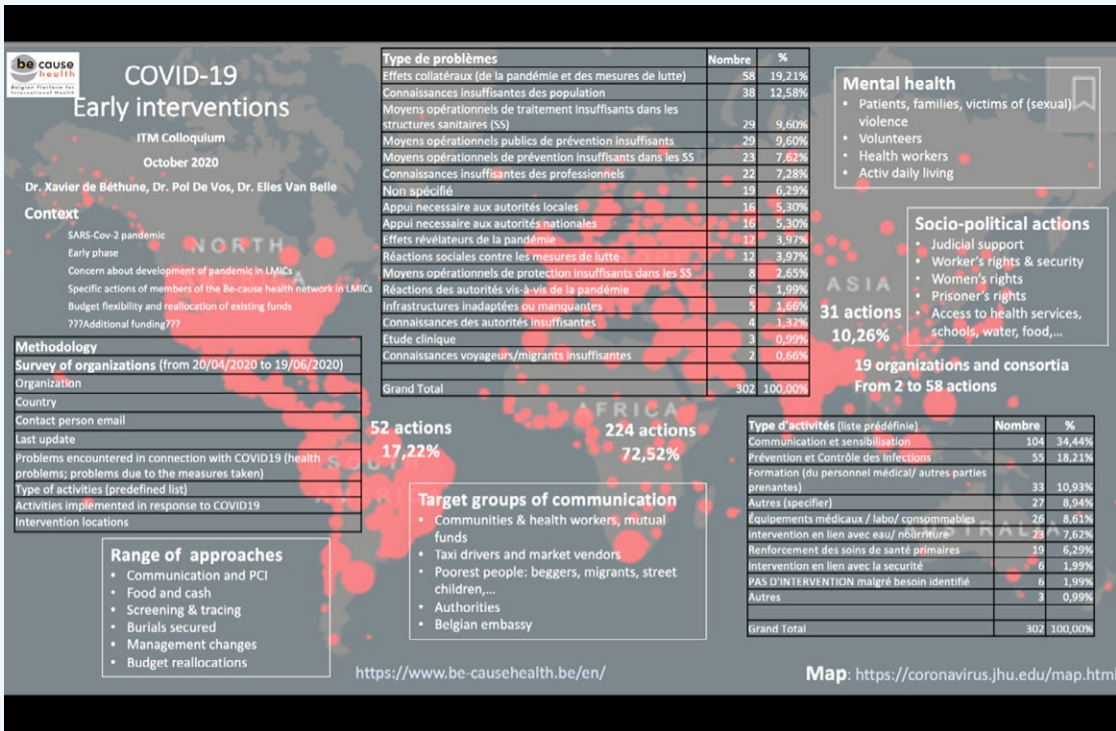




# BE-CAUSE HEALTH ANNUAL REPORT 2020

BECAUSE HEALTH IN PICTURES

2020



From top left to bottom right:

Photo 1, 2, 3 & 4: Digital for Development prize winner of 2020. The smart glasses of Iristick. (c) Memisa

Photo 5: COVID-19: Early interventions of Belgian health actors in LMICs (April to June 2020)

Photo 6: Meeting of working group 'Mental health'



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Digital for Development prize winner of 2020. The smart glasses of Iristick.

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## FOREWORD

Dear colleagues, dear friends,

2020 was a challenging experience. We jumped into the year with a new coordinator, with our feet firmly anchored in the success of 2 international conferences at the end of 2019. Their reports are excellent sources of inspiration . ([Be-cause health matters 12: Agir ensemble afin de renforcer le droit à la santé dans la RDC](#) & [Be-cause health matters 13: Report Be-cause health Annual Conference 2019 -Taking the urban turn](#))

And then...

Then not only did COVID-19 strike, but very soon in the year, our coordinator, Pol De Vos, had to leave Be-cause health. We had to improvise and learn lots of new ways of working. On top of the usual inequities people over the world experience regarding health and health care, access to all the resources needed to fight the COVID-19 pandemic was even scarcer in the South than in the North. Very soon however, experts everywhere discovered that many LMICs and especially Sub-Saharan Africa had more success in fighting the pandemic than their richer counterparts.

We also learned that when the need is high, lengthy processes can be tremendously accelerated. There was less than a year between the deciphering of the SARS-Cov-2 genome and the availability of several vaccines. But even more than that, we learned that however high the need can be, working with patients and communities is the essential part of any public health intervention. Leadership also failed us utterly in several countries, and not only in the fight against the pandemic. The consequences of such failures remain to be seen and taken care of.

In the midst of the turmoil, Be-cause health conducted its external evaluation, got ready for the strategic planning for the next 5 years and conducted its plans for 2020 through the virtual platforms we progressively grew accustomed to. There was a toll, we had to postpone the annual conference on climate change and some other activities, but this will be for the better in 2021. Since ECTMIH did the same, there was no contribution of Be-cause health this year, but several members participated in the HSG conference and Be-cause health had a virtual booth at the ITM colloquium.

Be-cause health is proud to say that health was honoured as the Digital for Development prize

winner of 2020. The smart glasses of Iristick were tested in a joint initiative between Be-cause health members ITM Antwerp and Memisa in the Democratic Republic of Congo and hopefully have received the boost they need to start spreading.

