



# BE-CAUSE HEALTH ANNUAL REPORT 2021



## BECAUSE HEALTH IN PICTURES

# 2021

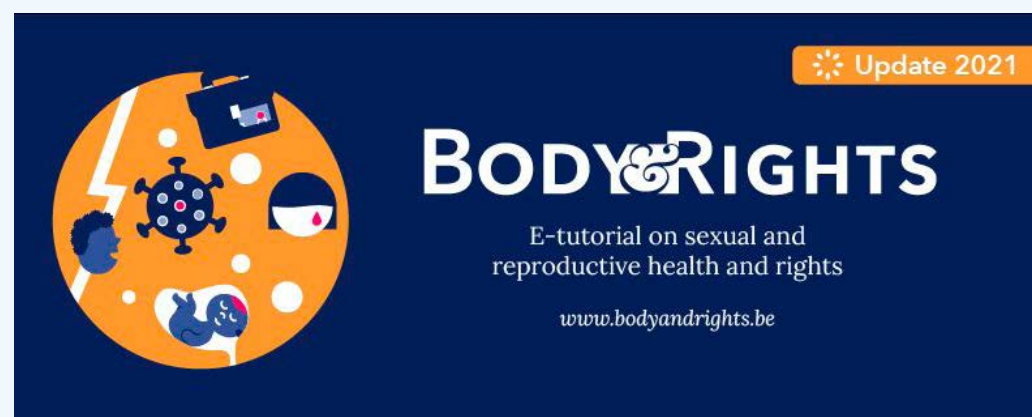
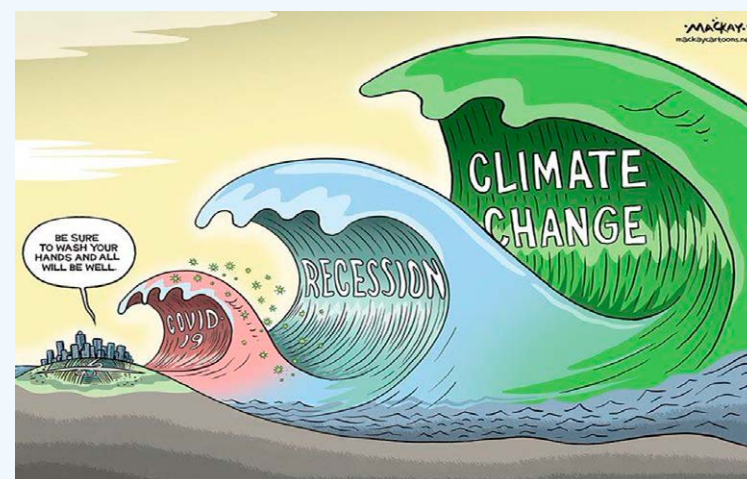


Photo: Raffaella Ravinetto (ITM), Chair Working group Access to Quality Medicines and Anselme Mubeneshayi Kananga (IYAD), Chair Working Group DRC / Diaspora Co-operation working together on a mixed-method study on access to opioids for medical use in DRC.



## TABLE OF CONTENTS

04\_Foreword

05\_List of abbreviations

06\_BCH International Conference on  
Climate Justice and Health Equity

07\_BCH ECTMIH session From Agadez  
to Brussels: repeated threats to the  
health of migrants

09\_Working groups

14\_Coordination

15\_Overview expenses 2021

16\_Conclusion

17\_Network organisation / Governance

19\_Who we are

# FOREWORD

Dear Colleagues, dear Friends,

2021 would be the year of “freedom”. Vaccines would “liberate” us from the damned virus. The rhetoric of war was rampant. And above all, life would be just as it was before, normal...

But 2021 stayed a “COVID year”, with successive waves of infections followed by measures that intervened in public and social life. Meetings were limited, and a lot of activities would take place online.

We organised our international conference “Mental health voices from Africa” in June 2021 online. And eventually also our annual Climate Justice and Health Equity conference went 100% virtual. The conference just fell in the middle of the fourth wave and only one week before the start of our conference our government announced a new set of measures that strongly discouraged meetings and gatherings. Fortunately, we were prepared and we had built in the option to organize the conference completely online.

Even though online conferences lack real atmosphere, the advantage of being able to gather participants and speakers from all over the world is an enormous added value for a platform on global health. The contributions of those who are often not heard at international conferences can be brought to the floor. A real must, especially with regard to these two themes.

Both conferences were also documented for the first time through a digital report. These “mini-websites” contain all the footage, background and analysis presented during the conferences. They are ideal learning resources on the topic Mental health in French-speaking Africa (<https://bchmatters14.be-causehealth.be/>), and Climate Justice linked to health equity (<http://bchmatters15.be-causehealth.be/>). So be sure to take a look at them.

2021 was also the year in which Magalie Schotte became the new coordinator. Xavier de Béthune did a real feat as interim coordinator and kept the network afloat at a crucial moment. Magalie took over in the beginning of the year and didn’t have much time to settle in. After a successful general assembly and analysis of the results of our evaluation, planning was needed.

ITM’s new framework agreement with DGD for the financing of the next 5 years had to be submitted. The recommendations from the evaluation were immediately taken into account. We will update our reference text, The Antwerp Declaration “Health Care for All”, and enrich it with new relevant themes and trends: such as the climate crisis, decolonization, mental health, migration, urbanisation, etc. We will work on an even more inclusive network of young people, partners in LMICS, women, vulnerable groups, ...

