



Soyez-le bienvenue ! Nous commencerons la réunion à 10 heures.  
A bientôt !

Welcome! We'll start the meeting at 10 o'clock. See you then!





**General Assembly 2024 and 20th Anniversary Be-cause health  
World Mental Health Day 2024  
10 October, 2024  
Institute of Tropical Medicine, Antwerp**

**👉 Follow us on social media**  
#20yBe-causehealth  
#WorldMentalHealthDay  
@Be\_causehealth





# Arithmetic for dummies

- 1
- = 3
- <10
- >100
- <1000
- ?10000
- 40
- 50 by 25



# Quiz

- Antwerpen
- Dakar
- Niamey
- Rubavu
- Mechelen

# Schedule



**9:30 am: Welcome coffee, Aula Janssens**

**10-10:20 am: Welcome and Keynote speech**

- Keynote speech by Minister [Frank Vandenbroucke](#), Deputy Prime Minister and Minister of Social Affairs and Public Health, in charge of Development Cooperation and Major Cities Policy
- Welcome by [Lut Lynen](#), Director ITM

**10:20 am–1 pm: Annual General Assembly (G.A.) – statutory part, Aula Janssens**

- Chair: [Stefaan Van Bastelaere](#), Senior Health Expert at Enabel & chair of our Steering Committee

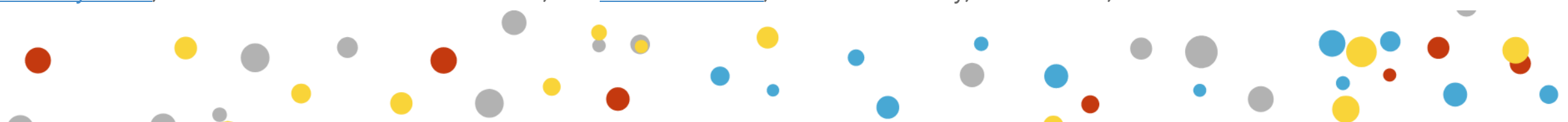
**1–2 pm: Lunch break, Karibu**

**2–4 pm: Interactive Workshop on Mental Health: A Holistic Approach to Integrating Well-being in all Be-cause health WGs, Aula Janssens**

- [Abdoulaye Sow](#), Director, Fraternité Médicale Guinée
- [Alain Kabemba](#), General Secretary, Pallia Familli
- [Jannelore Derycke](#), Mental Health Focal Point, Médecins du Monde – Dokters van de Wereld Belgium
- [An Verelst](#), Psycho-Social Manager, FPS Health
- [Achour Ait Mohand](#), Psychiatrist, Enabel

**4–7 pm: Reception and networking event, Karibu**

- [Heidy Rombouts](#), Director General, DGD
- [Stefaan Van Bastelaere](#), Senior Health Expert at Enabel & chair of the Steering Committee
- [Dirk Van der Roost](#), first Be-cause health coordinator, and one of the networks' founders
- [Abdoulaye Sow](#), director Fraternité Médicale Guinée, and [Alain Kabemba](#), General Secretary, PalliaFamilli, DRC



# Annual General Assembly

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12:50-1pm: Any Other Business



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# BREAKING TABOOS IN GLOBAL HEALTH

# BRISER LES TABOUS EN SANTÉ MONDIALE

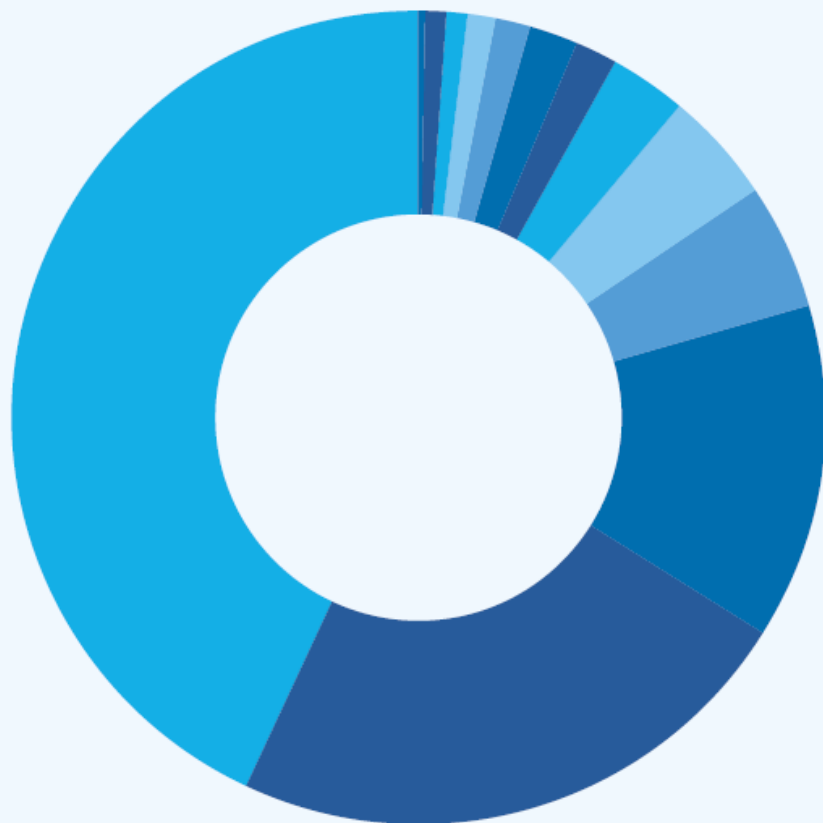
Be-cause health International Conference  
on the future of global health

Conférence Internationale de Be-cause  
health sur l'avenir de la santé mondiale

23/03/2023  
& 24/03/2023



## In numbers



- » **1** half day of **online conferencing**
- » **1** half day of **hybrid conferencing**
- » **167** **remote participants** on March 23
- » **313** **remote** and **97** **on-site participants** on March 24
- » **13** submitted **organised** sessions
- » **36** submitted **individual** abstracts
- » **2** **keynote** sessions
- » **10** **parallel** sessions
- » **33** **remote** and **13** **on-site** speakers
- » **6** **remote**, **6** **on-site** and **8** **chat moderators**
- » **21** **other** collaborators