A new government brought a new Minister and a policy that is very much in phase with the priorities of Be-cause health. We met (virtually) with Minister Meryame Kitir and look forward to a strong collaboration.

2021 will bring its own challenges. We do not know yet whether the vaccine or the new variants of SARS-Cov-2 will win the race. But we know that with a new coordinator and with at least one new working group on financing, Be-cause health will remain the dynamic platform it has been since its beginnings. The new strategic plan will take hold of the years of experience of all the BCH members, but also of the lessons of the pandemic and of working virtually. The working groups and Be-cause health will thus draw on the expertise of all the field workers and partners abroad, even more than before.

I specially want to thank two people:

First of all, Ignace, who assured in a wise and pragmatic way that there was a real dialogue with DGD – may retirement be as rich and fruitful as your input in Be-cause health!

Secondly, Xavier, for assuring the coordination in these difficult times, for his flexibility, patience and above all high-quality input on the content – thank you!

And of course many thanks to the permanent pillars: Nathalie, Tim, Jan, the members of the Steering Committee and the ever-active WG coordinators. Also to Pol, who took up the challenging task of coordinator, even if it was only for a short time.

Good luck to Magalie Schotte as the new coordinator, and all the others who will join in 2021.

Happy reading,

Elies Van Belle  
Chair Be-cause health





# LIST OF ABBREVIATIONS

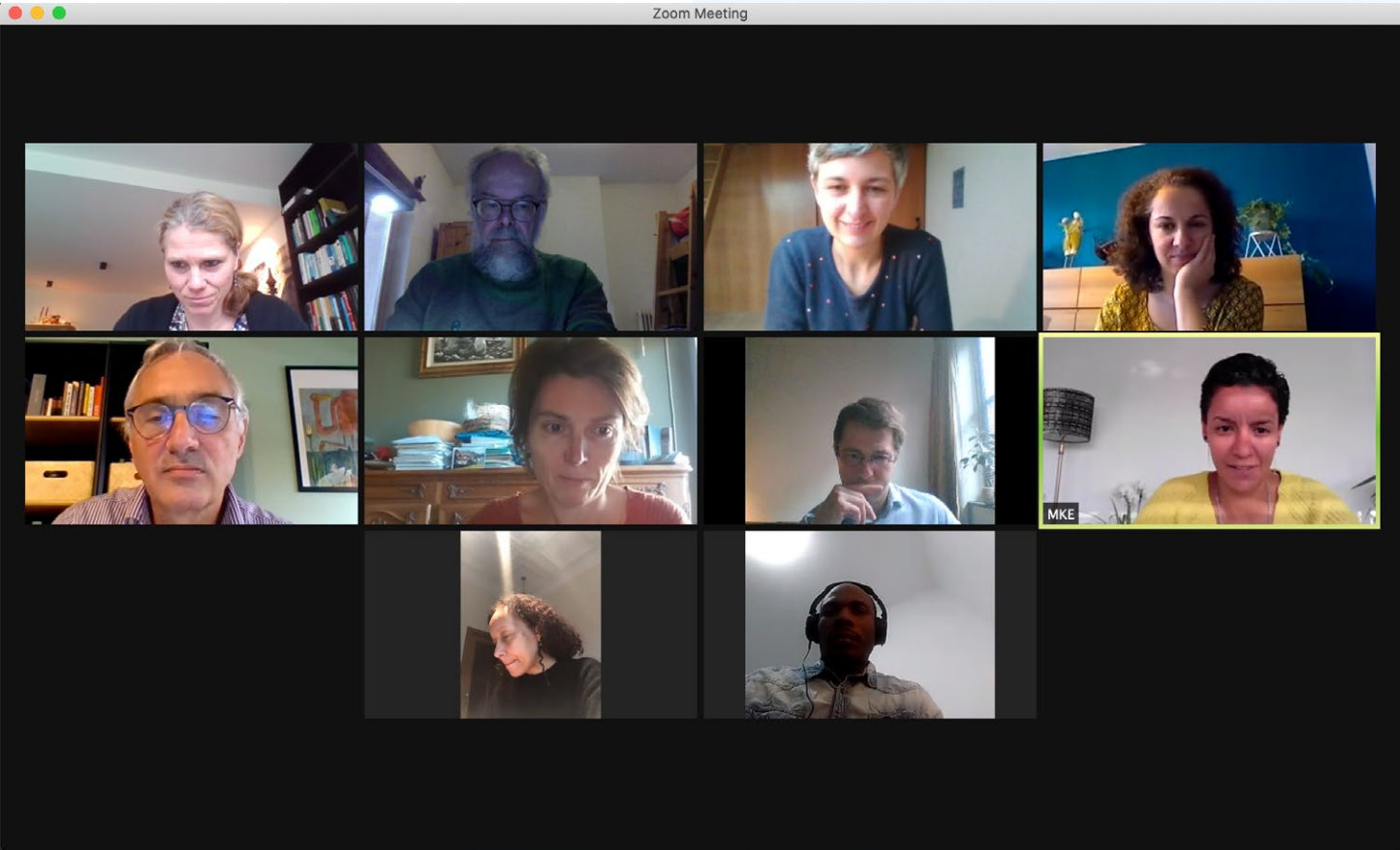
BCH	Be-cause health
BNR-GH-HPS	Belgian Network of Researchers in Global Health – Health Policy and Systems – working group of Be-cause health
CEO	Chief Executive Officer
CNFRSR	Centre National de Formation et de Recherche en Santé Rurale de Maferinyah (Guinea)
COVID-19	Coronavirus Disease 2019
DGD	Directorate General for Development (Belgium)
DRC	Democratic Republic of Congo
D4D	Digital For Development
ECTMIH	European Conference of Tropical Medicine and International Health
GIZ	Gesellschaft für Internationale Zusammenarbeit (Germany)
hera	Right to health and development
HIV	Human Immunodeficiency Virus
HSG	Health Systems Global
ITM	Institute of Tropical Medicine (Antwerp)
LMIC	Low and Middle Income Countries
M&E	Monitoring & Evaluation
SC	Steering Committee
SDG	Sustainable Development Goal
SRHR	Sexual and Reproductive Health and Rights
ULB	Université Libre de Bruxelles
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNFPA	United Nations Family and Population Agency
VUB	Vrije Universiteit Brussel
WG	Working Group

