



BE-CAUSE HEALTH ANNUAL REPORT 2024

BE-CAUSE HEALTH IN PICTURES

2024



From left to right:

- » Frank Vandenbroucke, Vice Prime Minister and Minister of Social Affairs and Public Health, who is also responsible for Development Cooperation and Policy for Large Cities, congratulates Be-cause health on its 20th anniversary.
- » Belgium's Minister of Development Cooperation Caroline Gennez participates in the workshop 'SRHR through the lens of young people' at the BE EU expert event, organised by the Be-cause health SRHR WG.
- » Labila Sumayah Musoke from the Initiative for Social and Economic Rights and Medicus Mundi International and Magalie Schotte from Be-cause health present a strong civil society call to action at the BE EU expert event.
- » Be-cause health invites all its members and friends for its anniversary party at the Institute of Tropical Medicine, Antwerp.

Cover page from left to right:

A panel representing three new member organisations:

- » Abdoulaye Sow, Fraternité Médicale Guinea (FMG)
- » Alain Mbaya Kabemba, Pallia Familli, DRC
- » Dominique Vandekerchove, Sciensano, Belgium

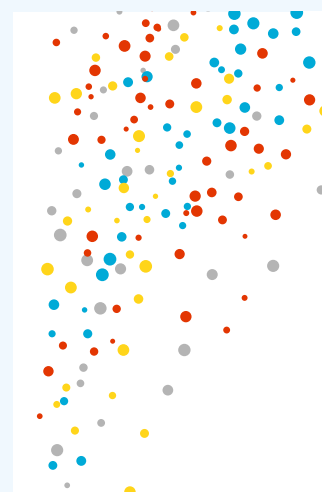


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Venue: Institute of Tropical Medicine Antwerp (ITM)

Address: Karibu, Sint-Rochusstraat 36, 2000 Antwerpen

Date: October 10th, 2024

FOREWORD

Dear Be-cause health members and friends,

While we prepare this 2024 annual report, conflicts in Ukraine, Palestine, Congo and Sudan are causing millions of deaths, infectious diseases are a permanent reality, and equitable access to health services is far away. A new US government stopped USAID, leaving millions of people without the so much needed assistance. The climate crisis is being neglected more than ever, while migration has reached unprecedented levels, with people fleeing disasters and conflicts in increasing numbers. Action against inequalities has suffered from reduced instead of increased attention. In Europe, the mainstream message is that we should prepare for war by investing in defence, and reduce commitments to solidarity and development initiatives. Governments are slashing international development budgets, dialogue and diplomacy seem to lose power, democracy is on the return with more and more autocrats in leading global positions. Disinformation progresses and factcheckers are no longer adding value in these turbulent times.

The more this continues, the more messages of hope and solidarity are essential to provide solutions and some light in these grey times.

And this is the most important "raison d'être" of our network that continues to work, inspire and influence through events and its passionate members.

Our working groups generate interaction, information sharing and lobbying. As a platform we joined the [Planetary Health Alliance](https://planetaryhealthalliance.org/what-is-planetary-health/)¹ and continued to work on planetary health, sexual and reproductive health rights, social protection, decolonisation, new technologies, equal access to quality supplies and medicines, etc.

Our network continued to grow, and in 2024 we welcomed five new organisations, which are now fully active. There are a total of 46 member organisations: our 50 by 2025 ambition can be reached in 2025. With around 150 active expert members and almost 1,000 friends, our platform is very vibrant.

We hope to see you at one of the meetings of our working groups, a network event or the general assembly, or at the joint Be-cause health – Educaid conference later this year.

Happy reading!

Stefaan Van Bastelaere

Chair of the Be-cause health steering committee



¹<https://planetaryhealthalliance.org/what-is-planetary-health/>

LIST OF ABBREVIATIONS

ANGs	Actors of the Non-Governmental Belgian Development Cooperation
ANSER	The Academic Network for Sexual and Reproductive Health and Rights Policy
AzV / MsV	Artsen zonder Vakantie / Médecins Sans Vacances
BCH	Be-cause health
CM / MC	Christelijke Mutualiteiten / Mutualités Chrésiennes
CoP	Community of Practice
COP	Conference of the Parties
CSO	Civil Society Organisation
D4D	Digital for Development
DG	Director General
DGD	Directorate General for Development Cooperation (Belgium)
DRC	Democratic Republic of Congo
DSW	Deutsche Stiftung Weltbevölkerung
EC	Ethical Commission
ECTMIH	European Congress on Tropical Medicine and International Health
ESP-ULB	Ecole de Santé Publique de l'Université Libre de Bruxelles
e-Tutorial	Online tutorial
EU	European Union
EU GHS	EU Global Health Strategy
FA	Framework Agreement between DGD and ITM
FPS	Federal Public Service (Belgium)
FMG	Fraternité Médicale Guinée
GA	General Assembly
GBV	Gender-Based Violence
HI	Humanity and Inclusion
HC4All	Health Care for All
HICs	High-Income Countries
ICRH	International Centre for Reproductive Health
IPPF	International Planned Parenthood Federation
ITM	Institute of Tropical Medicine (Antwerp)

INTPA	Department of International Partnerships of the European Commission
IYAD	International Youth Association for Development
LGBTQ+	Initialism for Lesbian, Gay, Bisexual, Transgender and Queer or Questioning
LMICs	Low and Middle Income Countries
MAV+	Manufacturing and Access to Vaccines, Medicines and Health Technologies
MdM / DvdW	Médecins du Monde / Dokters van de Wereld
MS	Member States
MSDC	Maison de Solidarité des Diabétiques au Congo
SC	Steering Committee
SRH	Sexual and Reproductive Health
SRHR	Sexual and Reproductive Health and Rights
SWOP	The State of World Population
TEI	EU Team Europe Initiative
TOR	Terms of Reference
UGent	Ghent University
ULB	Université Libre de Bruxelles
UNFPA	United Nations Population Fund
WG	Working Group
WG DIG	Working Group Digitalisation
WG DIH	Working Group Determinants of International Health
WG DRC	Working Group Democratic Republic of Congo
WG MED	Working Group Access to Quality Medicines
WG MH	Working Group Mental Health
WG PH	Working Group Planetary Health
WG RGH	Working Group Researchers in Global Health
WG SPH	Working Group Social Protection in Health
WG SRHR	Working Group Sexual and Reproductive Health and Rights
WSM	We Social Movements

