese diaspora associations in Belgium which tries to cooperate with NGOs and other actors in Belgium,
- a 'Hub Santé' has been created in Kinshasa to create more collaboration and synergies. It is also a physical space that is offered to meet each other, also for Congolese partners who come back from Belgium and have returned to DRC.

Medicines:

- the charter on Quality Assured Medicines and the Commitment, signed by 19 Belgian organisations and minister De Croo, will need to be implemented, and monitoring agreed upon on national and international level.
- the Belgian Commitment is presented by WHO as a "best practice" and will be proposed internationally to other donor countries.
- a closed door side-event on the World Health Assembly,
- support for the WHO pre-qualification programme,
- In collaboration with QUAMED, a survey has taken place. The report is not yet distributed, it will come later (for publication matters).

E-health:

- two e-health academies or exchanges on digital tools to be organized;
- co-organise a reflection event on multi-annual cooperation on digital health between Enabel + VUB and related partners planned for April 30th, 2019;
- contribute to D4D prize, AfricaMuseum.

There are also some plans for the platform as a whole:

- the Urban Health Conference on 16-17 October, 6 subthemes are defined. A preparatory taskforce will again meet on 3 April.
- EDD Brussels: session on Health inequities,
- ECTMIH Liverpool: Social Health Protection,
- Tools & publications: Body & Rights evaluation, develop policy briefs/fact sheets based on the content of the thematic modules within the strategy note,
- Research-policy advice: SRHR, private sector role in health cooperation, ... suggestions for other themes possible,
- Policy support: UNAIDS, Belgian Commitment QA Medicines, ...

7. Financial report : Expenses 2018 – Budget 2019 (see annex 6)

Anselme Kananga presents the expenses of 2018 and the proposed budget for 2019 is agreed upon by the Assembly. Sending the budget proposal in advance to participants is requested as a best practice for future general assembly meetings.

8. AOB /