



WHO HEALTH EMERGENCIES PROGRAMME

Dear colleagues,

I wish to thank you all for the efforts in organizing this important meeting and a warm congratulation for the great achievements the Facilitation Group in drafting the Grand Bargain 2.0 Framework.

Last year, we saw evidence of the Grand Bargain's ability to react in a flexible way to adapt the humanitarian response to the new COVID-19 reality. This helped to ensure that the humanitarian system upheld the spirit of *Leave no one behind* even in the face of massive uncertainty, closure of borders, and ongoing conflicts.

To the question on *how the workstreams are still relevant*, I would like to answer by stressing once again how the COVID-19 response has shown that powerful community engagement and the great support of local and national actors are central to pandemic response.

Efforts to ensure that communities everywhere are better prepared, better equipped and better funded to respond to future health outbreaks are essential to prevent socio-economic crises.

In WHO's own efforts to respond to the pandemic, we saw the Grand Bargain at play in two important ways:

- Increased unearmarked funding for the COVID-19 response allowed us to increase the number of country offices benefiting from multi-year and flexible humanitarian funding agreements;
- We supported national capacities to respond to the pandemic based on sound data analysis and Risk Communication and Community Engagement, allowing national governmental and non-governmental actors to inform response policy and programming;

We must all maintain this momentum in the Grand Bargain 2.0, ensuring that better-quality funding and partnerships drive our collective response to humanitarian emergencies, including and beyond COVID-19.

It's also important to say that, as many colleagues already pointed out, in order to improve quality partnerships, we cannot forget the issue of Risk Management which is inherent to humanitarian action.

Because working in fragile settings and assisting people affected by multiple crisis involves taking and accepting both known and unknown risks;

At WHO we established the Risk Management Committee in order to enhance and implement our global risk management strategy which will have an impact on WHO's approach to Risk Management with all external stakeholders, both donors and partners.

To better engage with our local partners, we do believe that moving from a Risk-transferring approach to a Risk-Sharing one will be crucial.

And to conclude, as highlighted in the ODI Report, we all agreed on the need to elevate discussions and decision-making to a more political and strategical level.

And we do agree with the concept of having a smaller group of signatories taking up specific actions in order to move faster and more effectively. What we wish to see is a fair representation among those champions to ensure the participation of each constituency in the decision-making process.

Thank you.

Dr Soce Fall