# MEETING WITH MS MERYAME KITIR, MINISTER OF DEVELOPMENT COOPERATION AND URBAN DEVELOPMENT

On December 9th, 2020, a Be-cause health delegation formally and virtually presented Be-cause health to the new Minister of Development Cooperation, Ms Meryame Kitir.

The role and activities of the platform were described and explained. The three main priorities of BCH were highlighted: the rights based approach, health system strengthening and social protection. The Minister and her cabinet responded with much interest. The policy declaration of the Minister fits with the present strategy of Be-cause health. We can thus anticipate a strong collaboration.

From top left to bottom right: Elies Van Belle, chair BCH; Xavier de Béthune, Coordinator BCH a.i.; Marlies Casier, WG SRHR; Cathérine Gigante, DGD; Paul Bossyns, Enabel; Elisabeth Paul, BNR-GH-HPS; Tim Roosen, ITM-DGD; Meryame Kitir, Minister; Kristina Bayingana, Cabinet; Anselme Kananga Mubeneshayi, WG DRC & Treasurer BCH.



# SURVEY ON COVID–19 ACTIVITIES BY BELGIAN ACTORS IN LMICS

Between April and June 2020, Belgian health actors in the South were invited to respond to a short survey about their early activities related to the fight against COVID–19.

The survey was answered by 19 organisations and yielded a total of 302 different activities. The results are summarised below.



COVID–19: Early interventions of Belgian health actors in LMICs (April to June 2020)

# WORKING GROUPS

COVID–19 forced the BCH working groups to adapt their work processes. Electronic platforms, mainly Zoom and Teams, yielded a workable solution. It may not be a pleasant solution to telework individually from home and to meet only through screen-to-screen, but this presented some advantages as well. Several meetings were attended by field workers and local partners of BCH members. Transport time and overall costs for meetings went down.

In 2021, we will have to adapt to more virtual and possibly blended meetings.

The good news is that in 2020, all WGs went on with their programmes, as shown by their reports below.

## WG Sexual and Reproductive Health and Rights

In 2020 the SRHR WG continued its exchanges on international (policy) developments regarding SRHR, including HIV.

The WG paid particular attention to the impact of the COVID–19 pandemic on SRHR and the activities of the international SRHR community. More specifically, the SRHR WG:

- » inquired and exchanged on the impact of the pandemic on the work of members of the working group and their organisations and partners in the South
- » contributed to Be–cause health’s data collection on COVID -19
- » provided recommendations to DGD’s COVID -19 response strategy
- » discussed the preliminary results of ITM’s study of the impact of the pandemic on maternal and child health providers worldwide
- » WG members joined online webinars organised with Belgium’s All-Party Parliamentary Group on SRHR ‘Parliamentarians for the 2030 Agenda’ on the growth of anti-gender movements; the pandemic’s impact on the progress in the realisation of the Sustainable Development Goals on health and gender (SDG 3 and 5), and UNFPA’s State of the World Population 2020 on harmful practices.

In addition, the WG discussed the downward trends in Belgian funding for health and SRHR, exchanged with abortion rights activists from Ecuador, shared intelligence on UNAIDS’ new strategy and closed the year with an exchange on the outcome of the US presidential elections for the promotion of SRHR worldwide.

In 2020, the WG also dedicated a lot of time and energy to the revision and update of Body&Rights, the e-tutorial on SRHR for the stakeholders of the Belgian development cooperation, drawing on the lessons from the external evaluation of the tool. The renewed e-tutorial will be launched this spring.



## WG Digitalisation

In 2020 the WG digitalisation was working on two tracks mainly:

### 1 - eHealth Academies: Firstly, in 2020, we organised 3 eHealth Academies.

**On the 15th of April, a first academy focused on the potential of digital in the context of the Corona pandemic. The following topics were discussed:**

- » Digitalisation of the National Reference Laboratory of Rwanda : integrated management of data for better health response to COVID-19, by Dr. Verbeke, Postfactum, VUB, Belgium;
- » Smart glasses for better health management: the potential of remote assistance by Steven Serneels, Co-Founder & Chairman Iristick & Felipe Sere, PO Memisa;
- » Repurposing a digital health start-up for distance learning by Emmanuel Blin, CEO of TC4A;
- » Digital tools in support of geospatial data management and "cartes sanitaires" in DRC and Niger by N. de Borman, CEO Bluesquare;
- » Use of data in Corona-times by K. Van Camp, D4D-expert, Enabel.