# ECTMIH Utrecht 2023

## Shaping the future of Equitable and Sustainable Planetary health

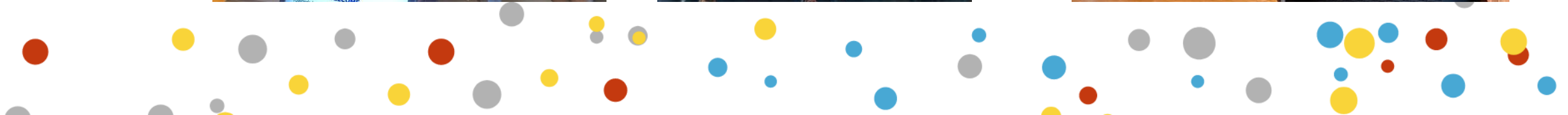
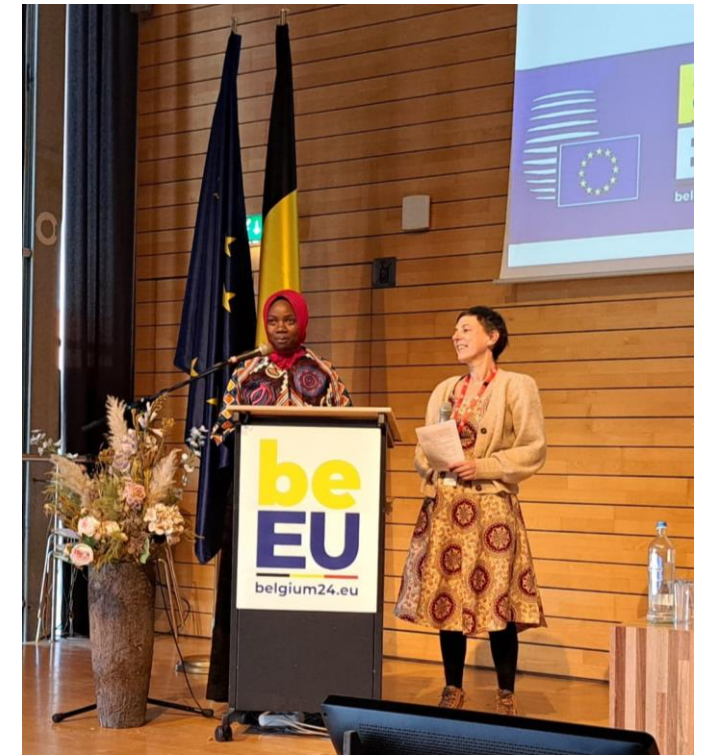




# BE EU CONFERENCE 2024



**Towards health equity: Strong Health Systems, Universal Health Coverage and Social Participation**  
Conference in Mechelen, April 23 2024



# WG Access to Quality Medicines

**Maria Belen Tarrafeta Sayas (Institute  
of Tropical Medicine)**



# WG – Access to quality medicines



Background of the WG – Initiated by Raffaella Ravinetto

- Old WG operating since 2007 – More than 130 members
- Justification – There is no health system without medicines – Access to medicines is highly compromised in the world, particularly in LMIC – WHO estimates that 10% of medicines in LMIC are substandard or falsified
- WG focus on share information and knowledge in relation to access and quality of medicines.
- Important milestone in *Charter for the Quality of Medicines* signed by member organizations in 2008



# WG – Access to quality medicines



## Overview from 2024

- Webinar conducted in February
  - ✓ University of Oxford presented a research on quality of medicines conducted in Nigeria
  - ✓ TESS MAV+ Director presented what is EU TEI and MAV+ programme
- Periodic share of literature review
- Webinar in French scheduled for last quarter (possible November 6<sup>th</sup>)
  - ✓ Topic of discussion – is access to medicines improving in francophone Africa? Observations and reflections from Central Medical Stores operating in the region.

# WG – Access to quality medicines



## Plans for 2025

- Complexity on the current context of Global Access to Medicines – opportunity to re-orient the WG
- Consultative process to confirm membership and to reframe objectives – development of ToR





# WG Determinants of International Health

## Viva Salud



# WG Digitalisation

## Mireille Ntchagang (Bluesquare) & Stefaan Van Bastelaere (Enabel)

### LEVERAGING E-LEARNING TOOLS TO STRENGTHEN HEALTH PROFESSIONALS



**DECEMBER 14, 2023 - 5PM TO 6PM (GMT+1)**  
HYBRID EVENT WITH TRANSLATION FR/EN  
JOIN US ON ZOOM AND AT THE ENABEL CONFERENCE CENTER IN BRUSSELS (REGISTRATION MANDATORY)

(Followed by a meet, greet & network event)



Speaker  
Steven Van Den Broucke  
Infectious Diseases Specialist  
@ITM Antwerp



Speaker  
Informaties specialist and platform manager for online learning @the Africa Center of Excellence for the Prevention and Control of Transmissible Diseases



Speaker  
Elie Khalil  
Data System Configuration Lead  
@Bluesquare



Moderator  
Stefaan Van Bastelaere  
Senior Health Expert @Enabel



## **WG Mental Health**

**Katia Verbiest (Doctors without vacation) & Hilde Buttiën  
(Memisa)**



# WG Mental Health – 2023-2024



- Restarted at the beginning of 2024 with 2 new coordinators: Hilde Buttiëns from Memisa and Katia Verbiest from Doctors without Vacation
- Handover with the previous coordinators and great thanks to: John De Maesschalck & Willem van de Put
- Terms of Reference defined and validated by participants to the WG



# WG Mental Health – 2023-2024



- 2 sub-groups:
  - Operational : French-speaking, Sub-Saharan practitioners, Focus on operational issues (eg. Access to psychotropic medication, ...), participants from Belgium + African countries
  - Strategic : English-French with limited translation, participants from Belgium + African countries, focus on more strategic issues (eg. Integration of mental health services in the health system, ...)
- Timing: each group meets 3-4 times a year



# WG Mental Health – 2024-2025



- Strategic group meetings: 25 april, 5 september, 5 december 2024
- Current focus: development of a policy brief on mental health (with sections for 2 target audiences: policy makers and donors)