2022 does not have to be the year in which life will return to the way it used to be... We need change! Because who wants to “return” to a world in which inequality is not tackled enough; refugees are not welcome in HICs, vaccines are bought en masse by the rich countries, patents are managed in a way that knowledge cannot be shared and so many millions are denied the right to health and quality healthcare, a world in which the climate crisis is not taken seriously enough. This crisis is leading to a situation in which the most vulnerable worldwide are already victims of global warming. COVID-19 and the climate crisis are painfully exposing existing inequalities. LMICs more and more realize that the Western rhetoric of solidarity is dead letter. Many now demand their rights. Just like the many vulnerable groups in Europe and the US who were hit much harder than the rest of the population during the pandemic and the floods and heat waves. We can amplify their voice, and will continue to do so as a network.

A network as Be-cause health can only exist and live through the enthusiasm and initiatives of its members. Thanks to all of you for keeping up the good spirit despite the circumstances! And I would like to specifically thank the people of the steering committee, Magalie, Nathalie, and the ever-active WG coordinators.

Happy reading,

Elies Van Belle  
Chair Be-cause health



# LIST OF ABBREVIATIONS

ANGs	Actors of the Non-Governmental Belgian Development Cooperation
ANSER	Academic Network for Sexual and Reproductive Health and Rights Policy
APGS	Actieplatform Gezondheid en Solidariteit
BCH	Be-cause health
BNR-GH-HPS	Belgian Network of Researchers in Global Health – Health Policy and Systems – working group of Be-cause health
COVID-19	Coronavirus Disease 2019
DIH	Determinants of International Health
DGD	Directorate General for Development Cooperation (Belgium)
DRC	Democratic Republic of Congo
ECTMIH	European Conference of Tropical Medicine and International Health
EU	European Union
FA	Framework Agreement between the DGD and the ITM
FESTMIH	Federation of European Societies for Tropical Medicine and International Health
FGM/C	Female Genital Mutilation/Cutting
FOS	Fonds voor Ontwikkelingssamenwerking, Socialistische Solidariteit
GA	General Assembly
GAMS	Groupe pour l’Abolition des Mutilations Sexuelles
hera	Right to health and development (hera.eu)
HICs	High Income Countries
HIV	Human Immunodeficiency Virus
ICRH	International Centre for Reproductive Health (Belgium)
IDDO	Infectious Diseases Data Observatory
ITM	Institute of Tropical Medicine (Antwerp), host of BCH
K4D	Knowledge for Development
LMIC	Low and Middle Income Countries
MMI	Medicus Mundi International
ODA	Official Development Assistance
Q&A	Questions and Answers
SDGs	Sustainable Development Goals
SC	Steering Committee
SRHR	Sexual and Reproductive Health and Rights
STI	Sexually Transmitted Diseases
UCOS	Universitair Centrum voor Ontwikkelingssamenwerking (VUB)
VUB	Vrije Universiteit Brussel
WG	Working Group
WHO AFRO	World Health Organization, Regional Office for Africa



# BCH INTERNATIONAL CONFERENCE ON CLIMATE JUSTICE AND HEALTH EQUITY

The accelerating health crisis, induced by the climate emergency, requires our urgent attention. People around the world face increasing extremes of heat, food and water insecurity, and changing patterns of infectious and chronic diseases.

This is a global challenge, and the impact is being felt transnationally. The link between climate change and health shows that it is mainly marginalized and poorer population groups, both in the global South and in the global North, that are most affected. This makes the climate and health crisis also a major issue of justice.

"How can we approach this complex problem in a just manner?" was the central question of our 2021 international conference. Speakers from different continents, and from different perspectives and backgrounds discussed this on November 23 and 24, 2021. Participant contributions from their

different fields of experience and disciplines took advantage of recent advances in climate sciences, technologies and services as well as lessons learnt from communities affected by extreme weather events and climate variations.

An explicit choice was made to give the floor to those groups (indigenous populations, youngsters, women, people with disabilities, ...) that are often not really listened to at high-level international conferences. The urgency of the issue, and the need for an interdisciplinary, intersectoral, intergenerational and international approach, emerged in the interventions and debates.

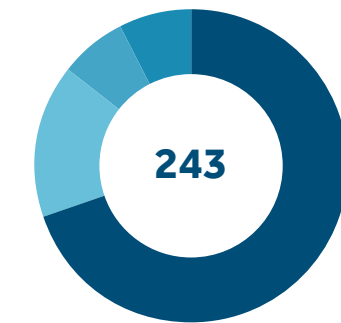
A key message of the seminar is that these complex health issues should be tackled in international cooperation, solidarity and policy, and that attention should also be paid to regions and groups that are already experiencing a lot of stress.

Climate risks are carried out unjustly. Importantly, we not only look at biomedical, narrowly formulated, solutions and treatments, but also consider how traditional, indigenous and community initiatives are working together to tackle the climate crisis.

There is a lot of knowledge, practice and prevention there, much more than in the industrialized and capitalist economies in the West, about how humans can have their place in ecological systems in a sustainable, balanced way. That is ultimately the best for public health and also the health of the planet.

The conference was not an end, but a beginning. A BCH working group on Planetary Health emerged from the lessons learned during the conference. The working group will take forward the key outcomes of the conference and develop a range of activities that will focus on the climate emergency, transformation and how global health stakeholders could contribute to this. The working group's ultimate goal is contributing to climate justice and health equity.

The working group wishes to be positioned as the central Belgian climate and global health network, promoting meaningful participation of a diverse range of stakeholders from LMICs and underrepresented and marginalised people and communities..