**On the 28th of August, a second academy was looking backward on the new trends generated by Corona. The following topics were presented:**

- » COVID-19 as catalyst for telemedicine: perspectives, questions and a demo how smart glasses are now used to support surgeons in the operating theatre by S. Serneels, Chair Iristick and B. Dheedene, Co-founder and CEO Rods & Cones;
- » Campus Numérique de la Santé en RDC - update, opportunities, perspectives by F. Verbeke, Postfactum;
- » How the COVID-19 pandemic has changed the rules for Peru's Health Information Systems by A. Mestas, SIS, Peru;
- » eLearning approach for capacity strengthening of health professionals: a post-Ebola experience in Guinea by Dr Mina MILLIMOUNO, CNFRSR, Guinea;
- » Wanda - genesis & lessons learned (<https://www.wanda.be/nl/>) by J. Kennis, ITM.

**On the 11th of December, the third academy dug into something totally different : the potential of digital in health insurance. Following topics were on the table:**

- » Health insurance in West-Africa – General approach by Dr. Bossyns, Enabel;
- » A general introduction to openIMIS by Bhattarai Saurav, GIZ;
- » An update on the development of OpenImis and the country deployment by Nicolas de Borman, CEO of Bluesquare.

### 2 - Platform for continuous exchange

Secondly, the WG is a continuous platform for exchange and co-creation, open to anyone, anyhow, anywhere. For the first time, and thanks to COVID-19, a bigger audience was reached, with participants from mainly various African countries.

## Belgian Network of Researchers in Global Health – Health Policy and Systems (BNR-GH-HPS)

The BNR-GH-HPS was created in January 2019. In 2020, it conducted the following activities:

- » Participation and presentation of the network to the Be-cause health General Assembly, 18 June;
- » [Issue of Newsletter 1](#), June;
- » Fourth meeting of the network on November 9th via Teams, including a Webinar by Prof. Jean Macq on "Systems Thinking in times of Corona(virus)" (40 participants to the webinar + 11 participants to the network's meeting). The meeting participants decided to continue with the BNR and to try and organise a webinar more regularly (every 3 months) and to also issue the Newsletter more regularly (every 3-4 months).

## WG Democratic Republic of Congo

In 2020, this working group developed a collaboration with the working group on the Access to Quality Medicines and several BCH members and partners.

This collaborative group will examine access to narcotics and their use as pain relievers in Kinshasa. A survey will be carried out in a large number of hospitals, including those managed by Chaîne de l'Espoir, ULB-Coopération, Médecins Sans Vacances and Benelux Afro Center in collaboration with the working groups (integration, vertical programmes, palliative care and support for the hospital sector) of the Hub Santé platform in Kinshasa.

This synergy of Belgian actors implementing health care programmes in DRC and being part of the DRC working group aims to focus on the proper use of narcotics for the treatment of chronic pain in palliative care, whether in hospitals or in an outpatient setting. A review of the current legislation for the import, storage, distribution, monitoring and evaluation of the use of narcotics will be carried out. Legislative adaptations will be studied with all the partners concerned in the DRC. Meetings are planned in Kinshasa and in Belgium with several stakeholders.

## WG Access to Quality Medicines

**Background & history In Belgium, universal access to quality-assured medical products is a shared concern from NGOs, academia and other organisations, as well as from individual humanitarian workers, researchers, activists, students, etc.**

This working group brings together pharmacists, researchers, NGO workers and other stakeholders, for sharing insights, research and field experiences on access to quality-assured medicines. In 2008, the working group had promoted the development of a [Charter for the quality of medicines](#), which paved the way to further operational and advocacy activities. Some WG members are founding and current members of [QUAMED](#), and the first signatories of a Commitment with Belgian authorities<sup>4</sup> to assure and monitor the quality of medicines purchased via development cooperation. Noteworthy, our meetings are frequently attended by external colleagues, interested in our contents.

### General objective:

The group aims at influencing pharmaceutical policies in Belgium, both at government and organisation level, and in LMICs. To do so, we organize internal meetings for sharing knowledge and experience; public workshops to network and advocate with a broader group of relevant stakeholders; and we actively network with other like-minded platforms, such as [MedsWeCanTrust](#) and IDDO.