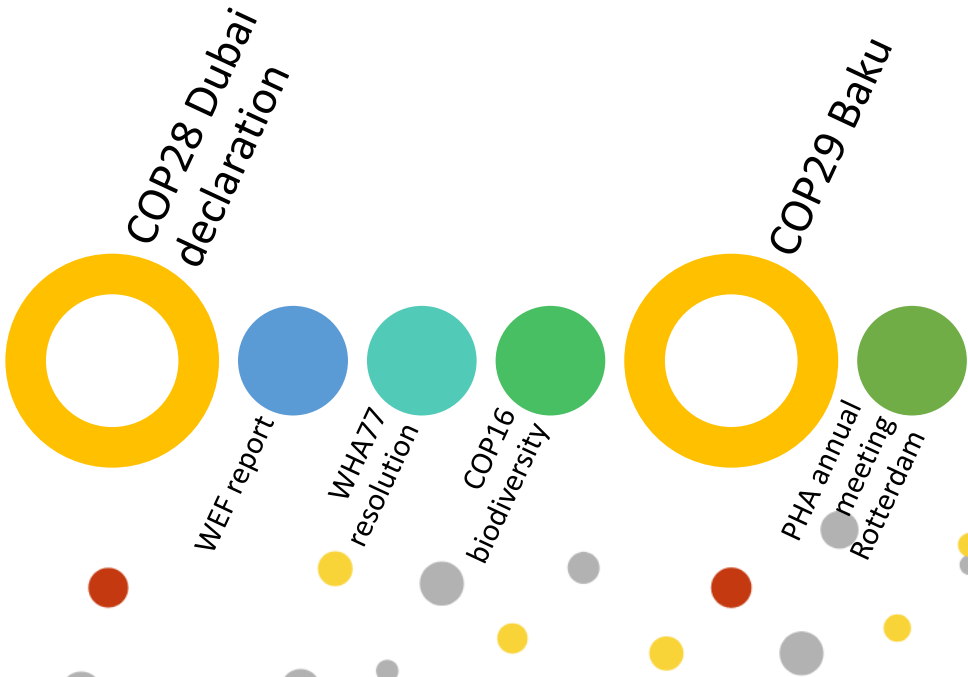
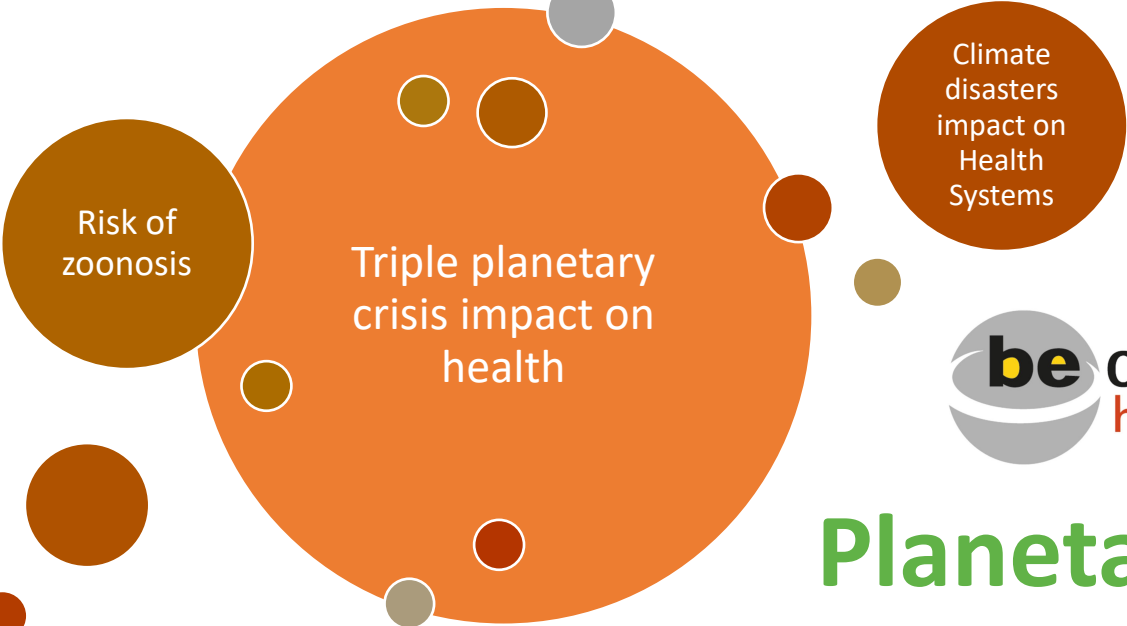
# WG Planetary Health

**Davide Ziveri (HI) and Xavier de Béthune (BCH)**





# Planetary Health working group





## **WG Researchers in Global Health**

**Elisa Vanlerberghe (Fracarita) and Rebecca Kahler (BCH)**



# Researchers in Global Health



- Platform for discussion and a community of practice
- Bring young professionals together, share knowledge and foster interdisciplinary partnerships
- Production Podcast 'Global Health Insights'
  - Contributions from different WGs with overarching theme 'Paradigm shift in Global Health'
  - First episode on Be-cause health
- Next year: more focus on research



# **WG Sexual and Reproductive Health and Rights**

## **Sara Sarlakyia (Sensoa) and Marianne Nguena, GAMS**



# **WG Social Health Protection**

**Elies van Belle (Memisa) & Paul Bossyns (Enabel)**



# WG DRC

## Anselme Kananga (IYAD)








**5<sup>ème</sup>**  
CONGRÈS INTERNATIONAL DE SOINS PALLIATIFS EN RD CONGO

*Theme*

**DE LA FORMATION À LA TRANSMISSION  
POUR DE SOINS HUMANISÉS.**

**Enabel** Du 05 au 07 juin 2025



 MINISTÈRE DE LA SANTÉ PUBLIQUE, HYGIÈNE ET PRÉVENTION
   
 MINISTÈRE DE L'ENSEIGNEMENT SUPÉRIEUR ET UNIVERSITAIRE

[congres.palliafamilli.com](http://congres.palliafamilli.com)
  
[congres@palliafamilli.com](mailto:congres@palliafamilli.com)















