Grand Bargain in 2019:

Annual Self Report – Narrative Summary

Name of Institution: Médecins du Monde (MdM) - Doctors of the World International Network

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Question 1: Reflecting on the information you have provided in the Excel spreadsheet, please highlight the 2 or 3 key outcomes or results relating to the Grand Bargain that your institution achieved in 2019?

1. An increase in the commitment and implementing action through local partners. It was not only a matter of volume implemented by local actors but also a will to establish a partnerships based on a common vision, principles and quality standard (MDM Sp).
2. Enhancing capacity building of local actors addressing specific thematics like emergency preparedness and contingency planning (MDM Sp).
3. Validation of a tool ‘mutual partnership assessment’, e-learning session developed along 2019 to promote partnerships with local and national actors (MDM Fr).
4. Set up of a library of indicator for localisation purpose. This document will be disseminated throughout our mission MDM Be in 2020 (MDM BE).

Question 2: Please explain how the outcomes/results have or will lead to long-term institutional changes in policy and/or practice.

One of the first step towards institutional changes in policy was to have the 16 independent Chapters of MdM Network to agree on all commitments of the Grand Bargain, wanting to join the signatories. The international network has created within its Operations Steering Group two working groups, each one referring to respectively localisation and participation (workstream 1 and 2). Those two working groups, on behalf of MDM network, are elaborating a 2020 action plan towards those two engagements.

Along this network initiative, each chapter is already taking action along the grand bargain workstream, and especially 1 and 2. For ex, for MDM Sp, in some cases it was possible to establish a strategic partnership through a multi-year funding that is a good basis for institutional changes; MDM SP has included in the partnership agreements specific reference to the commitments incorporating capacity strengthening support. Another example, is the e-learning course ‘Mutual partnership assessment’ finalized by MDM Fr, to promote "partnerships" with local and national actors.

Question 3: How has your institution contributed to the advancement of gender equality and women’s empowerment¹ in humanitarian settings through its implementation of the Grand Bargain? What results/outcomes have been achieved in this regard? (please outline specific initiatives or

¹ Refer to the IASC definitions of gender equality and women empowerment, available here.
changes in practice and their outcomes/results.} Please refer to the Guidelines for definitions of Gender Equality and Women’s Empowerment, which are included in this self-report template package.

Gender equality and women’s empowerment are one of the main concerns of each of the MDM chapter in each program. For ex, MDM Sp has included the gender analysis in every project design, including in emergency setting. Specific training has been developed. MDM Be has included a specific section on women empowerment in this self-report template package and has completed the Practical guidance notes on SRH and GBV in crisis settings. In April 2019, MDM BE organized a high level forum on prevention and action on GBV at which national, international NGOs contributed and exchanged lessons learned as well as good practices. In Niger, MDM Be finalised in 2019 the guidelines on addressing GBV that is considered by the Government to become the national guidelines.

At the level of the organisation itself, chapters are integrating more and more Gender positions (HQ and field) in order to mainstreaming gender equality and women’s empowerment good practices.

**Question 4: How has the humanitarian-development nexus been strategically mainstreamed in your institutional implementation of the Grand Bargain commitments?** Please explain how your institution has linked commitments 10.1 - 10.5 with other commitments from other workstreams.

All MdM projects intend to strengthen the local, national capacities, both in emergency and long-term contexts. MdM seeks to prevent increased long-term vulnerability as a consequence of the emergency by laying the foundation for rehabilitation and development during the emergency phase. The nexus is completely in line with our identity. MdM has an identity in development and as humanitarian actor.

Our aim is to ensure a universal access to health care and we do that in development and in humanitarian setting. For ex, in the frame of complex crisis MDM Sp is developing some pilot experience in order to be more flexible and respond better to changes in the operational environment; in order to happen it has been paramount working very close internally (development and humanitarians) but also work with local actors who are present before, during and after a crisis.