BE EU 2024 EXPERT EVENT - TOWARDS HEALTH EQUITY: STRONG HEALTH SYSTEMS, UNIVERSAL HEALTH COVERAGE AND SOCIAL PARTICIPATION

<https://www.be-causehealth.be/en/bch-events/towards-health-equity-strong-health-systemsuniversal-health-coverage-social-participation-2/>

"I can only welcome the call to action from civil society organisations today. A full hearted YES, to a rights- and needs-based approach in health policy, a full hearted YES to inclusiveness in health governance, a full hearted YES to health in all policies, a full hearted YES to the right to health for all."



H.E. Minister of Development Cooperation, Caroline Gennez

On 23 April, the Belgian Presidency of the Council of the European Union (EU) 2024, along with Enabel and Be-cause health (BCH), organised the [EU Expert Conference "Towards Health Equity: Strong Health Systems, Universal Health Coverage and Social Participation"](#)² in Mechelen. In 2024, the Belgian EU Presidency prioritised global health and equitable access to healthcare as key topics on the EU agenda.

The conference was dedicated to strengthening health systems towards **health equity** and achieving **Universal Health Coverage**, focusing on the crucial roles of **health financing** and **social participation** in particular. A diverse range of topics in Global Health were examined during the full-day programme, providing actionable insights for the EU's development policy and international cooperation, and more specifically for the new **EU Global Health Strategy** (EU GHS). The event brought together policymakers, health professionals, researchers, and civil society representatives. In total, 226 experts participated: 159 participants from Europe, 67 participants from 21 African countries, and 93 representatives from civil society and academia.

The conference kicked off with welcoming remarks by **Minister of Development Cooperation Caroline Gennez** (Belgium), setting the tone for the event and highlighting its significance. After a keynote on healthy health systems, it was time for two insightful panel discussions on health financing and social participation respectively.

In the afternoon, following a delicious and diverse lunch accompanied by an inspiring Young Voices talk, participants joined a series of six thematic workshops. Be-cause health played an active role in shaping these sessions. Through its working groups (WGs) BCH contributed to the following workshops:

- » Social Health Protection: How does social health protection strengthen health systems and advance Universal Health Coverage? - BCH WG Social Protection in Health (WG SPH)
- » The transformative role of civil society in health system strengthening: Building strong health systems through inclusive decision-making - BCH WG Social Protection in Health (WG SPH)
- » SRHR through the lens of young people – BCH WG Sexual and Reproductive Health and Rights (WG SRHR)
- » Facing a triple planetary crisis: Can we build resilient, sustainable and inclusive health systems at once? – BCH WG Planetary Health (WG PH)

These workshops provided a platform for an in-depth exchange between experts, policymakers, and civil society representatives, reinforcing Be-cause health's role in **advocating health equity and inclusive health systems**.

At the wrap-up session, both the Minister, Caroline Gennez, and the director general (DG) for International Partnerships of the European Commission (INTPA), Koen Doens, provided the closing remarks. Minister Gennez came up with an uplifting message for civil society. DG Doens mostly focused on harnessing and leveraging the private sector, aiming for 'win-wins'. He also gave a short overview of the Team Europe health initiatives (and related budget).

KEY TAKEAWAYS OF THE BE EU EXPERT CONFERENCE³

The various panels and workshops highlighted the importance of sustaining the **EU's finance for global health**. Health is a key pillar of the Global Gateway—the EU's major connectivity strategy, and it forms important synergies with other priorities of the Global Gateway such as climate change and digital transition. However, while the quantity of health financing is crucial, it is equally important to look at its quality—how to make and spend investments in the most useful, efficient and equitable manner.

Key to the discussions on **social participation** is the imperative for both European and partner countries working together with all relevant stakeholders on health, to leverage existing resources and build on national systems while nurturing accountability and enhancing country ownership.

Civil society has a crucial role in strengthening health systems – both on health policies as well as implementing partners. Civil Society Organisations (CSOs) need to be consistently included in key processes and their capacities need to be strengthened.

Additionally, the event addressed the **critical nexus of youth and sexual and reproductive health and rights** (SRHR). Young people play a pivotal role in advancing health and their input should be fully put to use.

The conference ended with a strong civil society **call to action**⁴, drawing inspiration from the event's discussions and Belgium's EU presidency. In the call, civil society asks for a **decolonial approach** in the implementation of the EU GHS, including more balanced and inclusive participation and decision making between and within countries, as well as within global health initiatives. The call was prepared by an international taskforce of global health advocates, lead by Be-cause health. The call was put on the agenda of the EU Foreign Affairs Council which took place on 7 May in Brussels, and is still open **to sign**⁵.

² <https://www.be-causehealth.be/nl/bch-events/towards-health-equity-strong-health-systemsuniversal-health-coverage-social-participation/>

³ Summary based on the report of the conference: <https://www.be-causehealth.be/wp-content/uploads/2024/05/Expert-Conference-Report-May-2024-health-systems.pdf>

⁴ <https://www.be-causehealth.be/wp-content/uploads/2024/06/CSO-Call-to-Action-EU-Expert-event-April-23v1.pdf>

⁵ <https://fs10.formsite.com/formulieren/TG/tm5b6dey9k/index>



CIVIL SOCIETY CALLS THE EU AND ITS MEMBER STATES (MS) TO PRIORITISE HEALTH EQUITY AND JUSTICE

1. Ensure that a "rights- and needs"-based approach is promoted in the implementation of the EU Global Health Strategy

- » **"Leave no one behind"**. Everybody, regardless of their social, economic or legal status, should receive health care based on their needs, acknowledging the important role of gender and the social determinants of health in the promotion of global health.