# 2025 WG DRC & WG Access to Quality Medicines

## 5ème Congrès International de Soins Palliatifs en RD Congo

Be-cause health Co-Organiser



# Expenses 2023 Closure

## OVERVIEW OF EXPENSES 2023



| REVENUES                              | RECEIVED |  |
|---------------------------------------|----------|--|
| DGD FA5 ITM project (operating costs) | € 73,500 |  |

| EXPENSES   | BUDGET             | REALISED           |
|--|--------------------|--------------------|
| Network management (organisation SC and GA)  | € 1,000.00         | € 4,293.59         |
| Communication (website, newsletters, annual report, other)   | € 4,000.00         | € 4,444.13         |
| Be-cause health annual conference 2023   | € 38,000.00        | € 37,608.15        |
| Be-cause health thematic WG activities (including the co-organisation of the panel on "Equal Access to Controlled Substances for Medical and Research Purposes") | € 25,500.00        | € 20,239.92        |
| Participation of BCH and partners from LMICs in international scientific and policy global health events (including ECTMIH Utrecht)                              | € 5,000.00         | € 6,921.18         |
| <b>Total expenses operating costs 2023</b>   |                    | <b>€ 73,560.97</b> |
| <b>Total budget operating costs 2023</b>   | <b>€ 73,500.00</b> |                    |
| <b>Balance 2023 (operating costs)</b>  | <b>€ -60.97</b>    |                    |

The support of the platform is one of the outcomes ("Belgian Programme - Policy Support") under the 5<sup>th</sup> framework agreement between ITM and DGD (FA5), covering the 2022-2026 period. ITM considers only one budget line for the BCH 5-year programme. However, the secretariat will continue to make and revise its annual budget (by its SC as well as its GA), and to report in the same way as before.

# Budget 2024



|   | EUR           |
|---|---------------|
| Communication (incl. new website)                             | 21.000        |
| Network management (Steering Committee, GA, New Year's event) | 8.500         |
| Conference (ANSER)  | 2.000         |
| Working group activities                                      | 20.500        |
| Participation in international events (EU event)              | 11.000        |
|   | <b>63.000</b> |





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# Taskforce Synergy

**Lead: Stefaan Van Bastelaere (Enabel)**



# Taskforce Decolonisation

## Lead: Elisa Vanlerberghe (Fracarita)



- Article ‘Decolonizing global health: challenging colonial legacies in health governance and systems’
- Serve as a reference and discussion (debate) foundation for the Be-cause health working groups
- Focus on three main themes
  - Colonialism within global health
  - Colonization of the structures and systems of global health governance
  - Colonialism through the global health system



# Taskforce Communication

## Lead: Magalie Schotte (BCH/ITM)



### Background

- hera 2021 evaluation + SC management response
- No communication strategy Be-cause health
- Need to build a new website (change of host)

⇒ Taskforce: communication experts member organisations (Enabel, Sensoa, BlueSquare & ITM)



# Taskforce Communication



| Strengths   | Weaknesses   |
|---|--|
| <p>Good recognition</p> <p>Credibility</p> <p>Members communication</p> <p>Be-cause health matters</p> <p>Seminars</p> <p>Network</p> | <p>Lack of common activities and sometimes consensus</p> <p>Not known outside “usual suspects”</p> <p>No strategy (incl. social media)</p> |
| Opportunities   | Threats  |
| <p>Functionality of Working Groups</p> <p>Networking</p> <p>Influencing policies</p> <p>Amplifying voices LMICs, IPs</p>              | <p>Budget cuts</p> <p>Limited staff time</p> <p>Difficult message</p>  |



# Taskforce Communication



## Preliminary conclusions

- Internal communication (members) is key
- 1 social media channel: LinkedIn (company page)
- New website with extra modalities: network function (+ member profile), e-tutorials, digital report
- Focus on communication through members

## To do

- ⇒ Mailing list: communication staff per member organisation
- ⇒ 1st survey: draft overview communication channels members

# Taskforce Gender

Lead: Magalie Schotte (BCH/ITM)



## Action Plan

- **Taskforce** on gender and power relations: (min.) 1 meeting every 2 years
- **Reflection tool** on gender and power relations: filled out 1 time every 2 years:
  - assess gender practices and analyse power relations within the meetings (WG/SC)
  - propose actions to improve the functioning of the WGs/SC from an inclusive perspective
- **Action plan:** every 2 years by the taskforce
  - clear indicators and recommendations (detecting needs and possible mitigating measures)
  - based on the results of the reflections of the WGs
  - presented to the SC
  - SC decides upon the action plan and is responsible for its follow-up.

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# Renewal membership



**Background:** new international regulations, approved by GA 2023

## 2.1 Types of members

Art. 7 In general, the organisation consists of three categories of members.

1. Individual members: anyone who meets the conditions for membership can become a member **in a personal capacity**. Every **4 years** individual members are asked to renew their membership.
2. Member organisations: organisations that meet the conditions for membership can become members. Member organisations support the strength, the dynamics, and the more formal engagements of the network. An active engagement and participation of their staff in the network is expected. Every **4 years** member organisations are asked to renew their membership.
3. Observing members: donors as well as federal and regional ministries can become observing members **without voting rights**.

# Renewal membership



## Individual members

- Start renewal process end 2023, finalised June 2024  
⇒ from 283 members to 149 members
- Members are asked to be actively engaged in one of the permanent or ad hoc WGs



# Renewal membership



## Member organisations

- Start renewal process July 2024
- Members are asked to do an ethical self-screening
- Ethical Commission (SC)
  - assesses the organisation's compliance with the vision, mission, values, and principles of BCH
  - reviews the answers of the ethical self-screening
  - starts a dialogue when appropriate
  - advises the SC
- GA decides on the membership
- September 2024: 15 members screened (new and members 23)
- Objective: all new and existing members screened



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# **Election new member Steering Committee**

**Maria Belen Tarrafeta Sayas  
(Institute of Tropical Medicine)**



# Does the G.A. confirm the candidacy of Maria Belen Tarrafeta Sayas for the Steering Committee?

Yes 0%

No 0%

I abstain 0%

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**Election new member organisation**  
**Child-Help**  
**Michel Coenen (Board Child-Help)**





# Child-Help - How it started



# Child-Help's vision and mission



## Vision

By 2050 all children with spina bifida and hydrocephalus have a fair start in the world.