### Main activities in 2020

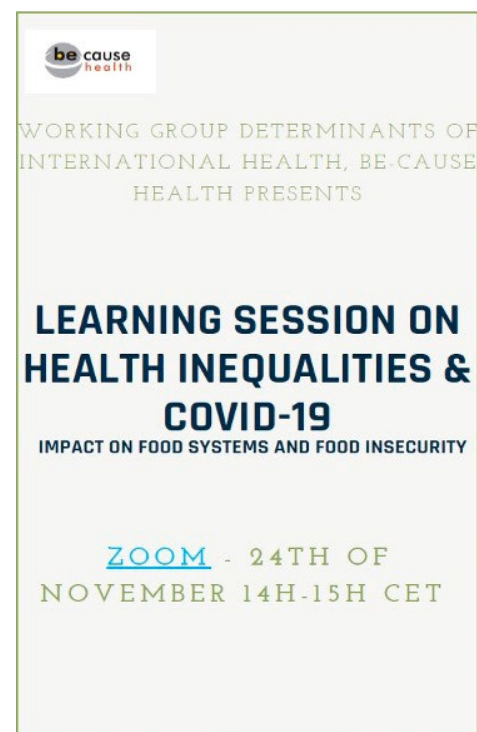
- » An in-person meeting, attended by 15 people, was held on 24/02, with two guest speakers: Katrina Perehudoff, Post-Doctoral Assistant, Department of Public Health & Primary Care, Ghent University, who presented her research on "Universal access to essential medicines: Is legislation the missing link?;" and Jocelijn Stokx, of the Christian Mutuality, who gave feedback from the 4th EPHA Universal Access and Affordable Medicines Forum.
- » An online meeting, attended by 34 people, was held on 30/04, with focus on pharmaceutical issues related to the efficacy, availability, quality and procurement of COVID-19 related medical products, including a presentation of the support available from QUAMED.
- » Two meetings of the "Belgian subgroup" that focuses on the translation into practices of

the [Commitment with Belgian authorities](#), were held respectively on 24/02 (in person) and 17/09 (online). The group refined its indicators of performance, and started analysing the challenges and barriers to the implementation of the Commitment.

- » An online meeting was held on 20/10, with a subgroup of French-speaking members interested to use in the field the checklist developed by Schiavetti, Ravinetto et al ([A simplified checklist for the visual inspection of finished pharmaceutical products: a way to empower frontline health workers in the fight against poor-quality medicines. J of Pharm Policy and Pract 13, 9 \(2020\)](#) ).
- » A qualitative study investigating the use of the WHO Prequalification Program among QUAMED and Be-cause health members was published in the Bulletin of the WHO (Nebot Giralt A, Ronse M, Ravinetto R. [A survey of nongovernmental organizations on their use of WHO's prequalification program. Bull World Health Organ 2020; 98:413–419](#)).
- » Initial contacts with the DR Congo working group led to common activities about access to (controlled) medicines/narcotics for pain control in LMICs. This is a particularly neglected and tragic problem, as millions of people with acute or chronic pain are being denied adequate therapy, including children.
- » As every year, the WG coordinator maintained an informal mailing list to distribute and comment scientific literature and policy documents relevant to the broad theme of “access to quality-assured medicines”. In 2020, 23 mails were sent. In addition, other information such as on relevant webinars and courses, has been shared with the members on an ongoing basis.

## WG Determinants of International Health

The Working Group on Determinants of International Health restarted its activities in April 2020. Viva Salud, Memisa, the Platform of Action on Health and Solidarity took the lead in reviving this working group.



There were three working group meetings in 2020, in April, in June and in September.

Initially, we reworked the existing draft note of the Working Group into a Strategic framework and planning September 2020 - June 2021 for the Working Group. We formulated three objectives:

**Objective 1:** In 2020-2021, the WG is starting off with expanding its knowledge and analysis with respect to social determinants and structural inequalities in relation to health and how this interacts with COVID-19.

**Objective 2:** In 2020-2021 the WG plans to raise awareness, inform and mobilise on the link between health, international development and the socio-economic impact of COVID-19.

**Objective 3:** Policy and advocacy work.

These objectives were translated into several concrete actions:

- » The first concrete action was the thematic file ‘Health and COVID 19’ on health inequalities and

how COVID-19 is deepening these inequalities. “The COVID-19 pandemic is first and foremost a public health crisis, but increasingly also a social one. The impact and potential health risks are not the same for everyone. The coronavirus settles on existing inequalities in society and deepens them. Ethnic minorities, people living in poverty or marginalised groups, such as the homeless, prisoners or people on the run, are at much greater risk of being infected by the coronavirus or paying for an infection with their lives.” This thematic file was developed at the request of 11.11.11.

- » During a webinar in October, Tess Woolfenden, Policy and Campaigns Officer at Health Poverty Action, highlighted the impact of framing on ‘development’ efforts in times of decolonisation.
- » Then, on 24 November, we organised our first ‘Learning Session’ on “Health and Health Inequalities. The impact of COVID-19 on food systems and food security.”: “COVID-19 opens up our view to larger political, economic and social issues previously present in our contemporary world. Therefore to call COVID-19 a pandemic, doesn’t do it justice. Instead, we should refer to it as a ‘syndemic’. To think in terms of a syndemic enables us to think of COVID-19 and its interaction with our health- and social inequalities, and therefore its larger interconnectedness and root causes. To dig deeper under the surface, we looked at the relationship between COVID-19 and food insecurity. Firstly, doctoral scholar and research fellow Jane Ezirigwe from the department of Research at the Nigerian Institute of Advanced Legal Studies in Lagos, Nigeria, highlighted her research on achieving the realities of food security imperatives in terms of the sustainable development goals on the African continent. Secondly, her research was combined with a practical example from the Belgian context. Iris Verhoeven from civil society organisation Riso in Tienen presented the mobilisation and advocacy of ensuring access to affordable and healthy food in a sustainable way, reducing food waste and promoting solidarity on a local level.” A recording was made of this session.

