Title of address by Dr Eric Laroche, Assistant Director-General, Health Action in Crises: Reflecting on the changes we are facing in the humanitarian landscape and how partnership can improve how we have responded as a humanitarian community.

I would like to mention that the DG cannot be here to deliver this speech, as she had wanted, due to personal obligations.

Welcome to Ms. Barbara Stocking, Chief Executive Oxfam GB, and Mr. John Holmes, USG and ERC, co-chairs of the Global Humanitarian Platform, Ms. Jemilah Mahmood, co-chair last year and chief of UNFPA's Humanitarian Response Branch, Programme Division. Mr Bekele Geleta, who is hosting the GHP in IFRC.

How has the humanitarian landscape changed?
- The key changes and trends we have witnessed in recent years include the humanitarian reform, cluster approach, civil-military dynamic and growing number and importance of bilateral relationships, and intense media interest in emergencies. The influence of media is incredible and their reports drive outpourings of humanitarian response from many quarters, which must be coordinated. CNN seemed to have had more people on the ground in Haiti than many of our own organizations.
- Crises are not just as "technical" events, they are political events that involve countries, political leaders and international organizations.
- Every humanitarian emergency makes us question how good a job we are doing and what we can do better. Haiti is a relevant example.

How can partnership improve humanitarian response?
- Partnership:
  - Brings resources and skills from many partners
  - And implies commitment from partners who want to be part of the humanitarian framework to participate and support the cluster system.
  - Can mean we have to be flexible in accepting forms of partnerships that we, in a perfect world, may not accept. In Haiti, China, and other settings, the necessary and pragmatic involvement of foreign and domestic armed forces has been invaluable to the overall humanitarian response.
Our prime partners are those in the country where we work, the authorities, civil society, the people: these are the ones who remain behind when the international aid workers leave and continue to serve their populations. The Myanmar response to Cyclone Nargis in 2008 was a clear example of this.

Engaging:
- To meet the needs of the people we are helping, we must do more to engage, listen to, negotiate and seek "acceptance" from all sides - from the village chief to the general.
- This is critical in many respects, particularly for securing humanitarian space.
- Acceptance means:
  - Being "accepted" by the people we try to help. Reaching out and listening to them, even when "security" is a concern.
  - Being open to accepting novel ways of working in humanitarian situations.

Governments and NGOs are sometimes reluctant to collaborate. But both realize in times of emergency that humanitarian imperatives mean coordination and cooperation is critical.

Humanitarian Reform, and cluster system, have helped in this regard:
- Health Cluster has become the key interface between the MoH and humanitarians.
- WHO, as Cluster lead, has a unique relationship with MoHs in our Member States. This is one of our comparative advantages.
- Our relationship with Haitian government helped build systems that saved lives and served our Health Cluster partners after the 12 January earthquake.

WHO has been asked by its Member States to develop its capacities in the humanitarian arena. The Director-General, Dr Chan, has responded by dedicating a cluster of the organization to humanitarian health emergencies. Her commitment to making WHO a worthy and respected player in emergency response, recovery and preparedness is evident. In November just gone, WHO was also told by its country representatives that they want to be more prepared for and active in emergencies, and that being ready for crises was a priority.

This is all to say that the importance WHO places in its humanitarian work is evident, and constantly expanding, and it offers an opportunity you, as our partners, to continue working together in order to respond to the health challenges people face during humanitarian crises.