‘Fair’ in our vision means: fair with the cultural and economic context of the country. Fair means also non-discrimination in the context of Universal Human Rights. Fair means non-discrimination based on disability.

## Mission

CH's mission is to enable a generation where children with spina bifida and hydrocephalus become thriving adults in an inclusive society working with parties worldwide.



# Child-Help's strategic goals



## Strategic goals for the next 5 to 10 years

***Strategic goal 1:*** Child-Help supports support groups and their network to change their societies themselves in our partner countries and in Belgium.

***Strategic goal 2:*** Access to treatment, care and other social services is improved in partner countries and in Belgium.



# Child-Help in the world



## RESULTS 2023

Members of Child-Help International

- Project countries
- Material support

- Parent Group
- Hospital project
- Outreach project
- House of Hope
- Continenence Mgmt

### UKRAINE

708 children followed-up  
47 new in 2023  
38 surgeries  
121 professionals trained  
77 family members trained

22.564 children followed-up worldwide

18.354 mothers worldwide received a year's supply of folic acid

5.725 pieces of surgical material provided (shunts, EVD, ...)

17.450 catheters provided worldwide

### GUATEMALA

139 children followed-up  
21 new in 2023  
63 surgeries  
2 professionals trained  
195 family members trained

### PERU

775 children followed-up  
8 new in 2023  
41 professionals trained  
2 clinics

### UGANDA

5.835 children followed-up  
617 new in 2023  
1.606 surgeries  
56 professionals trained  
1.203 family members trained  
77 clinics  
1.137 shunts

### IVORY COAST

116 children followed-up  
66 surgeries

### DR CONGO

300 children followed-up  
4 new in 2023  
42 surgeries  
4 professionals trained  
112 family members trained  
36 clinics  
49 shunts

### ZAMBIA

2.816 children followed-up  
370 new in 2023  
601 surgeries  
19 professionals trained  
159 family members trained  
17 clinics  
606 shunts

### SUDAN

22 family members trained

### ETHIOPIA

337 children followed-up  
253 surgeries  
36 family members trained

### KENYA

5.296 children followed-up  
413 new in 2023  
229 surgeries  
76 professionals trained  
897 family members trained  
142 clinics  
501 shunts

### TANZANIA

2.953 children followed-up  
825 new in 2023  
702 surgeries  
14 professionals trained  
2.293 family members trained  
51 clinics  
201 shunts

### MALAWI

3.027 children followed-up  
468 new in 2023  
606 surgeries  
59 professionals trained  
411 family members trained  
111 clinics  
551 shunts

### SOUTH-AFRICA

1.262 children followed-up  
29 new in 2023  
24 surgeries  
9 professionals trained  
71 family members trained



# Child-Help and Be-cause health



We believe that our **core areas of expertise** would greatly contribute to the goals of the “Because Health” network, particularly in the following ways:

- **Specialized Care for Vulnerable Children**
- **Community Empowerment**
- **Innovative Solutions in Low-Resource Settings**
  
- **We are interested in participating in the working groups:**
  - **Access to quality medicines**
  - **Social Health Protection**





**Thank  
you**



**Election new member organisation**  
**Deutsche Stiftung Weltbevölkerung (DSW)**  
**Lisa Goerlitz (Head of DSW's EU Office)**









DSW focuses on the **needs and potential of the largest youth generation in history**. We are committed to creating demand for and access to health information, services and supplies, and to securing their right for a brighter future.

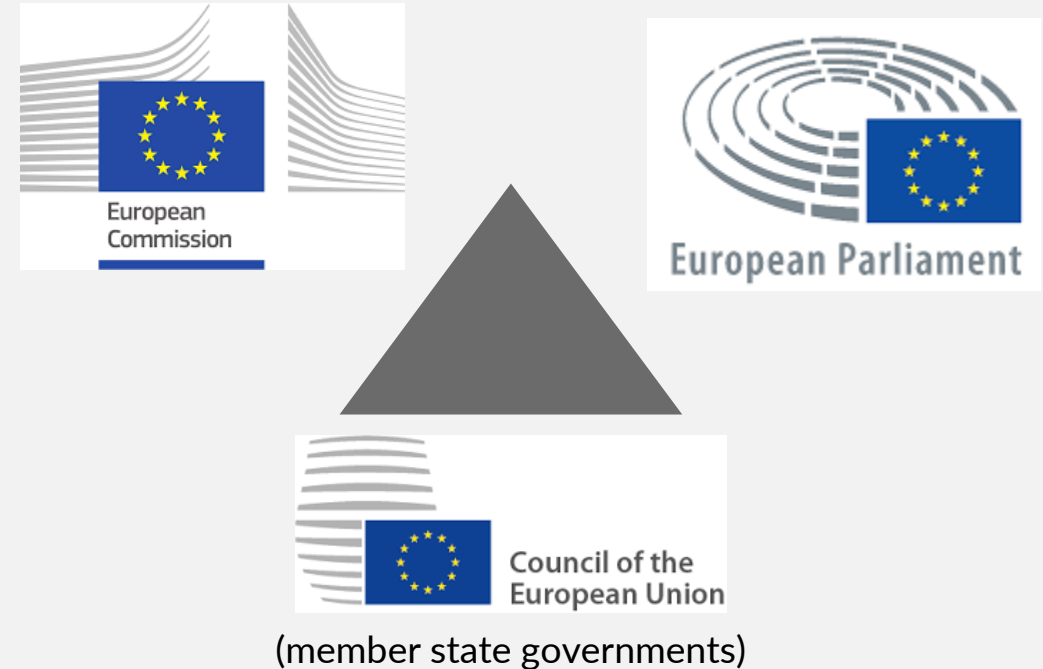
DSW promotes **universal access to sexual and reproductive health and rights (SRHR)** in low- and middle-income countries by undertaking SRHR advocacy, developing initiatives, and engaging in capacity development and family planning projects.

DSW advocates for investment in **research and innovation to fight poverty-related and neglected tropical diseases**, which disproportionately affect women and girls, and to further advance the global health agenda.