2. Protect the right to health for all

- » Secure **adequate resources** while ensuring **impactful implementation** of the health priorities embedded in the EU GHS reaching those in need;
- » Strengthen **equitable partnerships**, accountability and transparency among stakeholders and donors at all levels;
- » Guarantee a well-trained, motivated and remunerated **local health workforce**, including volunteers and informal care workers;
- » Manage **health workforce migration** through the "WHO Global Code of Practice on the International Recruitment of Health Personnel";
- » Reaffirm the principle that when EU public funding is used for Research and Development of medical and assistive products, this must be accompanied by access conditions to guarantee the **availability, affordability, and accessibility of medical and assistive products** to all those in need;
- » Ensure **equitable global health governance** and boost progress towards universal health coverage. The EU GHS must prioritise strengthening public and community health systems and Primary Health Care;
- » Ensure appropriate legal protection of **SRHR**, including universal access to quality sexual and reproductive medical and assistive products and healthcare services;

- » Protect health services, the health workforce and patients **from all kinds of violence**.

3. More inclusiveness in global health governance

- » Use a **decolonial approach** in the implementation of the EU GHS, allowing a more balanced participation and decision making between countries;
- » **Tackle the shrinking space** for CSOs and local communities and increase their involvement, engagement and participation in the **decision-making process** and implementation of the EU GHS;
- » Be transparent in all negotiations with the **private sector** that affect global health;
- » Give priority to the promotion of healthy habits, prevention and preparedness activities in anticipation of public health emergencies, and reinforce community resilience, especially through **strong community health systems**.

4. Health in all policies and all policies in health

- » Prioritise, within the implementation of the EU GHS, tackling **social, economic and environmental determinants of health**;
- » Adopt a systemic One Health and **Planetary Health approach** that acknowledges that the health of humans, animals and overall ecosystems are interconnected and interdependent;
- » **Stop using fossil fuels**.



WORKING GROUPS

Access to Quality Medicines

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

The Working Group (WG) Access to Quality Medicines (WG MED) is dedicated to fostering active engagement among its members in research, education, and advocacy initiatives with the aim of advancing **equitable access to high-quality medical products**. The WG MED facilitates exchange among its participants and provides the opportunity for external individuals, including students, to showcase their areas of research, fostering networking and cross-learning. The WG MED has over 130 members.

The activities within the WG MED have evolved, leading to separate events for anglophone and francophone participants, although some members actively engage in both forums. Additionally, customised distribution lists have been implemented to cater to participants interested in virtual meetings and those solely seeking **updates on relevant literature**.

On 20 February, the WG MED organised an **online WG meeting** on the quality of medicines in Nigeria and on the EU Team Europe Initiative (TEI) on Manufacturing and Access to Vaccines, Medicines and Health Technologies (MAV+).

On 6 November, the WG MED organised **their annual webinar in French "L'accès aux médicaments s'améliore-t-il en Afrique francophone ?"**⁶ on access to medicines in Francophone Africa.



⁶ <https://www.be-causehealth.be/en/bch-news/rapport-et-enregistrement-du-webinaire-lacces-aux-medicaments-samelioe-t-il-en-afrique-francophone-3/>

⁷ https://apps.who.int/gb/ebwha/pdf_files/WHA77/A77_R14-en.pdf

⁸ <https://www.be-causehealth.be/en/bch-events/towards-health-equity-strong-health-systemsuniversal-health-coverage-social-participation/>

⁹ <https://planetaryhealthalliance.org/>

¹⁰ <https://prezode.org/>

Democratic Republic of Congo

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

The WG Democratic Republic of Congo (WG DRC) is a **geographical group**, given the importance of the bilateral and economic relationships between the Democratic Republic of Congo (DRC) and Belgium. The WG DRC is represented by the various stakeholders involved in international solidarity and active in DRC: stakeholders of the non-governmental Belgian development cooperation (ANGs), health institutions, 4th pillar and diaspora associations, universities, and anyone interested in health development in DRC.

In 2024, the WG DRC collaborated with the WG MED on a mixed research study on the **use of opioids in paediatrics in hospitals** that are members of the hospital platform in the city-province of **Kinshasa**. The results of this survey will be published in 2025.

Determinants of International Health

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

The WG Determinants of International Health (WG DIH) submitted a **Memorandum on Health** to the Belgian Government as input for the elections in June and the Belgian EU Presidency. Several political parties said they will take the recommendations of the memorandum into account. The WG and the WG coordinator engaged other organisations to draft the Memorandum, which gave it more weight. Some organisations who signed the Memorandum later became new Be-cause health members (individually or with the organisation).

Digitalisation

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

On 22 April, the WG Digitalisation (WG DIG) was represented in the **hybrid workshop** organised by the WG Digital Health of the Digital for Development (D4D) Hub, focusing on **telemedicine and other e-health innovations**. The objective of

this event was twofold: to facilitate collaboration among EU member states and their partner countries, and to showcase best practices and innovations.

During the 2024 Learn4Development Annual Meeting from 2 to 4 October in Brussels, the WG DIG co-organised an **event on data governance** with INTPA (the department for International Partnerships of the European Commission) and Enabel.

Mental health

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

The WG Mental Health (WG MH) restarted in 2024 and is committed to **enhancing mental health initiatives across sub-Saharan Africa**. This group is dedicated to fostering effective collaborations with both local, national and international stakeholders to achieve this goal.

Members approved of the **triple objectives** set out in the terms of reference (TOR) of the revitalised group, which is co-coordinated by Médecins Sans Vacances and Memisa. These are: advocacy, mutual learning and coordination, the latter both within Be-cause health as well as with the larger community of local, national and international stakeholders.

The WG covers both an operational and a strategic perspective, and organises two sets of meetings. Some members participate in both. The strategic group is bilingual, French and English. Virtual meetings allow large participation in both cases.