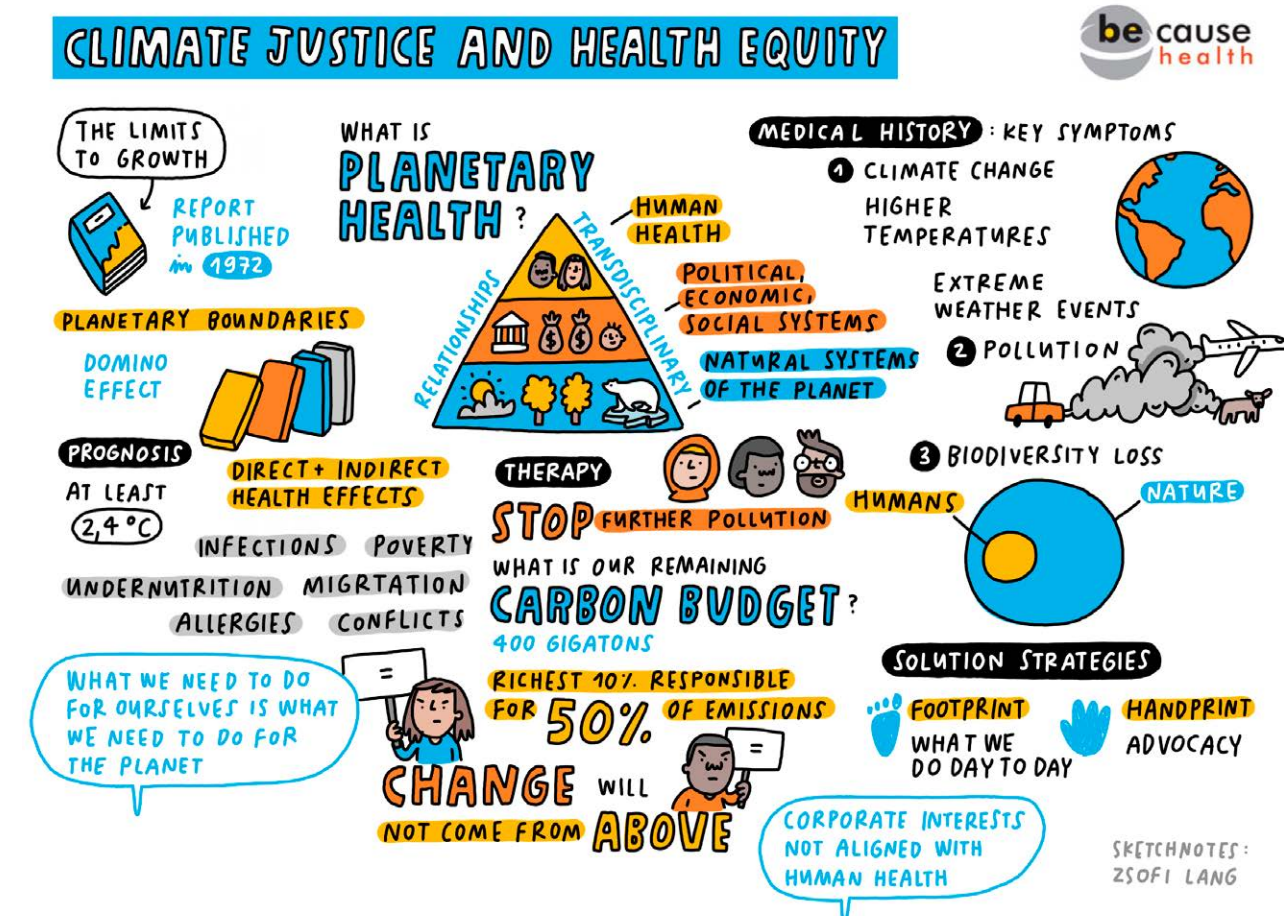


Annual conference in numbers

**Presentations presented during the conference:**  
[www.be-causehealth.be/en/presentations-23-24-november/](http://www.be-causehealth.be/en/presentations-23-24-november/)

**A digital report with the recordings of the conference embedded, in French:**  
<https://bchmatters15.be-causehealth.be/fr/>  
**and English:** [bchmatters15.be-causehealth.be](http://bchmatters15.be-causehealth.be)

**All information on the new WG Planetary Health:** [www.be-causehealth.be/en/bchgroups/planetary-health-2/](http://www.be-causehealth.be/en/bchgroups/planetary-health-2/)



## BCH ECTMIH SESSION FROM AGADEZ TO BRUSSELS: REPEATED THREATS TO THE HEALTH OF MIGRANTS

BCH organised an online session during the 2021 ECTMIH conference 'Global challenges in health, migration and equity' on the complex impact of migration and violence on health. The health of people on the move deteriorates rapidly once they leave their homes. They suffer hardship through deprivation, violence, rejection and lack of access to basic humanitarian services.

We started with a general overview of migration as a complex phenomenon, after which we had a look at the migrants moving inside the African continent and at the different forms of violence suffered by

migrants and refugees along migratory routes and their impact on health. The session ended with a presentation of the situation of migrants at their final destination, in Brussels, and a Q&A with the audience.



# WORKING GROUPS

## WG Access to Quality Medicines

<https://www.be-causehealth.be/en/bchgroups/access-to-quality-medicines/>

The issue of access to quality assured health products has been a policy priority for Belgium for the last years, and the pandemic has further emphasized how crucial access to quality medicines are in view of attaining universal health coverage.

In 2021, the medicines WG organized two online meetings, respectively on 28 January and 25 May, both attended by about 30 members. We covered a mix of topics, including updates on research on quality of medicines (by colleagues of Tübingen University), updated figures on substandard and falsified health products for Covid-19 (by colleagues of the IDDO's Medicine Quality Research Group), and reflection on (vaccines) inequity in the global response to Covid-19 (by ITM).

