

# Reflections on Be-cause Health Mission Statement

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# Introducing me...

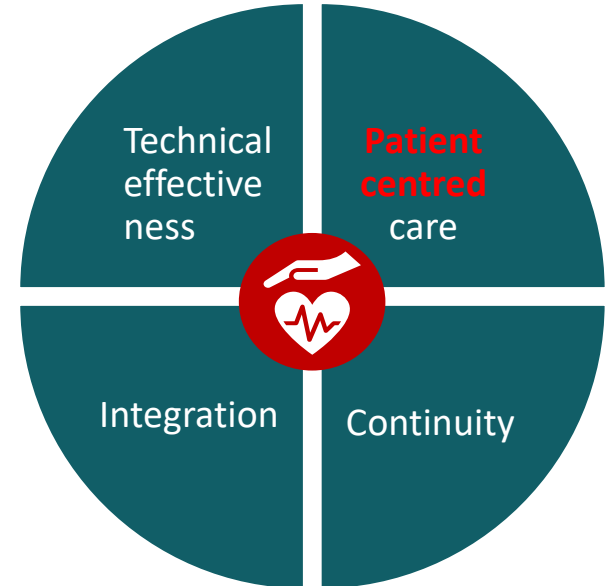
- From Mali, **diaspora** in Belgium
- Afro **optimist**
- Complexity / **System thinking**



Some reflections built on the “*piece à casser*”  
proposed by Xavier de Bethune in dec 2021

# Health for All

- Primary Health (care)
- Patient/**person centred** (care)system => dialogue and power sharing with communities
- Social determinants of health ↔ intersectoral collaboration)
- **Pro-poor** health financing mechanisms :
  - **sustainability** at national level
  - Coordination of global efforts



# Be-cause Health as international platform

Decolonization :

- Exchanges & equal **partnerships** : starting from partner needs
- Self determination : **former colonies in the driver sit**
- Diaspora as **link**



# Be-cause Health as international platform

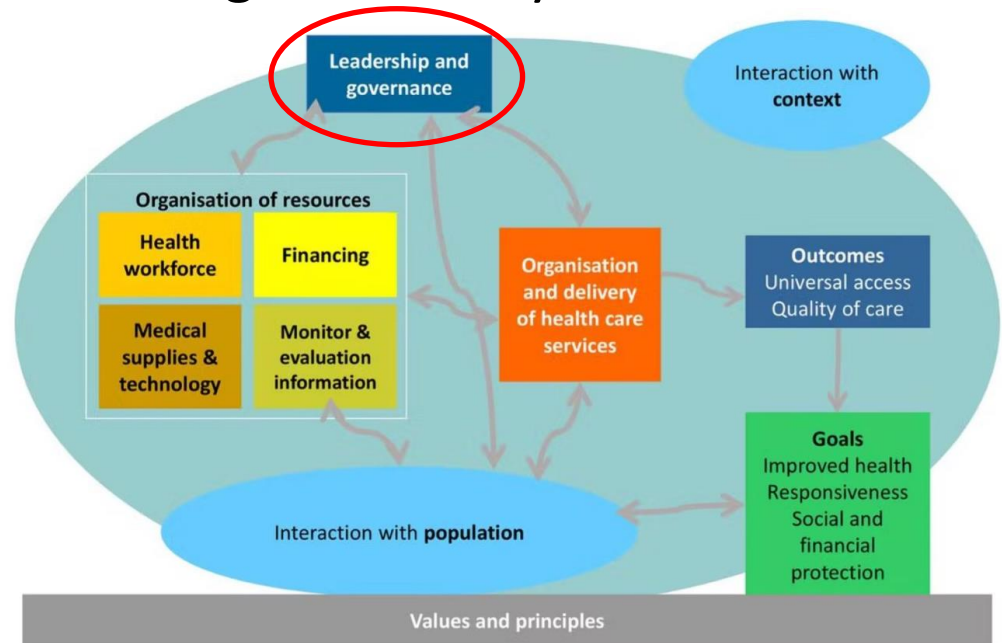
Critical/ **political** role on global agenda setting :

- UHC (unrealistic) attainment for 2030
- vaccine (in)equity

# From supporting to strengthening health systems

- **Governance** as cross cutting block
- State **stewardship**
- More downstream/horizontal **accountability**
- Vertical programs, development interventions & global actors towards the ultimate goal of stronger health systems => **coordination**

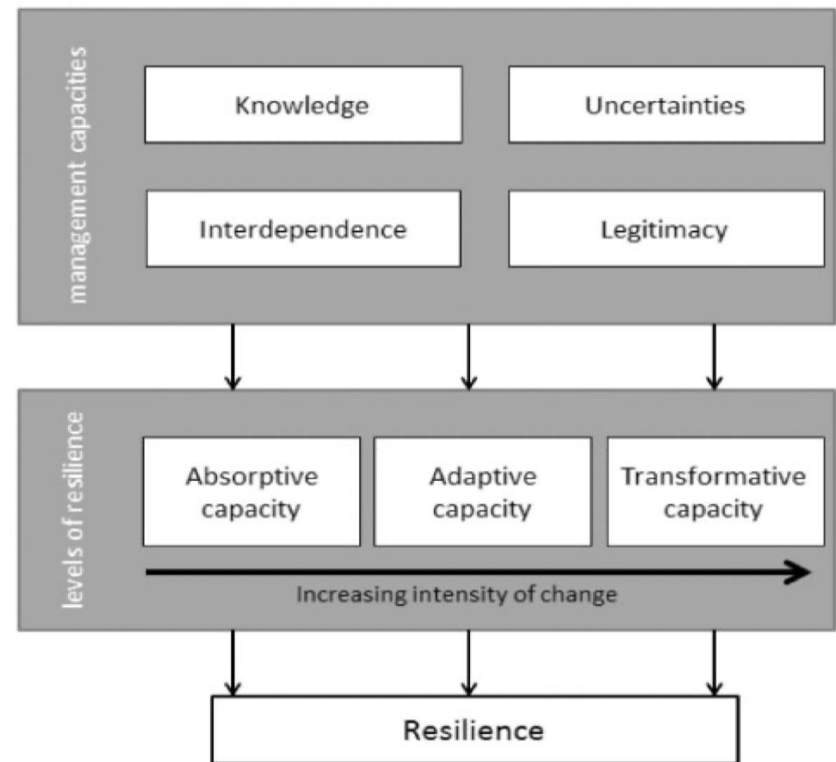
ITM's Health Systems Dynamics framework



Chee et al, Adapted from Van Olmen et al...

# Adaptive to context

- **Fragility** (settings, states or countries)
- Triple **Nexus** humanitarian help/development work/peace building)
- **Resilience** to climate change, pandemics, war...



**Figure 1** Conceptual overview of health system resilience, adapted from Blanchet *et al.* (2017).

## Adaptive to context

- **Fragility** (settings, states or countries)
- Triple **Nexus** humanitarian help/development work/peace building)
- **Resilience** to climate change, pandemics, war...
- **Learning** organizations, systems & networks
- **Action research** essential in program formulation



Thanks



....?

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