This working group is still looking for members to strengthen their actions, especially colleagues and partners active in the South. For information, you can contact Jasper Thys ([jasper@vivasalud.be](mailto:jasper@vivasalud.be))

## WG Mental health

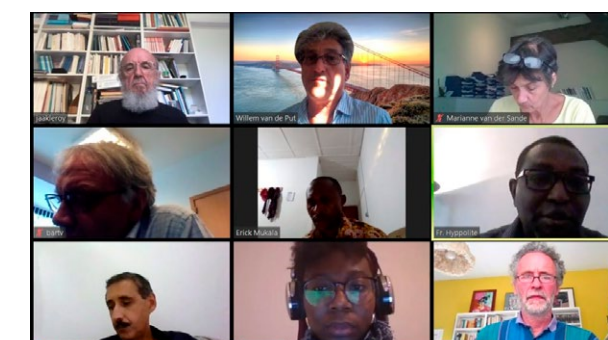
The COVID-19 crisis did not pass by unnoticed for the working group Mental Health. A lot of energy was invested in the organisation of a high-level international conference that would link conferences in London and Amsterdam to the next one in Paris. The idea was to ask for more attention for the plight of refugees, many of whom are stuck in the Sahel, far from international attention.

But then COVID-19 came, the conference was cancelled, and the refugees had yet another problem to face: not so much COVID-19 itself, but the fall-out of the measures taken internationally and at home to contain the pandemic. Isolation in a refugee camp is not the same as isolation in settings with more resources but the resulting mental stress is much alike!

All of the members had to devote time to this less-seen outbreak: the growing tidal wave of mental health problems in low and high income countries alike. As a working group, we shared information, tried various ways of organising ourselves, we saw the advantage of zoom meetings - but to be fair, we also lost some momentum.

We picked ourselves up in preparing the conference, or an alternative, digital modus of it, with a specific focus on the francophone African situation. Not only are places in Sahel often overseen, but there is also a huge gap in attention and funds between the francophone and anglophone situations in the world. A very active sub-group is working on this conference which is due in June 2021.

Apart from the conference we had regular sessions and we need to rethink them in terms of zooming, timing, composition and subject matter. We found ourselves confronted with the same issue as any platform for international mental health: what is the relation between psychiatry and psychosocial work? Should the focus be on doctors or social workers, even if we all agree we need both? In 2021 we will boldly move forward to rise above this paradox. And with a conference and a paradox to work on in the midst of a pandemic of historic proportions, what could possibly go wrong?

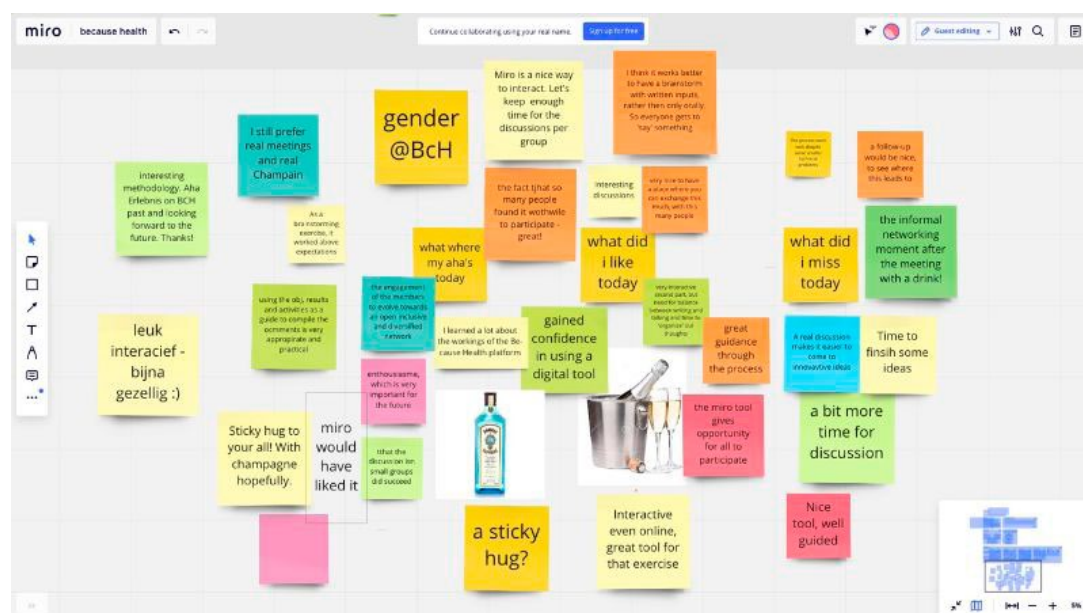




## EXTERNAL EVALUATION

The Terms of Reference were drafted with the help of the ITM M&E staff and under the supervision of the steering committee. The consultancy firm here submitted the best proposal and appointed Dr. René Dubbeldam to lead the evaluation, together with Marieke Devillé, Elfried Klarenbeek and Eleonore Deboutte. The quality assessment was done by Theo Devillé.

An electronic survey was proposed to all the BCH members. Individual interviews were conducted by Dr. Dubbeldam. A Social Network Analysis completed the exercise in January 2021. The results and recommendations were presented during the first trimester of 2021, in time for the planning for 2022-2026. The evaluation has been concluded at the General Assembly in March 2021.