In the second half of the year, we focused our energies on the organization of the first online workshop in French, which took place on 2 December and was attended by about 75 participants, with high-level speakers from Senegal, Niger and WHO AFRO. The proceedings are available at [www.itg.be/F/Article/comment-garantir-la-qualite-des-medicaments-en-afrique-francophone](http://www.itg.be/F/Article/comment-garantir-la-qualite-des-medicaments-en-afrique-francophone).

During 2021, the group coordinator sent out twenty-three mailings for our informal literature review on access to quality medicines; noteworthy, the mailing was transformed into a Google Groups, to cope with an increasing number of people asking

to receive it (currently more than 400). In December 2021, also a smaller French-speaking mailing has been started, as a follow-up to the workshop.

The collaboration with the DRC WG resulted in a mixed-method study on access to morphine, carried out in the DR Congo in the last quarter of 2021; the preliminary results were presented in Kinshasa in December, and the overall findings are being analysed at the time of writing. It also resulted in a peer-reviewed publication on the training on use of opioids analgesics in West and Central Africa (Frau, S., Kananga, A.M., Kingolo, J.N., Kanyunyu GM, Zongwe AKH, Tshilengi AN, Ravinetto R. *Training on adequate use of opioid analgesics in West and Central Africa: a neglected step on the way to access to essential medicines?* *J Pharm Policy Pract* 2021; 14 (104)). See: [research.itg.be/en/publications/training-on-adequate-use-of-opioid-analgesics-in-west-and-central](https://research.itg.be/en/publications/training-on-adequate-use-of-opioid-analgesics-in-west-and-central)

Overall, we are proud of the collaboration with the DRC WG, because the issue of access to opioids for medical use has traditionally been neglected in global health and it needs much more attention, research and advocacy. This will stay as a priority in 2022-2026.

Another clear need is represented by the scientific update and capacity building for medicines stakeholders in French-speaking Africa; while a yearly online workshop and a mailing list are a good starting point, there is a clear demand for more activities, e.g. a short course, which would require some ad hoc funding.

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

<https://www.be-causehealth.be/en/bchgroups/belgian-network-of-researchers-in-global-health/>

In 2021 the BNR-GH-HPS (created in January 2019) conducted two activities.

- » A fifth meeting of the network on 8 February via Teams, including a Webinar by Dimitri Renmans on "Introduction to causal loop diagrams". The meeting was attended by 10 participants from the WG and some external participants attended the webinar.
- » A Webinar on 20 October on "How can our competences in global health policies and systems contribute to the Covid-19 response?", including a Keynote speech on "Complexity, Health & Covid-19" by Joachim Sturmberg: <https://youtu.be/sx1SkqYDyE>.

## WG Democratic Republic of Congo

<https://www.be-causehealth.be/en/bchgroups/dr-congo-2/>

The DRC WG is a geographical group, given the bilateral and economic relationships between DRC and Belgium. The WG is represented by the various stakeholders involved in international solidarity and active in DRC: ANG's, health institutions, 4th pillar & diaspora associations, universities, and anyone interested in health development in DRC.

In 2021, the WG organized two online meetings with the Hub-Santé (health hub) platform of DRC, in order to create interaction between stakeholders in the global North and in the global South, engaged for improvement of the health system. In total, there were 35 participants for both meetings. Following themes were discussed during the meetings:

- » humanization of care;
- » synergy between actors;
- » suitable models of public-private partnerships

As part of creating more synergy between the different BCH WGs, a collaboration with the WG Access to quality medicines resulted in a mixed-methods study on access to morphine, carried out in DR Congo in the last quarter of 2021 (see above: WG Access to quality medicines).

## WG Determinants of International Health

<https://www.be-causehealth.be/en/bchgroups/determinants-of-international-health/>

The WG DIH is a joint working group of BCH and the Action platform Health and Solidarity (APGS). After a short break in 2019, the WG was revived in April 2020. In 2021, the WG continued its activities with a small group of very dedicated members.

The WG established a series of learning sessions with the aim of increasing its knowledge on relevant issues at the intersection of the DIH and the Covid-19 pandemic. In 2021, 170 people from a variety of backgrounds participated in the two organised learning sessions.

In January 2021, the working group invited a number of experts to discuss the obstacles to global access to Covid-19 vaccines and other key tools in the fight against the coronavirus. The session also explored the actions and initiatives taken to bring Covid-19 vaccines, tests and treatments into public hands, with a particular focus on the European Citizens' Initiative No Profit on Pandemic.

During the following learning session, in May 2021, the WG, together with Moisés García and Gloria Cruz (health activists at Foro Nacional de Salud, a partner from FOS in El Salvador), Marco Angelo from Wemos, Ravi Ram from People's Health Movement and Clara Affun-Adegbulu from the ITM, explored how development cooperation can strengthen health systems worldwide. The speakers highlighted the importance of local anchoring of health policies and the role of social movements, warned of the impact of public-private partnerships and called for decolonising the world of international health. The recording can be accessed at <https://www.be-causehealth.be/en/bch-events/learning-session-how-can-we-strengthen-public-health-care-worldwide-2/>.

The WG compiled the main conclusions of the learning session in May into a report that was shared with all participants and other relevant platforms and networks working on health. It also formed the basis for an exercise on the thematic focus of the WG in the second half of 2021 and the first half of 2022. In the report, the members of the WG decided to pay more attention to the decolonisation of international health. A decision that accelerated the decolonisation process within Be-cause health.