The **strategic meetings** alternate the operational ones and focus primarily on advocacy for the integration of mental health in programmes/projects as well as in the work of other BCH working groups.

- » On 10 October (World Mental Health Day) the strategic working group, in collaboration with the BCH taskforce Synergy, coordinated an **interactive session**, during Be-cause health's 20th anniversary event.
- » Furthermore, a group of volunteers started to develop a **policy brief for donors and policy makers**.
- » An organised session on mental health based on four country cases was proposed to and accepted by the European Congress on Tropical

Medicine and International Health (ECTMIH) (sept-oct 2025).

The **operational meetings** focus on sharing best practices and challenges in mental health concentrating on francophone sub-Saharan Africa, and is solely organised in French. The meetings are prepared by a team representing different countries in sub-Saharan Africa. They define thematic priorities and identify which country/ organisation can present.

- » In 2024, **two themes** were tackled: **mental health drugs provision and community participation**. For both themes, good practices as well as challenges were presented and discussed.

Planetary Health

<https://www.be-causehealth.be/en/bchgroups/planetary-health-2/>

In a year marked by the [Climate Change Resolution](#)⁷ (WHA77.14) adopted by the 77th World Health Assembly in Geneva in May, and the Baku Conference of the Parties (COP) Presidencies Continuity Coalition for Climate and Health at COP29, the Working Group Planetary Health (WG PH) continued their efforts.

On April 23 during the [EU Expert Conference "Towards Health Equity: Strong Health Systems, Universal Health Coverage and Social Participation"](#)⁸, the WG PH co-organised a workshop about **"Facing a triple planetary crisis: Can we build resilient, sustainable and inclusive health systems at once?"**.

In 2024, Be-cause health joined the [Planetary Health Alliance](#)⁹, a growing consortium of over 480 organisations from more than 80 countries dedicated to understanding and addressing the impacts of global environmental change on human health and well-being. This partnership led to the initiation of plans to **co-organise a side event** at the next PHA annual meeting in Rotterdam in 2025.

The WG PH also **convened three times** in 2024. On 23 May, the development of a Planetary Health training within NGOs was presented. Subsequent meetings were held in August and November. The latter included a consultation with researchers from Sciensano and the Federal Public Service (FPS) Public Health about indicators for Planetary Health under the [PREZODE initiative](#)¹⁰.

The group also initiated **a dialogue with the WG SRHR** to explore connections and the impact of the triple planetary crisis on SRHR.

These activities demonstrate the ongoing commitment of health professionals and organisations to address the interconnected challenges of climate change, health systems strengthening, and planetary health from a transdisciplinary dialogue as the one regularly hosted by the working group.

Researchers in Global Health

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

The WG Researchers in Global health (WG RGH) provides a platform for discussion and a community of practice (CoP) contributing to **global health research and practice**. The general objective is to bring young professionals together, share knowledge, foster interdisciplinary partnerships/work and facilitate, consolidate and promote evidence-based research and highlight the importance and relevance of global health topics. The coordination of the WG RGH lies with **global health professionals in the early stages of their career**.

In 2024, the WG RGH worked on the production of a **'Global Health Insights' podcast**. The series will feature individual episodes with contributions from the different WGs, each aligning with the overarching theme of 'Paradigm Shift in Global Health.' This podcast is aimed at global health professionals and students, and will be launched in 2025.

Sexual and Reproductive Health and Rights

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

The WG Sexual and Reproductive Health and Rights (WG SRHR) organised **five meetings** in 2024, one in-person meeting at Enabel, and four online. The WG SRHR has also participated in **three conferences** this year. The topics discussed during the meetings ranged from decolonising SRHR to the impact of a second Trump presidency and Project 2025, a presentation by [lpas](#)¹¹.

The Belgian Directorate General for Development Cooperation (DGD) came to introduce their plans **to evaluate Belgian projects on SRHR** and the WG SRHR formulated feedback on this approach. At the in-person meeting, the WG had the honour to have [UNFPA](#)¹² present their **State of World Population (SWOP) report** and give a little background on **SRHR in humanitarian situations**.

The WG SRHR participated in three conferences in 2024.

- » During the [ANSER-conference](#)¹³, co-organised by BCH, the WG SRHR organised a workshop on decolonising SRHR, with presentations from GAMS and the International Planned Parenthood Federation (IPPF¹⁴).
- » The [ARGO conference](#), where **youth participation in SRRH policy** and the Belgian Presidency of the Council of the EU was discussed, with [FEMNET](#)¹⁵ and DGD.
- » The WG was also asked to organise a workshop at the [BE EU Expert Conference "Towards Health Equity: Strong Health Systems, Universal Health Coverage and Social Participation"](#)¹⁶. The WG SRHR invited speakers from the Global Majority and worked closely with Oxfam on this. The Minister of Development Cooperation, Caroline Gennez, participated in this workshop.



Outside the meetings and the conferences, the WG SRHR is also continuously trying to enhance and promote **the e-tutorial on SRHR** developed by the WG, DGD and Be-cause health, [Body&Rights](#)¹⁷. The factsheets in the e-tutorial were updated and plans were made to update the overall e-tutorial next year. The WG welcomed a **new co-chair**, Aminata Sibidé (GAMS), who will chair the WG alongside Sara Salarkiya (Sensoa).

Social Protection in Health

<https://www.be-causehealth.be/en/bchgrouops/social-health-protection>

The objective of the WG Social Protection in Health (WG SPH) is to bring together the ideas of different Belgian stakeholders and try to harmonise strategies.

In 2024, the WG SPH organised **two workshops** on Social Protection in Health at the [BE EU Expert Conference "Towards Health Equity: Strong Health Systems, Universal Health Coverage and Social Participation"](#). One was organised by We Social Movements (WSM), [Solsoc](#)¹⁸ and the Institute of Tropical Medicine (ITM), the other by Enabel and Memisa.