# DSW advocacy at EU level

- **Objectives:** Improved policies and increased funding for sexual and reproductive health and rights (SRHR) and global health research and innovation (GH R&I)
- **Approach:** DSW works in coalition with partners from academia, research institutes, product development partnerships, and other NGOs
- **Processes:** EU external action instruments, EU-Africa relations, annual budget, R&I instruments; pandemic preparedness and response policies.
- **Some of our partners & networks:**
  - **Informal Global Health CSO group:** ONE Campaign, Oxfam, Global Health Advocates, Aidsfonds, Wateraid, Save the Children, etc.
  - **Countdown 2030 Network:** IPPFEN and EPF
  - **Global Health Research Institutes and Universities:** EGHRIN, Institut Pasteur, Institut Mérieux, Heidelberg University, University Bonn, ITM, AIGHD, ISGlobal, etc.
  - **Product Development Partnerships:** DNDi, PATH, IAVI, FIND, etc.
  - **Affiliations:** DSW is a member of HERA's civil society advisory forum

## Advocacy targets:



**Engaging politicians and experts in capitals (Berlin, Brussels, etc.) is essential for EU advocacy, but equally important is to engage the EU because it shapes the actions of its Member States.**

## Sexual and Reproductive Health and Rights (SRHR)

- **EU-Africa cooperation:** Strengthening Africa-EU cooperation and increased investments on health, gender, and youth. Promoting EU support to Sub-Saharan Africa is driven by local needs and scientific evidence, and implemented transparently, with clear accountability and monitoring mechanisms.
- **Development Cooperation:** Increasing EU development funds and improving coherence between Team Europe (EU + Member State) ODA investments. Ensuring ODA prioritises poverty eradication and the promotion of human development, including health, education, gender equality, and social protection.

## Global health research and innovation (GH R&I)

- **EU-Africa cooperation:** Protect and promote investments in poverty-related and neglected diseases, including support for regulatory authorisation and affordable access in Africa. Advocate for the EDCTP (European and Developing Countries Clinical Trials Partnership with sub-Saharan Africa).
- **Pandemic Preparedness and Response (PPR):** Ensure that the EU's PPR actions and new agency, HERA, considers global health equity alongside EU health security, for example, by supporting African countries to better prepare for and respond to disease outbreaks, and to address the effects of climate change on vector-borne diseases.

## Gender equality in global health and women's health R&I:

- Advocating for greater prioritisation of gender equality in development cooperation as a key driver of sustainable development and improved health and wellbeing.
- Promoting gender-transformative science that addresses women's specific unmet needs and delivers better outcomes for women's health.





# Engagement with BeCause working groups and Membership benefits

- We expect to be actively engaged in the **Access to Quality Medicines** and **SRHR** working groups.
- DSW's expertise is recognised through effective engagement with public authorities and experts:



**SPEAK UP!**  
FOR GLOBAL HEALTH

## IMPROVING WOMEN'S HEALTH GLOBALLY:

### A SMART RESEARCH INVESTMENT FOR THE EU



### Better tools are need to end tuberculosis and anti-microbial resistance

DISCLAIMER: All opinions in this column reflect the views

By Nicolae Stefanuta



We need better tools to end TB and AMR, and the EU can and must lead these efforts, writes Nicolae Ștefanu

Photo: © European Union, 2022



“The EDCTP has been a success story for EU-Africa research and innovation cooperation. Our partnership offers a renewed opportunity to deepen cooperation in tackling some of the world's most devastating infectious diseases, essential in the face of converging threats such as climate change and emerging resistance. In developing new drugs, vaccines and diagnostics for key infectious diseases affecting sub-Saharan Africa, the partnership is accelerating economic and social transformation for the benefit of us all.”

**Mariya Gabriel**

Commissioner for Innovation, Research, Culture, Education and Youth

“A highly skilled workforce is necessary to strengthen healthcare systems in Africa, and for our collective health security. The Africa CDC and the EDCTP have worked closely over the last six years to accelerate action on this, including through a jointly funded programme to train highly skilled epidemiologists and biostatisticians in sub-Saharan Africa.”

**Dr John Nkengasong**  
Director Africa CDC



Photo: Africa CDC Communications Team

- We value collaboration and believe that systemic change can only be driven and achieved collectively!





Thank you!

**Election new member organisation**  
**Fraternité Médicale Guinée (FMG)**  
**Abdoulaye Sow (Director FMG)**



**Election new member organisation**  
**PalliaFamilli (PF)**  
**Alain Kabemba (Coordinator PF)**  
**Gilbert Mukandila (Spiritual Advisor PF)**



## **Election new member organisation**

**Sciensano**

**Dominique Vandekerckhove (One Health Coordinator,  
Sciensano)**





# Organisational overview

## Vision

*We are a **key player in human and animal health** thanks to the **excellence** of our scientific research, our high-level services and the **integration of interactions between humans, animals and their environment** in our activities, advice and recommendations.*

*We base our actions on **global and interdisciplinary approaches**, scientific excellence, innovation and on the quality of our **collaborations** with our partners.*

## Mission

*Sciensano supports human and animal health policies from a One Health perspective*

- by making use of its expertise in **research and surveillance**, also in the context of **crisis management**,*
- by providing high-quality **scientific advice, recommendations and services**,*
- by collecting, analysing and making available validated **health data**,*
- by **collaborating** with external partners and*
- by **liaising with relevant actors** in Belgium and internationally*

# Organisational overview

## Values

- *Collaboration*
- *Excellence*
- *Independence*
- *Goodwill*
- *Responsibility*

## Primary objectives

- ***One Health institute***  
*interdisciplinarity, collaboration, coordination, communication, capacity building*
- *The aim of Sciensano's research is that its results can be applied in practice to **improve and support human and animal health and health care**. Sciensano therefore focuses in particular on **translational research**, so that scientific data and evidence can be optimally used in health policy making.*
- *Means :*  
*Surveillance – Research – Risk assessment – Quality control – Policy recommendations*

# Alignment with Be-cause health

## Values

- Collaboration
- Excellence
- Independence
- Goodwill
- Responsibility

## Primary objectives

- **One Health** institute  
interdisciplinarity, collaboration, coordination, communication, capacity building
- The aim of Sciensano's research is that its results can be applied in practice to improve and support human and animal health and health care. Sciensano therefore focuses in particular on translational research, so that scientific data and evidence can be optimally used in health policy making.
- Means :  
Surveillance – Research – Risk assessment – Quality control – Policy recommendations