## WG Digitalisation

<https://www.be-causehealth.be/en/bchgroups/digitalisation/>

The WG on digitalisation organized two eHealth academies.

On 26 March a first eHealth academy was conducted to look back at what was presented 5 years earlier on the 25th of March 2016, during the annual BCH seminar 'Health 2.0: Are we ready to go digital?'

The following topics were on the agenda:

- » an ex-Post sustainability evaluation of 57 eHealth Projects implemented between 2016 and 2019 at the Belgian Development Agency by Charlot Diepvens;
- » an analysis of the K4D initiative in Burundi between 2016 and 2021 by Prof. Vanden Ende;
- » an analysis of the experience of Rwandan hospitals with OpenClinicGA since 2016: 'Les systèmes de gestion d'informations hospitalières peuvent-ils contribuer dans la surveillance de la couverture santé universelle?' by Gustave Karara, and
- » a state of affairs on health information in Burundi after 5 years of support in DHIS2 by Belgium and other partners by Spes Ndayishimiye.

The session and debate were moderated by Dr. Stefaan Van Bastelaere.

On June 18, a second eHealth academy was organised, on the determinants for success and failure in innovation: the 2016-2019 experience in eHealth in a multi-country project. On the agenda was a presentation by Charlot Diepvens, intern since February 2021 at Enabel, in the unit of Global Health, Social Protection and Human Rights on successes and failures of eHealth. She shared with us the results of the study introduced in march 2021. This study covered the eHealth solutions Enabel developed between 2016 and 2019 in Burundi, Rwanda, DRC, Niger, Benin, Senegal, Peru and Uganda, through a framework contract with VUB. Two years after ending the first framework contract, Charlot made an ex-post analysis on success and failures and the determinants.

Unfortunately, a third eHealth academy on digital health in the desert was postponed to 2022.

## WG Mental health

<https://www.be-causehealth.be/en/bchgroups/mental-health/>

The WG Mental health worked on Covid-19 and its mental health consequences. Although digital options seemed to offer an excellent way to get together more often, shorter and with a clear focus – such as sharing materials – this did not really work out. There is not a very clear explanation as to why this was the case. People were extremely busy trying to make the best of the many requests for help coming to them, it took a long time to get used to the advantage of online meetings, and perhaps the composition of the working group was simply too diverse to be meaningful for a majority. That was a missed opportunity, because the more we have been able to look back at what was happening in both high income countries and low income countries; the more we see how the challenges for improved mental health are very similar in these two situations.

The WG had a very nice presentation on a thesis that was one of the winners of the Prize for Global Research - awarded yearly by the Province of Antwerp to research projects of 'master-after-master'-students of ITM and other Higher Education Institutes. The thesis was written by John De Maesschalck, MPH-alumnus 2021, on 'Beyond psychocentrism: contextualizing mental health through a case study on indigenous youth suicide': <https://youtu.be/K1GUymR0bc0>.

In June 2020, the mental health conference planned in Brussels was cancelled. The conference was meant to be a step in between the 'high-level' meetings in Amsterdam (2019) and Paris (2020). It took the WG some time to decide to move to an online format for the conference. From that moment on things developed quite smoothly. It was an interesting experience to see how many more people can actually be reached through an online conference as compared to the face-to-face conference.

## International Conference on Mental Health and Psychosocial Needs in Francophone countries of Sub-Saharan Africa

On 14 and 15 June, the BCH Mental Health WG organised an international online conference that focused on the challenges, needs and practices of mental health and psychosocial support in French-speaking Africa.

The conference aimed to be a first step on the way to creating a platform for sharing interdisciplinary and intercultural contributions. Speakers representing different disciplines and stakeholders came from Benin, Burundi, Cameroon, Côte d'Ivoire, Guinea, Madagascar, Mali, Niger, the Central African Republic, the Democratic Republic of Congo, Rwanda and Chad.

On the basis of two half days of rich exchanges about the challenges of mental health in French speaking sub-Saharan Africa, the conference identified several cross-cutting themes.

1. Accessibility of care is a central issue. To help people access services, it is important to reduce the stigma surrounding mental health.
2. Proactivity was regularly mentioned. Effective governance and sufficient resources are essential for effectively integrating mental health care and psychosocial support into the different levels of the public services pyramid (from districts or health zones to regions, provinces, countries). Governments should not put off tackling challenges until a major crisis such as climate disaster, genocide, war or pandemic occurs.
3. The view on effectiveness and sustainability of mental health interventions has shifted with new insights gathered over the last few decades. The place, role and tasks of health care structures as well as the types of interventions need to be redefined. As Florence Baingana pointed out, in most countries in sub-Saharan Africa, an average of 80% (and often 100%) of resources for mental health are allocated to psychiatric hospitals.
4. The broad definition of "mental health and psychosocial well-being" came up during the conference. The range of medical conditions (including severe mental disorders but also chronic psychosomatic complaints, epilepsy, and substance abuse) and the effects of stress that people and communities experience due

to poverty, conflict, climate change and other socio-economic determinants of health cover an enormous diversity of issues, which play out in different contexts and socio-cultural settings.

5. Tensions are known to exist between care-givers of different identities, professionals and users with different beliefs and convictions, and also between advocates of different sectors such as health, protection and social work. The conference showed that exchanging views and sharing examples of collaboration seemed to be one of the best ways forward.
6. Finally, the importance of enhanced cooperation between mental health projects and psychosocial support in different sub-Saharan African countries was a recurring theme during the conference. The organisation of meetings and exchanges via a "community of practice" between French, English and Portuguese speaking stakeholders and countries can contribute to the development of dialogue and contributions beyond cultural, linguistic and historical differences.