The first workshop concentrated on the **community participation** aspects of social health protection, whereas the second workshop concentrated on **national health insurance systems**, with presentations from Senegal, Niger and Benin.

On 7 November, a **meeting** was organised in which **the Senegal model** on social health protection was presented by Enabel, and the **role of health mutuals** for social health protection presented by WSM. The purpose of the two presentations was to come to an integrated vision. At this meeting, [Socieux+](#)¹⁹ presented the e-learning that was developed on this subject and invited people to follow the course.



¹¹ <https://www.ipas.org/>

¹² <https://www.unfpa.org/>

¹³ <https://www.ugent.be/anser/en/resources/anser-conference-2024-recommendation-report.pdf>

¹⁴ <https://www.ippf.org/>

¹⁵ <https://www.femnet.org/>

¹⁶ <https://www.be-causehealth.be/nl/bch-events/towards-health-equity-strong-health-systemsuniversal-health-coverage-social-participation/>

¹⁷ <https://www.bodyandrights.be/>

¹⁸ <https://www.solsoc.be/en/>

¹⁹ <https://socieux.eu/>

REPRESENTATION AND NETWORKING

Be-cause health celebrates its 20th anniversary - General Assembly, Workshop on Mental Health and Anniversary Party

<https://www.be-causehealth.be/en/bch-events/be-cause-health-celebrates-its-20th-anniversary-2/>

On 10 October, Be-cause health celebrated its **20th anniversary** at the Institute of Tropical Medicine, Antwerp. This milestone event was attended by prominent figures such as Minister Frank Vandenbroucke (Vice Prime Minister and Minister of Social Affairs and Public Health, who is also responsible for Development Cooperation and Policy for Large Cities), Prof. Dr. Lut Lynen (ITM director) and Heidy Rombouts, the General Director of DGD (Directorate-General for Development Cooperation and Humanitarian Aid).

Vice Prime Minister Frank Vandenbroucke congratulated Be-cause health on its 20th anniversary. The Minister emphasised that **health is a cornerstone of Belgian development cooperation**, and during Belgium's EU presidency, health as a right for all was a top priority. He thanked Be-cause health for its crucial role during the presidency. He called on BCH members to continue their important work and hold the Belgian government accountable for the implementation of its health policy, including the EU Global Health Strategy.



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Prof. Lut Lynen reminded everyone that the foundations for Be-cause health were laid during the Belgian Presidency of the EU in 2001 at the [Healthcare for All Conference](#)²⁰. Over the past 20 years, BCH working groups have made many relevant contributions. The recent Belgian EU presidency put access to health on the agenda, which demonstrates BCH's influence. Be-cause health's strength lies in its members and diversity of expertise. Politicians come and go, but BCH's motivation remains: health for all and justice. She thanked all members for their commitment.

Five new member organisations were introduced and approved, including **Child-Help**, **Deutsche Stiftung Weltbevölkerung (DSW)**, **Fraternité Médicale Guinée (FMG)**, **Pallia Familli**, and **Sciensano**. For the first time in Be-cause health's history, two organisations based in Africa joined the network as formal members. This expansion strengthens the platform's focus on global cooperation and inclusion. All new member organisations will make valuable contributions to the Be-cause health network.

The meeting concluded with an **interactive workshop on mental health**. In honour of World Mental Health Day (10 October), this workshop aimed to highlight the critical role of mental health in all areas of global health. Through interactive group discussions the participants explored mental health's impact in various contexts, including primary care, palliative care, Gender-Based Violence (GBV) care, and migrant healthcare. Participants explored real-life cases to gain inspiration and understand the transversal importance of mental well-being for the different Be-cause health working group activities and for participants' daily professional practices. The cases were presented by FMG on mental health linked to migration and access to medicines, by Pallia Familli on palliative care, by Enabel on mental health in Rwanda and Burundi, and by Médecins du Monde Belgium (MdM) on health services for migrants and people without papers in Belgium.

²⁰ <https://www.itg.be/en/health-care-for-all>

RECOMMENDATIONS FROM THE INTERACTIVE WORKSHOP ON MENTAL HEALTH: A HOLISTIC APPROACH TO INTEGRATING MENTAL WELL-BEING IN THE FUNCTIONING OF THE BE-CAUSE HEALTH WORKING GROUPS

Integration of mental health into the other working groups:

Integrate mental health as an overarching theme into the existing working groups. This could be achieved by adding a mental health dimension to the activities of groups.

Joint activities between working groups:

Facilitate collaboration between working groups on joint initiatives and events, e.g. organising joint webinars or campaigns and actions that highlight the connection between mental health and other aspects of health.

Mental health in day-to-day activities of the BCH member organisations:

Make mental health more visible in the work of member organisations, by for example creating policy recommendations and programmes that clearly outline the impact of mental health on other health domains.

These recommendations should help to increase understanding and further integrate mental health into the global health agenda and Be-cause health's activities.

After the meeting all participants were invited for **a networking drink** to celebrate Be-cause health's 20th anniversary, an opportunity to meet current and former BCH members and friends.

The network event was launched by an amazing performance of the ITM choir, and some anniversary speeches of key members and friends, including Heidy Rombouts (Director General of DGD), Stefaan

Van Bastelaere (Senior Health Expert at Enabel and chair of the Steering Committee) and Dirk Van der Roost (the first Be-cause health coordinator, and one of the networks' founders). Abdoulaye Sow (director Fraternité Médicale Guinée) and Alain Kabemba (General Secretary of PalliaFamilli, DRC), both "brand new" BCH member organisations concluded the speeches.



BE-CAUSE HEALTH CELEBRATES ITS 20TH ANNIVERSARY AND EMPHASISES THE IMPORTANCE OF INTERNATIONAL COOPERATION

During the event, attendees highlighted Be-cause health's achievements over the past two decades. They emphasised how, through dialogue, cooperation, and the support of the Belgian authorities, the platform has been able to bring about positive changes in global health.

However, there was palpable concern in the room regarding the future. Uncertainty about a potential reduction in funding that could have global consequences, especially for the most vulnerable countries.

