

## Statement for the Grand Bargain Annual Meeting

Greetings to all our colleagues and friends, wherever in the world you may be.

As we prepare for the next pandemic, having learned critical lessons from the recent COVID-19 one, we must remember how we managed to get this far. Treading uncharted waters and facing completely new obstacles, the humanitarian system was able to shape our response through a hard process of collective self-reflection and self-improvement. In this spirit, we managed to overcome and programmatically accelerate many of the Grand Bargain commitments whose progress had been stuck in process bottlenecks for years.

In WHO's own efforts to respond to the many crises affecting the world today, we saw the Grand Bargain at play in several important ways:

- By pushing WHO to continue leveraging stronger collaboration and coordination at all levels with local and national actors to scale up localization.
  - o In Afghanistan, for example, since June 2022, a key WHO focus has been restoring health service in underserved "white areas" (approximately 800 health facilities not covered by international funding, serving more than 30% of the Afghan population). This, including the crucial delivery of measles and polio immunizations, is driven by local health NGOs and through stronger engagement with community health workers.
  - o Moreover, through the contribution of community health workers (selected by communities and supported through a strong network of local health humanitarian NGOs as well as national health authorities), Somalia was able to vaccinate over 40% of its population against COVID-19 – an achievement given the enormous humanitarian and security challenges that the country continues to experience.
- By improving the coordination of multi-purpose cash with focus on social protection planning and a stronger involvement and support of national authorities.
- By increasing multi-year (>5%) and flexible funding (>8%) for the COVID-19 response allowing us to increase the number of country offices benefiting from multi-year and flexible humanitarian funding agreements.
- By stressing the importance of gender equity. Community-centred primary health care can meet the needs of women and enable equitable access to critical services such as assisted births and pre and postnatal care, childhood vaccinations, nutrition, and family planning. However, underfunding of primary health care systems, a lack of trained health care workers, and weak supply chains for medical products are still threatening progress.

We must never allow ourselves to be comfortable with the results achieved so far, because there will always be more that we can do in the service of the most vulnerable. That is why it is critical that we work better to ensure the Grand Bargain does not remain a global initiative, but rather an approach to humanitarian action that reaches, impacts, and builds resilience at the country level.

WHO will remain committed to the Grand Bargain, through this new iteration and its objective of a better humanitarian outcomes for affected populations through enhanced efficiency, effectiveness, greater accountability and strengthened partnerships.

I thank you.

Dr Michael Ryan

Executive Director of WHO's Health Emergencies Programme, WHO