A digital report with the recordings of the conference embedded, in French: <https://bchmatters14.be-causehealth.be/index.html> and English: <https://bchmatters14.be-causehealth.be/eng/index.html>





## WG Sexual and Reproductive Health and Rights

<https://www.be-causehealth.be/en/bchgroups/sexual-and-reproductive-health-and-rights-hiv/>

### Successful re-launch of e-learning Body&Rights

2021 was dedicated to the renewal and relaunch of the BCH e-tutorial Body&Rights for stakeholders in international cooperation. The e-tutorial available in Dutch, French and English helps to build an understanding of what sexual and reproductive health and rights are, why they matter, and how they can be advanced. Users obtain a certificate endorsed by the Belgian development cooperation upon completion of the e-learning.

Following the first years of use and an evaluation by here, [www.bodyandrights.be](http://www.bodyandrights.be) was revised, updated and rebuilt on a new platform. The platform now provides a course entitled "Body&Rights, Themes" and "Body&Rights, Testimonials".

"Body&Rights, Themes" contains 7 modules that zoom in on a specific SRHR issue with videos, interactive questions and clear fact sheets. Safe childbirth, sexual violence, child marriages, genital mutilation, HIV, STIs, family planning and sexual rights are discussed, with concrete suggestions on what you can do. Special attention is paid to young people and sexual minorities.

In "Body & Rights, Testimonials", four experts talk about their experiences in the field. These video interviews are inspiring and provide many tips. How do you get something on the agenda? How do you take into account cultural differences? How do you make a difference through inventiveness and perseverance? What is Belgium's position on an international level? Diplomats Hannelore Delcour and Dirk Brems, Enabel SRHR expert Marleen Bosmans and Memisa project manager Anna Salvati share their experiences.

The e-tutorial was updated by Sensoa, in collaboration with thematic experts of ITM, DGD, Enabel, Çavaria, GAMS, Plan Belgium, UCOS, FOS, Memisa, ICRH and Médecins du Monde who are part of the SRHR WG.

The e-tutorial was presented to Minister of Development Cooperation Meryame Kitir's cabinet

and Minister Kitir expressed her support for SRHR and the importance of the e-learning in a joint video message on social media with Vice Prime Minister Petra De Sutter (in Dutch): <https://fb.watch/bU1j-M0EEEx/>.

### Engaged bi-monthly exchanges on international (policy) developments

The SRHR WG continued its bi-monthly exchanges on international (policy) developments regarding SRHR, including HIV.

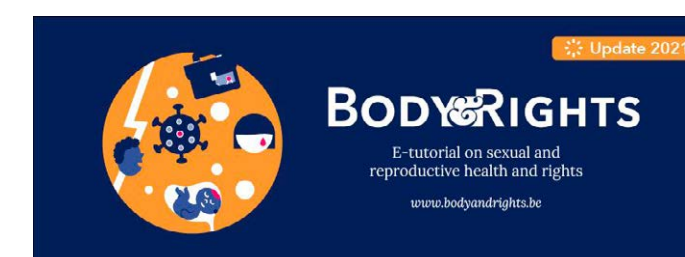
The WG held exchanges on – amongst others – the trends in Belgian ODA support for SRHR, the High-Level Meeting on HIV, the Commission on the Status of Women and the Commission on Population and Development, Belgian's contributions to the Generation Equality Forum and Minister Kitir's plans on SRHR in development cooperation.

The ANSER network, coordinated by ICRH, presented its work to the WG members and invited the members to join the work on bridging the research-policy divide. GAMS Belgium presented the findings of its research into the SRHR needs of women living in Belgium who have undergone FGM/C.

Members of the SRHR WG also participated in the online seminars of the 'Parliamentarians for the 2030 Agenda' (the Belgian parliamentary group following-up on Belgium's efforts to realize SDG3 and SDG5) on bodily autonomy, on the (gendered) impact of Covid-19 on young people's access to education and on 40 years of international solidarity in the uptake of HIV.

### Dedicating attention to SRHR and the climate crisis

The SRHR WG helped to ensure meaningful academic and non-academic contributions on the interlinkages between SRHR and the climate crisis in the BCH conference on Climate Justice and Health Equity and moderated a dedicated session.





# COORDINATION

After the BCH coordinator Pol De Vos went unexpectedly on sick leave, an interim coordinator was recruited. Xavier de Béthune, already a member of the SC, took the role of coordinator a.i. from July 2020 until March 2021. A new coordinator, Magalie Schotte, was recruited and started in March 2021.

As it has been for many years, Nathalie Brouwers is still supporting the BCH network with regard to administration and communication.

### Message from Xavier de Béthune

I spent 7 or 8 months coordinating Be-cause health, out of necessity. It was a very stimulating time for me. I am very happy that we found a dynamic successor. And I remain on board of the Steering Committee of course, for as long as I am allowed to. Thanks to everybody for your support ... and patience.

Best regards,  
Xavier de Béthune

We produced and shared Newsletters and Updates with relevant information on activities within or linked to the platform throughout the year. The website has been updated regularly. Facebook and Twitter were followed up.

In 2021 one GA and seven SCs were organised, including one SC with attendance of the WG coordinators.

After the 2020 hera evaluation, the SC worked on a management response to implement the recommendations. Priority actions are:

- » Assess whether the vision, objectives and result areas of BCH need to be updated;
- » Continue and enhance engaging in the Policy Dialogue with DGD;
- » Promote diversity, inclusion and learning of the BCH platform by promoting inclusion of young professionals and experts from the global south; and
- » Keep membership records up-to-date.