# Alignment with Be-cause health

## **Sciensano**

- endorses the Be-cause health vision and mission, as well as its values and principles, and the Health(care) for all declaration
- cooperates with low- and middle-income countries, and has an interest in offering support to combat global poverty and inequality
- has a clear interest in what is happening in Belgium in the field of global health

# Engagement in Working Groups

## Planetary Health

- transdisciplinary networks are a fruitful mechanism for understanding and tackling the multiple effects of the climate crisis and environmental degradation impact on health ('One Health')
- such a complex issue needs to be tackled via transdisciplinary international groups
- sharing resources and information, and engaging in research, education, and programmes
- 'Climate crisis is a health crisis'
- Be-cause health offers a flexible space for
  - convening a planetary health working group and contributing to better understanding, information, and action on climate and health in polycrisis and syndemic times
  - technical exchanges and to facilitate joint initiatives
- since 2023, Sciansano's One Health Coordinator participates in the Planetary Health WG.

# Membership benefits

## For Sciensano

- Communication, collaboration, coordination and capacity building in One Health context
- Reinforce inter-/multi/transdisciplinary networking at (inter)national level
- (Further) break down knowledge silos
- Further include environmental and climate aspects in One Health activities

## For Be-cause health

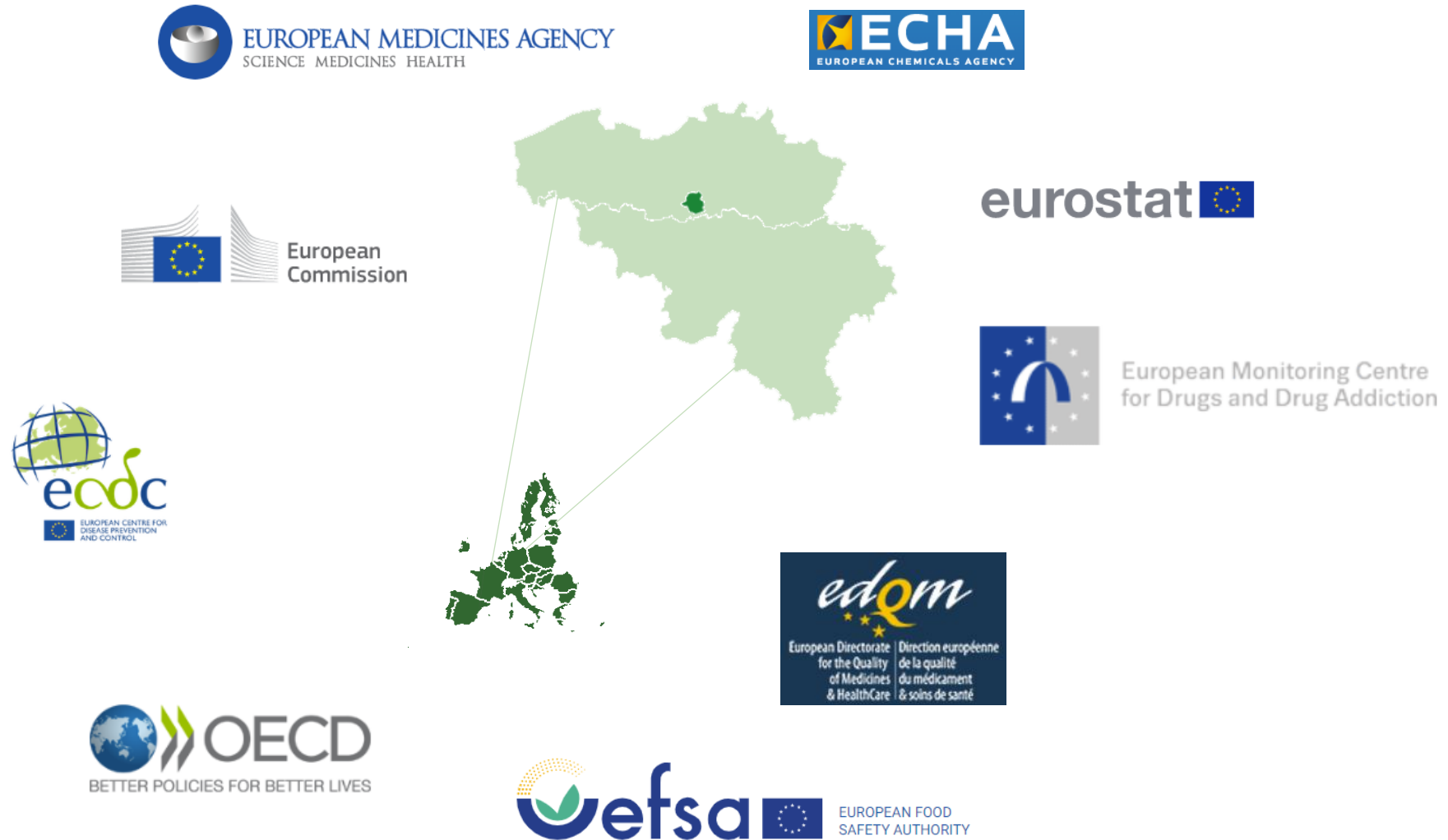
- Collaboration with the Be One Health institute
- Access to top of the line expertise
  - human health (incl. NCD)
  - animal health
  - environmental health
- Access to Sciensano's network
  - at the regional, federal, European and international level
  - including scientists, policy makers, interdisciplinary research consortia and networks, private sector, ...