To express their viewpoint, several Be-cause health members wrote an open letter. They recognise the geopolitical and fiscal challenges facing the Belgian government while presenting four compelling

reasons to **maintain or even increase financial contributions to international cooperation and humanitarian aid.**

Their message is clear: global health commitments may not be undermined by fluctuating budgets.

Read the open letter in **Dutch**: <https://www.mo.be/opinie/-laten-we-belgie-blijven-promoten-als-een-wereldleider-in-internationale-samenwerking->

Read the open letter in **French**: <https://www.be-causehealth.be/fr/bch-news/be-cause-health-celebre-son-20e-anniversaire-et-souligne-limportance-de-la-cooperation-internationale/>



Be-cause health New Year event – Visit to Goujonissimo

On 29 January, Be-cause health organised a New Year's event for the first time in its history. On the Synergy taskforce's initiative, created to promote more synergy between members, we decided to kick off the year by organising a guided visit to a Belgian initiative aligned with Be-cause health's values and mission. Global health issues are not limited to Low and Middle Income Countries (LMICs) only; growing inequalities worldwide mean that not everyone, especially the most vulnerable, has access to high-quality, responsive healthcare, even within High Income Countries (HICs). In 2024, we visited the Integrated Welfare and Health Centre, [Goujonissimo](https://goujonissimo.be)²¹, which was created by BCH member Médecins du Monde, in collaboration with Maison Médical and Solidarimmo, and opened in the summer of 2023.

After the guided visit, we had a moment of reflection to see how we can integrate the lessons learned from the visit into the activities of our working groups. The event closed with an informal drink and the New Year started.



²¹ <https://goujonissimo.be>

ANSER Conference - Catalysing Change: Enhancing Evidence-Based SRHR Policies in Challenging Times

<https://www.be-causehealth.be/en/bch-events/catalysing-change-enhancing-evidence-based-sexual-and-reproductive-health-and-rights-srhr-policies-in-challenging-times-2/>

From 7 to 9 February, Be-cause health co-organised the **2024 ANSER conference** with Ghent University, and BCH members ITM and the International Centre for Reproductive Health (ICRH) Belgium. The Academic Network for Sexual and Reproductive Health and Rights Policy (ANSER) is a global, multidisciplinary network dedicated to advancing evidence-based SRHR policies.

The conference aimed to enhance collaboration between policymakers, academia and programme experts to advance SRHR knowledge and interventions.

The conference included two **Scientific Conference Days**, focusing on new academic data on sexual and reproductive health, and one **Policy Impact Day**, bringing together academics, policymakers and other SRHR stakeholders to formulate recommendations for future action.

CONFERENCE RECOMMENDATIONS

Advancing SRHR through technology

- » Ensure access to accurate SRH information and ethical digital tools.
- » Expand telemedicine, AI chatbots, and digital literacy programmes.
- » Improve SRH product availability via e-commerce.
- » Combat misinformation and promote cultural sensitivity.

Climate and SRHR

- » Invest in climate adaptation and SRHR research.
- » Integrate SRHR with education, economy, and sustainability.
- » Train health workers and develop climate risk alerts.

Equitable Access

- » Tackle gender norms and strengthen SRHR in healthcare.
- » Expand self-care programmes and workforce SRHR support.
- » Increase investment in male contraception and innovation.

Maternal health and Safe abortion

- » Improve maternal care access and training.
- » Ensure legal, safe abortion and fight stigma.

Gender-Based Violence

- » Expand GBV support, especially for LGBTQ+.
- » Promote trauma-informed care and legal reforms.

Defending SRHR Rights

- » Improve education, policymaking, and crisis response.
- » Strengthen SRHR security and access to menstrual health.

Policy and Advocacy

- » Base SRHR policies on science, not ideology.
- » Engage policymakers and use media for awareness.

Exchange of expertise on Human Security & Health for Indo-Pacific countries

On 3 December, Be-cause health presented itself to a group of diplomats from the Indo-Pacific region. The session focused on Belgium's innovative approaches and solutions for addressing global health challenges, and was organised by the Egmont Royal Institute for International Relations.

UGent Health Sciences Crossing Borders

<https://www.ugent.be/ge/en/healthsciencescrossingborders>

On 1 October, Be-cause health presented itself with **an interactive booth** to all Ghent University (UGent) medical students with an interest in global health, during their "Health Sciences Crossing Borders" event.



COORDINATION

Steering Committee

In 2024, after a long and successful career at ITM, **Thérèse Delvaux** retired, and stepped back from her mandate at the Steering Committee (SC). She was replaced in the SC by **Belén Tarrafeta** (ITM, Unit of Medicines & Health). Belén already substituted for Thérèse in the SC, and she is the coordinator of the WG MEDs. A heartfelt thank you to Thérèse for all the expertise and contributions she brought to BCH and to Belén for taking over. Thérèse will stay on as a BCH member and be actively engaged in the WG SRHR.

In 2024, one GA and four SCs (two online and two hybrid) were organised, including one SC with attendance of the WG coordinators. A teambuilding activity was organised for the SC members and WG coordinators.

Secretariat

The secretariat shared [Newsletters and Updates](#)²² with relevant information on activities or linked to the platform throughout the year. The website is updated regularly. [Facebook](#)²³ was followed up. An internal [LinkedIn group](#)²⁴ is in place.

ITM continues to host and support the BCH secretariat by facilitating and supporting 1.3 FTE for the coordination, administration and communication of the platform.

New members

<https://www.be-causehealth.be/en/about-us/members-2/>

Membership of BCH is open to both organisations and individuals. Members are asked to **renew** their **membership every four years**.

In 2024, all individual members were asked, for the first time, to renew their membership. This is in line with the [2023 Internal Regulations](#)²⁵, which stipulates members to take on an active engagement in one of the permanent WGs or temporary taskforces.