The 2020 hera evaluation also helped to formulate the new goals and strategies for FA5, the new Framework Agreement (2022-2026) between the DGD and the ITM, the host of BCH.

A gender policy for the network was further developed. A BCH taskforce on gender is set up and plans to have at least 1 meeting a year. A “gender observation grid” was drafted and will be tested, evaluated and rolled out within the network in 2022, after which an action plan will be set up with indicators based on the results of these observations, the Gender Charter of the federations of ANGS of the Belgian Development Cooperation (2018) and the ITM gender and diversity policy and action plan (2022).

Under the impulse of the necessity to put our Southern partners in the drivers’ seat of development cooperation, and the work done by the WG DIH, an internal BCH trajectory on the decolonization of global health was launched, which will certainly stay a major topic for many years to come.

# OVERVIEW EXPENSES 2021

REVENUES	RECEIVED	
DGD FA4 ITM project (operating costs)	€ 68.680,00	
EXPENSES	BUDGET	REALISED
Network management - Steering group	€ 3.670,00	€ 604,35
Update Body & Rights e-tutorial	€ 17.780,00	€ 16.718,69
Communication (Be-cause health matters, translations, graphic work, annual analytics, support & hosting Body&Rights, etc)	€ 4.268,00	€ 3.227,68
Representation of Be-cause health expertise at international fora	€ 7.000,00	€ 0
Annual conference Climate Justice and Health Equity	€ 25.000,00	€ 27.989,98
Working group activities and events (incl. Conference Mental health voices from Africa)	€ 8.962,00	€ 16.331,98
Stimulate cooperation in Global South	€ 2.000,00	€ 0
Total expenses 2021	€ 64.872,68	
Total budget operating costs 2021	€ 68.680,00	
Balance 2021 (operating costs)	€ 3.807,32	

The COVID–19 pandemic limited the activities and thus the level of expenses in 2020. A part of the balance was transferred to the BCH budget 2021, another part to the general FA4 budget (2017–2021). In 2021 some of the activities cancelled in 2020 were held and budget was relocated from activities that couldn’t be organized due to applicable COVID-19 measures to activities in line with these sanitary regulations.



## CONCLUSION

2021 wasn't the return to the "Realm of Freedom", as many expected it would be. However, with the knowledge and expertise we built during the first year of the pandemic, the challenges we faced to keep the network alive "online" turned out to entail great opportunities as well.

We managed to re-organise ourselves. Some cancelled activities planned in 2020, were organised in an online edition. And we realised this widened so much the outreach of our activities, as well to speakers as to participants. In the "Mental health voices from Africa" conference, 25 countries from sub-Saharan Africa and 7 countries from North Africa and the Mediterranean were represented. In the "Climate justice & Health Equity" conference, 37 different nationalities were registered. The digital way can help us to reach our objective to make the platform even more inclusive.

Through online working groups and steering committees we kept on meeting each other, and shared with each other, learned from each other, and embraced the diversity among us to try together to find innovative solutions to real global health problems.

Following preparatory work done in 2021, the working group Social Protection will be revived, and the working group Planetary Health was created. With the FA5 agreement between the ITM and DGD, the funding of Be-cause health for the next 5 years is guaranteed.

As Be-cause health members and friends, we all adhere to the principles of the Health Care for All Declaration ([https://www.be-causehealth.be/wp-content/uploads/2020/10/declaration\\_on\\_health\\_care\\_for\\_all-1.pdf](https://www.be-causehealth.be/wp-content/uploads/2020/10/declaration_on_health_care_for_all-1.pdf)) from 2001. The basics of this declaration remain topical.

However to stay relevant as a network, we should take into account the changing context. Only in this way we can reach the universal objective of "Health for all". An objective already called for by the World Health Organisation and all its member states in the Alma Ata Declaration of 1978 (my year of birth to give some perspective), and we are far away (maybe even further than ever) from reaching this goal.

The context is evolving fast. In 2022 and in anticipation of the Belgian presidency of the EU in 2024, we want to reflect together with all of you, members and friends of the network, on new topics and priorities for the future. To make our network "futureproof" we'll need to think on decolonizing global health, gender, climate justice, migration, violence, urbanisation, etc. I sincerely hope we can do this exercise together and strengthen in this way our network, and make it as suitable as possible to reach our common goals.

It has been about 1 year since I became the coordinator of Be-cause health. And I want to thank you all for the opportunity to getting to know you. Our encounters were so enriching and I have grown a lot. I feel such a strong engagement of you all for "Health for all", and in particular for the most vulnerable people, which gives me energy and fulfilment.

As said the virtual environment gave us the opportunity to connect to each other from all over the world. And I truly hope we can stay meeting each other, virtually or in real life, one day.

**Magalie Schotte**

Coordinator Be-cause health

## NETWORK ORGANISATION / GOVERNANCE

### Steering Committee (December 2021)

- » Elies Van Belle, Memisa | Chair BCH
- » Magalie Schotte, Institute of Tropical Medicine (ITM) | Coordinator BCH
- » Xavier de Béthune, Institute of Tropical Medicine (ITM) | Coordinator a.i. (January-March), retired | Treasurer BCH and individual member
- » Marlies Casier, Sensoa
- » Aline Labat, École de Santé Publique – Université Libre de Bruxelles (ULB)
- » Thérèse Delvaux & Raffaella Ravinetto, Institute of Tropical Medicine (ITM)
- » Ignace Ronse, individual member
- » Laure Speecke, Christelijke Mutualiteiten (CM) – Mutualités Chrétiennes (MC)
- » Stefaan Van Bastelaere, Enabel - Belgian Development Agency
- » Félix Vanderstricht, ULB Coopération, Université Libre de Bruxelles
- » Cathérine Dujardin & Hannes Dekeyser, Belgian Development Cooperation - DGD | Observer