# Field of action & collaboration - BE



# Field of action & collaboration - EU

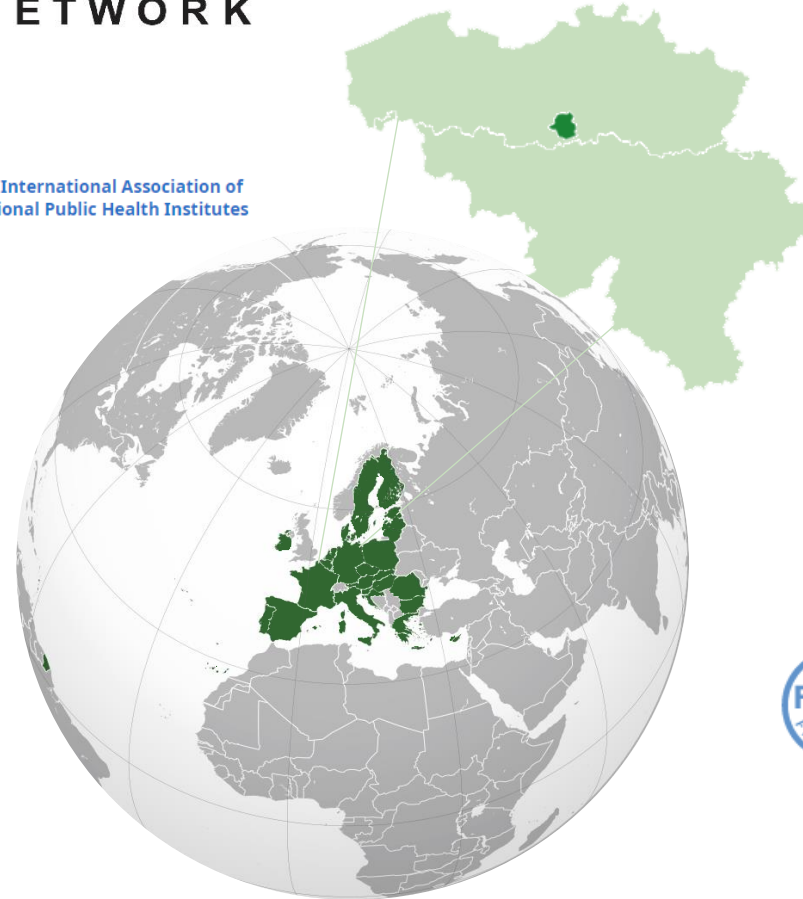
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# Field of action & collaboration - GLOBAL

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# Research collaborations

And other partnerships

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## Universities, institutions, hospitals, foundations & organisations

Some examples



# Private sector

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## Private companies are also among our clients

- for **batch releases** or **controls**
  - of vaccines, medicines,
  - chemical products,
  - foodstuffs,
  - containers and others
- Often due to a **legal obligation**
- Measures are taken to avoid potential conflicts of interest

Some examples



Ceva Santé Animale



Janssen  
PHARMACEUTICAL COMPANIES OF  
Johnson & Johnson



omrix  
Biopharmaceuticals Ltd.  
a Johnson & Johnson company



SANOFI PASTEUR



HUVEPHARMA



zoetis



MSD  
Animal Health

# Additional information

## One Health coordinator

[Dominique.Vandekerchove@sciensano.be](mailto:Dominique.Vandekerchove@sciensano.be)

## Linking into

- <https://www.sciensano.be/en>
- Belgian Biodiversity Platform (BBPf)  
<https://www.biodiversity.be/>
- Belgian One Health (BeOH)  
<https://www.biodiversity.be/4033/>



# Election new member organisation

## Q&A



Does the G.A. confirm the candidacy of Child-help as a member organisation of Be-cause health?

Yes  No  I abstain



Does the G.A. confirm the candidacy of Deutsche Stiftung Weltbevölkerung (DSW) as a member organisation of Be-cause health?

Yes  No  I abstain



Does the G.A. confirm the candidacy of Fraternité Médicale Guinée as a member organisation of Be-cause health?

Yes  No  I abstain





Does the G.A. confirm the candidacy of Pallia Familli as a member organisation of Be-cause health?

Yes  No  I abstain



Does the G.A. confirm the candidacy of Sciensano as a member organisation of Be-cause health?

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Yes  No  I abstain



# Annual General Assembly

## Statutory Part



10:20-10:30am: Welcome and introduction by Stef

10:30-10:40am: Round of introduction

10:40-11:30am: Annual Report and Expenses '23, Activities and Budget '24, short glance at '25

11:30-11:55pm: Follow up temporary taskforces Synergy, Decolonisation, Communication and Gender

11:55-12:15pm Renewal membership (individual and organisation)

12:15-12:20pm Election new member Steering Committee

12:20-12:50pm Election new member organisations

**12:50-1pm Any Other Business**





Soyez-le bienvenue ! Nous commencerons l'atelier à 14 heures.  
A bientôt !

Welcome! We'll start the workshop at 2 o'clock. See you then!





## Interactive workshop on Mental Health



# Welcome



By Hilde Buttiëns and Katia Verbiest, coordinators of the BCH WG on Mental Health

## Objective of the interactive workshop :

*“Elaborate together concrete opportunities to collaborate between the different WGs of BCH and the WG on Mental Health, and ways of integrating Mental Health in all the BCH WGs”*



# Approach?

Mini World Café in 5 separate groups

- > Inspirational work presented by a speaker, highlighting the interlinkage of mental health with other topics
- > Moderator: facilitates the workshop, manages time and assures the group stays on-focus
- > Mini world café: 3 questions, 3 tables, 3 hosts
- > Plenary recap: **AT 15h35**
- > **Each group presents the proposed action points (5 min)**



# The 5 groups



-  Aula Janssens – Modérateur: Julie Berthelier (ULB Cooperation) – Orateur: Abdoulaye Sow (Fraternité Médicale Guinée) – Langue: Français
-  Aula Janssens – Moderator: Santiago Ospina (ULB Cooperation) – Speaker: Jannelore De Rycke (Médecins du Monde Belgique) – Language: English
-  Room North – Modérateur: Wouter Boesman (ITM) – Orateur: Alain Kabemba (Pallia Familli, RDC) – Langue: Français
-  Room South – Modérateur: John De Maesschalck (ITM) – Orateur: Achour Ait Mohand (Enabel) – Langue: Français (avec traduction)
-  Room Kartuizer- Moderator: Victor De Roeck (Viva Salud) – Speaker: An Verelst (FSP Santé, Belgique) – Language : English







Soyez-le bienvenue ! Nous commencerons l'atelier à 14 heures.  
A bientôt !

Welcome! We'll start the workshop at 2 o'clock. See you then!



KEY  
TAKEAWAYS



# On the way out ...

The flap-overs with the proposed actions will be hanged in the reception area, you receive stickers on the way out ... and you can vote for the best ideas!

**We invite you to reflect on your personal takeaways ... how can you integrate mental health care in your work!**