On 10 October, **five candidate member organisations** presented themselves to the GA: Child-Help, Deutsche Stiftung Weltbevölkerung (DSW), Fraternité Médicale Guinée (FMG), Pallia Familli, and Sciensano. All organisations conducted an [ethical self-screening](#)²⁶, and were evaluated by the BCH Ethical Commission, in line with the 2023 Internal Regulations. They were all accepted as members by the GA.

Call for success stories or promising failures on Strengthening Health for All: what works in a world in poly-crisis and uncertainty?

<https://www.be-causehealth.be/en/bch-news/submissions-call-strengthening-health-for-all-what-works-in-a-world-in-poly-crisis-and-uncertainty/>

In 2001, ITM organised a conference in Antwerp on **Health Care for All** (HC4All) that resulted in a short and powerful **declaration** of priorities for health care. This [HC4All declaration](#)²⁷ has served as a foundation for BCH since the network was created in 2004.

The values of the declaration remain topical. However, the [external evaluation](#)²⁸ in 2020 identified the need to review the HC4All declaration as a reference text, or at least add a number of **new priorities**. It is clear that in 20 years the world has changed.

In 2024, Be-cause health, together with the [Emerging Voices for Global Health](#)²⁹ and [Health Systems Global](#)³⁰ networks launched a **call** to invite researchers, health workers, health practitioners, policy makers, health activists and members of grassroot organisations **worldwide**, to submit a pitch for a **short story of success or a promising failure in global health**.

We received 24 submissions. A scientific selection committee accepted ten for [publication](#)³¹, and eight were invited to participate in [BE EU Expert Conference "Towards Health Equity: Strong Health Systems, Universal Health Coverage and Social Participation"](#)³². Based on the submissions a temporary **BCH taskforce 'Health for All'** will analyse which features are crucial to health systems strengthening in times of poly-crisis and uncertainty, and thus are priorities for the BCH network.

Gender and Power Relations Policy

<https://www.be-causehealth.be/wp-content/uploads/2023/11/Be-cause-health-gender-and-power-relations-policy.pdf>

The **taskforce on gender and power relations** has drafted a **gender and power relation policy**. The taskforce meets at least once every two years to analyse and assess gender practices and power relations within all BCH meetings (based on the findings using the [gender and power relation reflection tool](#)³³), and propose actions to improve the functioning of the WGs and Steering Committee from an inclusive perspective. A first analysis will be conducted in 2025.

Decolonising Be-cause health

In 2024, the **taskforce on decolonisation** worked on an article entitled '**Decolonising global health: challenging colonial legacies in health governance and systems**'. The article will serve as a reference and starting point for a discussion within the working groups. It focuses on three main themes: colonialism within global health, colonisation of the structures and systems of global health governance, colonialism through the global health system. The article should be finalised in 2025.

Renewal of the Be-cause health Communication Strategy

In 2024, some communication challenges came up, including the need to renew our website and the [Body&Rights e-tutorial](#). Following up on these challenges, and on the recommendation of the [2017-2020 evaluation](#)³⁴ to work on a communication strategy, a small **communication taskforce** was set up.

Be-cause health Mid-Term Survey 2024

<https://forms.office.com/e/MKz8GzKuqj>

In 2024, we launched a mini-survey to measure **Be-cause health members' level of satisfaction** with regard to the functioning of the network. The initial findings will be presented at the GA of 2025, and final conclusions will be featured in the ITM-DGD multi-annual programme (Framework Agreement 5) justification report.

²² <https://www.be-causehealth.be/en/#newsletter>

²³ <https://www.facebook.com/becausehealth>

²⁴ <https://www.linkedin.com/groups/13632386/>

²⁵ <https://www.be-causehealth.be/wp-content/uploads/2023/11/Internal-regulations-2.0-Update-Nov-2023.pdf>

²⁶ <https://fs10.formsite.com/formulierenITG/pccwks8i7/index>

²⁷ https://www.be-causehealth.be/wp-content/uploads/2020/10/declaration_on_health_care_for_all-1.pdf

²⁸ <https://www.be-causehealth.be/wp-content/uploads/2016/05/BCH-Evaluation-Report-hera-Elektronische-versie-1.pdf>

²⁹ <https://ev4gh.net/>

³⁰ <https://healthsystemsglobal.org/>

³¹ <https://www.be-causehealth.be/en/strengthening-health-for-all-what-works-in-a-world-in-poly-crisis-and-uncertainty/>

³² <https://www.be-causehealth.be/nl/bch-events/towards-health-equity-strong-health-systemsuniversal-health-coverage-social-participation/>

³³ <https://www.be-causehealth.be/wp-content/uploads/2023/11/Be-cause-health-reflection-gender-and-power-relations-tool.xlsx>

³⁴ <https://www.be-causehealth.be/en/bch-news/evaluation-report-hera-2017-2020/>

OVERVIEW OF EXPENSES 2024

REVENUES	RECEIVED	
DGD FA5 ITM project (operating costs)	€ 63,000	

EXPENSES	BUDGET	REALISED
Network management - SC -GA	€ 1,000.00	€ 14,598.81
Communication (website, newsletters, annual report, other)	€ 4,000.00	€ 6,944.20
Be-cause health annual conference 2024	€ 38,000.00	€ 2,459.29
Be-cause health thematic working group activities	€ 15,000.00	€ 2,566.13
Participation of BCH and partners from LMICs in international scientific and policy global health events	€ 5,000.00	€ 1,576.95
Total expenses operating costs 2024		€ 28,145.38
Total budget operating costs 2024	€ 63,000.00	
Balance 2024 (operating costs)	€ 34,854.62	

The support of the platform is one of the outcomes ("Belgian Programme - Policy Support") under the 5th framework agreement between ITM and DGD (FA5), covering the 2022-2026 period. ITM considers only one budget line for the BCH 5-year programme. As such, budget shifts between different activities and different years are not presented anymore in the ITM accounts. However, the secretariat will continue to make and review its annual budget (by its SC as well as its GA), and to report in the same way as before.