Evaluation Workshop 9 February Planning 2022-2027

## COORDINATION

Tim Roosen and Nathalie Brouwers kept the boat afloat while it was rocked by COVID-19 and by Pol De Vos being on sick leave. Quite soon however an interim was recruited. Xavier de Béthune, already a member of the SC, took over from half of July and helped to find the right person to succeed to Pol. Magalie Schotte is joining BCH at the beginning of March 2021. We wish her all the luck she deserves.

We produced and shared Newsletters regularly throughout the year. Some demands to disseminate news or other requests were postponed or redirected to the website to avoid overload. In 2021, the Newsletter will be as regular and interesting as ever.

The website has been updated regularly, with a special page on COVID-19. Facebook and Twitter were followed up, but not as intensely as hoped. We are looking forward to taking up this aspect with the coordination again.

## NETWORK ORGANISATION / GOVERNANCE

## Steering Committee 2020

- » Elies Van Belle, Memisa | Chair
- » Pol De Vos, Institute of Tropical Medicine (ITM) Coordinator
- » Xavier de Béthune, Institute of Tropical Medicine (ITM) Coordinator a.i.
- » Anselme Mubeneshayi Kananga, International Youth Association for Development (IYAD) | Treasurer
- » Marlies Casier, Sensoa
- » Aline Labat, École de Santé Publique – Université Libre de Bruxelles (ULB) & Elisabeth Paul, Université Libre de Bruxelles - Université de Liège
- » Raffaella Ravinetto & Thérèse Delvaux, Institute of Tropical Medicine (ITM)
- » Ignace Ronse & Cathérine Dujardin, Belgian Development Cooperation - DGD | Observer
- » Stefaan Van Bastelaere & Karel Gyselinck, Enabel - Belgian Development Agency

### Listed member organisations (December 2020)

- » AEDES - European Agency for Development & Health
- » Belgian Medical Students Association
- » Benelux Afro Center
- » Çavaria
- » La Chaîne de l'Espoir - De Keten van Hoop
- » COTA
- » Damien Foundation
- » Ecole de Santé Publique – ULB
- » Enabel - Belgian Development Agency
- » FOS - Socialistische Solidariteit
- » Fracarita
- » GAMS
- » Handicap International
- » hera
- » International Centre for Reproductive Health

- » Institute of Tropical Medicine
- » International Youth Association for Development
- » Light for the World
- » Louvain Coopération
- » LUMOS UZ Leuven
- » Médecins du Monde – Dokters van de Wereld
- » Médecins sans Vacances – Artsen zonder Vakantie
- » Memisa
- » Le Monde selon les Femmes
- » Mutualités chrétiennes – Christelijke Mutualiteiten
- » Odah vzw/NUV-HOP
- » Royal Academy for Overseas Sciences
- » Sensoa – Vlaams Expertisecentrum voor Seksuele Gezondheid
- » UC Louvain
- » ULB Coopération
- » Viva Salud
- » Wereldsolidariteit - Solidarité Mondiale

## Observer organisations

- » Belgian Development Cooperation – DGD
- » Ministry/Federal Public Services for Health, Food Chain Safety and Environment
- » Vlaanderen – Departement Buitenlandse Zaken



## OVERVIEW EXPENSES 2020

REVENUES	RECEIVED
DGD FA4 ITM project (operating costs)	€ 50.000,00

EXPENSES	BUDGET	REALISED
Network management - Steering group	€ 1.000,00	€ 257,82
Update Body & Rights e-tutorial	€ 13.000,00	€ 10.781,10
Communication (Be-cause health matters, translations, graphic work, annual analytics, support & hosting Body & Rights)	€ 4.000,00	€ 6.209,72
Representation of Be-cause health expertise at international fora (HSG 2020 Dubai virtual conference)	€ 10.000,00	€ 135,37
Annual conference Climate Change 2020	€ 6.000,00	0
Working group activities and events (translation brochure Determinants of International Health)	€ 14.000,00	€ 1.527,99
Stimulate cooperation in Global South	€ 2.000,00	0
<b>Total expenses 2020</b>		<b>€ 18.912,00</b>
<b>Total budget operating costs 2020</b>	<b>€ 50.000,00</b>	
<b>Balance 2020 (operating costs)</b>	<b>€ 31.088,00</b>	

The COVID-19 pandemic has limited the level of expenses in 2020. Some of the activities will be held in 2021. The Be-cause health coordination and steering committee will develop innovative approaches in 2021 to ensure a sound budget management.

## CONCLUSION

2020 has rocked the planet. Despite the many challenges to keep a network alive in the “new normal”, Be-cause health is weathering the storm quite nicely. Activities have mostly been realised as planned and those needing postponement to 2021 will likely benefit in terms of quality and impact.

The Steering committee has met on a regular basis and made the necessary decisions. Working groups have realised most of their ambitions and sometimes bootstrapped themselves. Tools as the new version of the B&R e-tutorial have progressed and will be launched in 2021.

The good news is that less resources were needed to accomplish this program. The lesser news is that running a virtual platform is much less fun than running a physical one, both for the governance and for the members. Still, the opportunity to reach out beyond the borders of Belgium and to profit from the experience of field workers and LMIC partners is a major chance.