### Listed member organisations (December 2021)

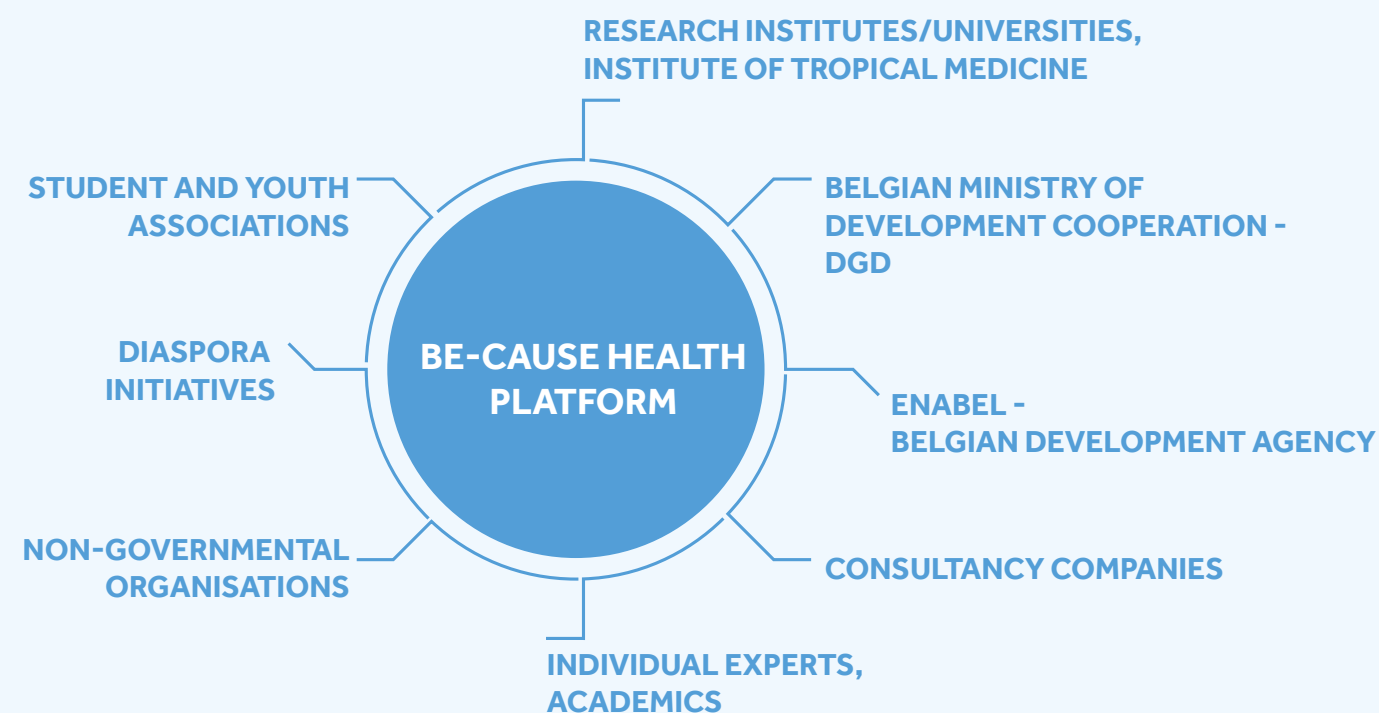
- » AEDES - European Agency for Development & Health
- » Belgian Medical Students Association
- » Benelux Afro Center
- » Çavaria
- » La Chaîne de l'Espoir - De Keten van Hoop
- » COTA
- » Damien Foundation
- » Ecole de Santé Publique – ULB
- » Enabel - Belgian Development Agency

- » 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

### Observing / Funding organisations

- » Belgian Development Cooperation – DGD
- » Flemish Department of Foreign Affairs
- » Ministry/Federal Public Services for Health, Food Chain Safety and Environment





## 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
- » Determinants of International Health | Jasper Thys, Viva Salud & Marijke Ceyssens, Memisa
- » DRC – Diaspora co-operation | Anselme Mubeneshayi Kananga, IYAD
- » E-health - Digitalisation | Stefaan Van Bastelaere, Enabel
- » Mental Health | Willem van de Put, ITM
- » Planetary health | Davide Ziveri, Humanity & Inclusion
- » Researchers in Global Health – Health Policy and Systems | Elisabeth Paul, ULiège | ULB & Dimitri Renmans, University of Antwerp
- » Sexual Reproductive Health and Rights | Marlies Casier, Sensoa

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: [www.be-causehealth.be](http://www.be-causehealth.be).





## BE-CAUSE HEALTH ANNUAL REPORT 2021

Be-cause health is supported by:





**Belgium**  
partner in development

### Contact details

Nationalestraat 155 – 2000 Antwerpen – Belgium  
becausehealth@itg.be – [www.be-causehealth.be](http://www.be-causehealth.be)

Follow us:

 [www.facebook.com/becausehealth](https://www.facebook.com/becausehealth)  
 [twitter.com/Be\\_causehealth](https://twitter.com/Be_causehealth)

### Responsible publisher

Magalie Schotte – Nationalestraat 155 – 2000 Antwerpen – [becausehealth@itg.be](mailto:becausehealth@itg.be)

### Editor

Magalie Schotte

### Layout

Toeck – Galglaan 21 – 9000 Gent – [www.toeck.be](http://www.toeck.be)