In 2024, we had earmarked an amount of EUR 38,000 to organise a Be-cause health conference. However, we decided to invest in the co-organisation of the [BE EU Expert Conference "Towards Health Equity: Strong Health Systems, Universal Health Coverage and Social Participation"](https://www.be-causehealth.be/nl/bch-events/towards-health-equity-strong-health-systemsuniversal-health-coverage-social-participation/)³⁵ in the framework of the 2024 Belgian Presidency of the Council of the European Union. The resulting positive balance of 2024 will be used to finance the renewal of the Be-cause health website, and the development of new BCH branding guidelines. These communication initiatives were not included in the 2022-2026 budget.

³⁵ <https://www.be-causehealth.be/nl/bch-events/towards-health-equity-strong-health-systemsuniversal-health-coverage-social-participation/>

WHO WE ARE

Composition of the Steering Committee (December 2024)

Chair

- » Stefaan Van Bastelaere, Enabel
- » Substitute: Xavier de Béthune, individual member

Coordinator

- » Magalie Schotte, ITM

Treasurer

- » Xavier de Béthune, individual member
- » Substitute: Davide Olchini, Médecins du Monde (MdM)

Members of the Ethical Commission

- » Amandine Oleffe, École de Santé Publique – Université Libre de Bruxelles (ESP – ULB)
- » Substitute: Dimitri Renmans, ESP – ULB
- » Valérie Van Belle, Christelijke Mutualiteiten (CM) – Mutualités Chrésiennes (MC)
- » Félix Vanderstricht, ULB Coopération

Ombudsperson

- » Félix Vanderstricht, ULB Coopération

Observing member

- » Mabelle Mrad, DGD
- » Substitute: Enrico Balducci, DGD

Other members SC

- » Belén Tarrafeta, ITM
- » Béatrice Futshu, MSDC
- » Substitute: Anselme Mubeneshayi Kananga, International Youth Association for Development (IYAD)
- » Ignace Ronse, individual member
- » Substitute: Martinus De Smet, individual member
- » Laure Speecke: CM- MC
- » Substitute: Valérie Van Belle, CM - MC
- » Elisa Vanlerberghe, Fracarita
- » Substitute: Jan Decoene, Fracarita
- » Davide Ziveri, Humanity & Inclusion (HI)
- » Substitute: Antoine Sepulchre, HI

Listed member organisations (December 2024)



congodorpen.be



memisa.be/en



medecinsdumonde.be



icrhb.org



aedes.be/en



chaîne-espoir.be



mc.be/fr



fos.ngo/en-fos



cota.be/en



mondefemmes.org



bemsa.be



uclouvain.be/en



[maisonsolidarite
diabetecongo.be](http://maisonsolidarite-diabetecongo.be)



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- » Directorate General for Development Cooperation (Belgium) – DGD

Thematic group 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 to influence Belgian stakeholders policies and practices:

- » **Access to Quality Medicines**

Belén Tarrafeta, ITM

- » **Determinants of International Health**

Matilde Cooman, Viva Salud

- » **DRC**

Anselme Mubeneshayi Kananga, IYAD

- » **Digitalisation**

Mireille Ntchagang, BlueSquare and Stefaan Van Bastelaere, Enabel

- » **Planetary health**

Davide Ziveri, Humanity & Inclusion and Xavier de Béthune, individual member

- » **Researchers in Global Health**

Elisa Vanlerberghe, Fracarita Belgium and Rebecca Kahler, individual member

- » **Sexual Reproductive Health and Rights**

Sara Salarkiya, Sensoa and Aminata Sibidé, GAMS

- » **Social Health Protection**

Elies Van Belle, Memisa and Paul Bossyns, Enabel

- » **Mental Health and Psychosocial Support**

Hilde Buttiëns, Memisa and Katia Verbiest, Artsen zonder Vakantie (AzV)

For each of these themes, reference documents, essential links and presentations of previous workshops and conferences are available on our website: <https://www.be-causehealth.be/en/working-groups-overview/>.

CONCLUSION

Dear Be-cause health members and friends,

First of all, I want to thank all contributors to this 2024 annual report. It was a joint effort by our steering committee members and WG coordinators. Every year it is a challenge to report on all activities of a network as diverse as Be-cause health. We hope we have succeeded and you have enjoyed your reading.

In 2024, Be-cause health marked its 20th anniversary — a milestone that speaks volumes about the value of the network. Over two decades, Be-cause health has proven to be much more than just a platform for exchange. It is a dynamic, member-driven space for learning, sharing and collective influencing. Its very existence relies on the active engagement and dedication of its members — and it is this shared commitment that continues to drive the network forward.

A key mission of Be-cause health is to keep the right to health for all high on the political agenda, both in Belgium and globally. In that respect, 2024 was a powerful illustration of the network's relevance and influence. During Belgium's Presidency of the Council of the EU, health was placed at the forefront of the Belgian development cooperation agenda. This also reflects the strength and credibility that Be-cause health has built up over the years, thanks to its expertise and collaborative spirit.

Our network continues to evolve. In 2024, two African organisations became formal members of Be-cause health — a historic first. Their inclusion marks an important broadening of the network, allowing non-Belgian stakeholders to help shape its governance and strategic direction. We sincerely hope many others will follow their lead. This expansion is a tangible result of the network's commitment to decolonisation — not just in theory, but in practice.

In the context of today's shifting paradigms — in international cooperation, in thinking about peace, security, and inclusiveness — our platform has an important role to play. It offers a space for shared reflection and action, one where we can collectively counter rising cynicism, racism, and individualism.

By continuing to exchange, to learn from one another, and to act together, we can keep building that alternative — one rooted in solidarity and justice.

Let's keep doing that — now, and for at least the next 20 years. Together.

I look forward to meeting each other soon at one of our many future activities, be it online or in person!

Magalie Schotte

Coordinator Be-cause health





BE-CAUSE HEALTH ANNUAL REPORT 2024

Be-cause health is supported by:



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