2021 will see us planning the five years ahead. COVID-19 has changed the way we look at things, act and plan. It has shown how innovative and resilient we can become. But it is not alone to bring change and challenge: the annual conference of BCH in 2021 will study climate change and health. Mental health will be stronger if communities and patients are invited as prime actors. Narcotics could start to become a solution again instead of only a problem. Gender based rights will progress through actions and advocacy. Digital tools will help health care workers and people to foster knowledge and mutual listening. Quality assured medications and supplies will heal more people, while requiring more political actions. Studying the finances of health care will increase awareness of the real needs. Policies based on sound research will create evidence for Health Care for All strategies.

Still, many questions remain. Posing them time and over again will make BCH a stronger platform: de-colonization, framing, tolerance and nuance to respond to growing radicalisation, universal social protection to respond to marketisation, scientific evidence to respond to infodemics.

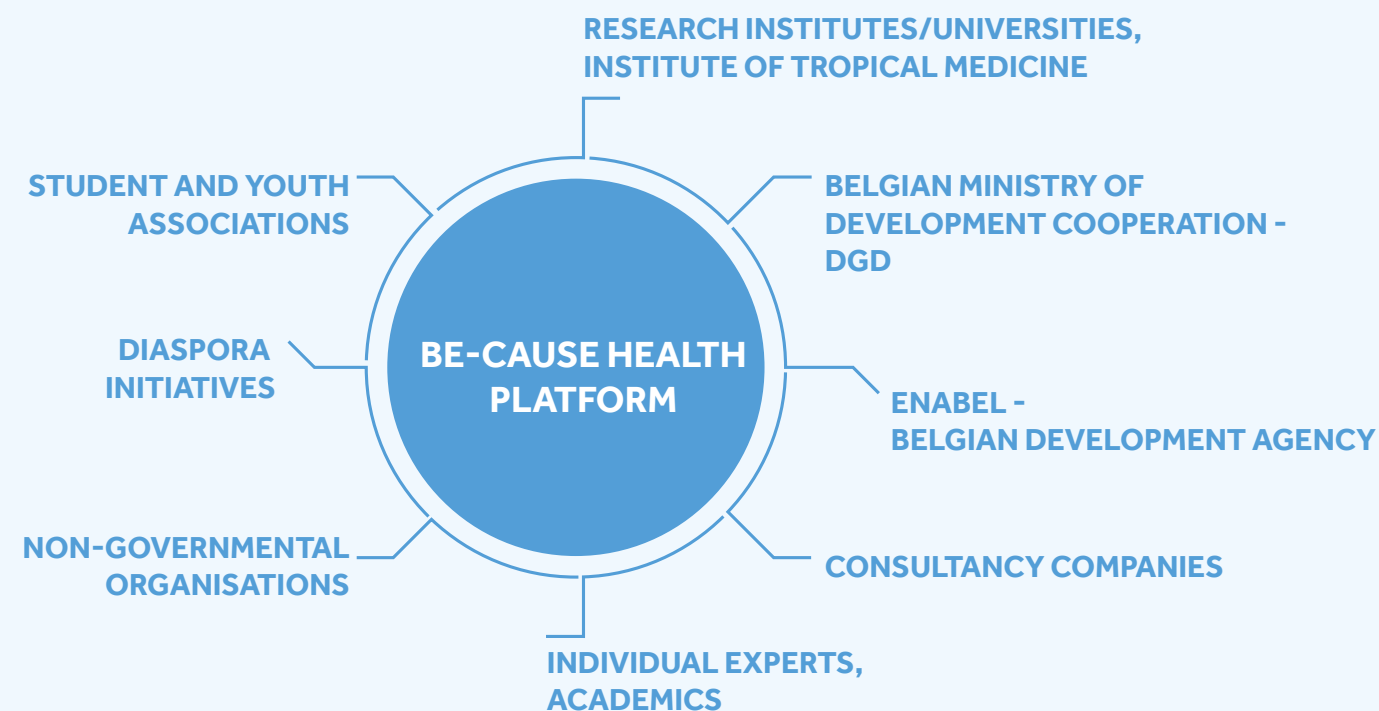
We are looking forward to implement all these!

I was often challenged as interim coordinator of this vivid platform, and will remain an active member of the steering committee.

Best regards,

Xavier de Béthune

Coordinator a.i.



## WHO WE ARE

### Thematic groups contacts

For the following themes, there is an active group of members who organise regular meetings to exchange and learn, co-organise workshops or seminars and co-develop tools:

- » Access to Quality Medicines | Raffaëlla Ravinetto, ITM
- » DRC – Diaspora co-operation | Anselme Mubeneshayi Kananga, IYAD
- » E-health - Digitalisation | Stefaan Van Bastelaere, Enabel
- » Mental Health | Willem van de Put, ITM
- » Research on Health Systems | Elisabeth Paul, ULiège I ULB & Dimitri Renmans, University of Antwerp
- » Sexual Reproductive Health and Rights | Marlies Casier, Sensoa
- » Determinants of International Health | Jasper Thys, Viva Salud & Marijke Ceyssens, MEMISA

Other themes with pooled expertise within the platform include:

- » Complexity
- » Chronic non communicable diseases – NCDs
- » Human Resources for health
- » People Centred Care
- » Social Health Protection
- » Universal Health Coverage

For each of these themes, you can find reference documents, essential links and presentations of previous workshops and conferences, [on our website](#).





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