

Nahda Makers Organisation (NMO)

Initial Audit – Summary Report - 2026/05/19

1. General information

1.1 Organisation

| Type | Mandates | Verified |
|---|--|--|
| <input type="checkbox"/> International <input checked="" type="checkbox"/> National <input type="checkbox"/> Membership/Network <input type="checkbox"/> Direct Assistance <input type="checkbox"/> Federated <input type="checkbox"/> With partners | <input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input type="checkbox"/> Advocacy | <input checked="" type="checkbox"/> Humanitarian <input checked="" type="checkbox"/> Development <input type="checkbox"/> Advocacy |
| Legal registration | National NGO | |
| Head Office location | Aden, Yemen | |
| Total number of organisation staff | 135 | |

1.2 Audit team

| | |
|-----------------------------|--------------------------------|
| Lead auditor | Daniel Rogers |
| Second auditor | - |
| Third auditor | - |
| Observer | - |
| Expert | - |
| Facilitator Auditors | Akram Alsarory Hayat Nosair |

1.3 Scope of the audit

| | |
|-------------------------------------|--|
| CHS:2024 Verification Scheme | Certification |
| Audit Cycle | First cycle |
| Type of audit | Initial Audit |
| Scope of audit | The audit scope is all of NMO's activities including their humanitarian and development programmes, and all of their offices: their Aden head office and all of their sub-offices. |
| Focus of the audit | As an initial audit the focus is on the entirety of the CHS and its application across NMO's work. |

1.4 Sampling*

| | |
|---|---------------------------|
| Sampling unit | Projects |
| Total number of sampling units | 17 |
| Sample size | 5 |
| Total number of onsite visits | 3 |
| Total number of sampling units for remote assessment | 2 |
| Sampling Unit Selection | |
| Random Sampling | Purposive Sampling |
| UNHCR, Protection, shelter and emergency assistance activities for IDPs and returnees in Southern Yemen, Taiz: On site | |
| Yemen Joint Response (Cordaid), FSL and Mental Health, Lahj: On site | |

| | |
|--|---|
| WFP: Not selected , start-up phase | |
| CRS: Not selected , security concerns | |
| Oxfam, humanitarian system transformation: Not selected | |
| | Yemen Humanitarian Fund, protection, shelter and CCCM for IDPs and vulnerable people in Al Khukhah district, Al Hodiedah: Remote |
| | NRC, Displacement and Climate-induced Emergency Response: Remote |
| | Yemen Humanitarian Fund, Life-saving assistance to acutely vulnerable populations and IDPs, addressing the CCCM and protection needs in Al Ma'afer and Jabal Habashi districts in Taiz governorate: Onsite |
| Any other sampling considerations: Security considerations, deteriorating security situation in Yemen, including in Aden where NMO's main office is located. | |
| Sampling risks identified: Partnership work was identified as representing less than 5% of NMO's overall work and for this reason no work delivered by NGO partnerships was included in the sample. However, NMO's draft new strategy includes a greater focus on partnership. | |

**It is important to note that the audit findings are based on a sample of an organisation's activities, programmes, and documentation, as well as direct observation. Findings are analysed to determine an organisation's systematic approach and application of all aspects of the CHS across different contexts and ways of working.*

2. Activities undertaken by the audit team

2.1 Opening Meeting

| | | | |
|-----------------|------------------|---------------------------------------|------|
| Date | 25 November 2025 | Number of participants | 6 |
| Location | Remote | Any substantive issues arising | None |

2.2 Locations Assessed

| Locations | Dates | Onsite or remote |
|---|------------------------|------------------|
| Taiz Office – Al-Majaliya Neighbourhood, Taiz, Yemen | 2 February 2026 | Onsite |
| Taiz – Al-Ma'afer District (Al Munaj site), Taiz, Yemen | 3 February 2026 | Onsite |
| Taiz – Jabal Habshi District (Bandan site), Taiz, Yemen | 4 February 2026 | Onsite |
| Taiz – Salh District (Aljahmalie area), Taiz, Yemen | 4 February 2026 | Onsite |
| Lahj – Tuban district (Bastan 22 younyo), Lahj, Yemen | 5 February 2026 | Onsite |

2.3 Interviews

| Level / Position of interviewees | Number of interviewees | | Onsite or remote |
|----------------------------------|------------------------|------|------------------|
| | Female | Male | |
| Aden Office | | | Remote/Onsite |

| | | | |
|-------------------------------------|---|----|--------|
| Management | 0 | 5 | 5 |
| Staff | 0 | 5 | 5 |
| Taiz Office | | | Onsite |
| Staff | 1 | 5 | 6 |
| Total number of interviewees | 1 | 15 | 16 |

2.4 Consultations with communities

| Type of group or interview and location | Number of interviewees | | Onsite or Remote |
|--|------------------------|------|------------------|
| | Female | Male | |
| Key Informant – Community Leader, Al-Ma'afer District, Taiz, Yemen | | 1 | Onsite |
| FGD 1 – Community Committee (four IDPs and one host community), Al-Ma'afer District (Al Munaj IDP site), Taiz, Yemen | 3 | 3 | Onsite |
| FGD 2 – Project Beneficiaries (Female), Al-Ma'afer District (Al Munaj IDP site), Taiz, Yemen | 8 | | Onsite |
| FGD 3 – Community Members, Al-Ma'afer District, Taiz, Yemen | | 9 | Onsite |
| FGD 4 – Community based protection network volunteers (Female), Al-Ma'afer District (Al Munaj IDP site), Tazi, Yemen | 3 | | Onsite |
| Group Discussion – Protection Volunteers, Al-Ma'afer District, Taiz, Yemen | 5 | | Onsite |
| Group Discussion – Social Workers, Al-Ma'afer District, Taiz, Yemen | 2 | | Onsite |
| Visit to a beneficiary home, Al-Ma'afer District (Al Munaj IDP site), Taiz, Yemen | 3 | | Onsite |
| FGD 5 – Project Beneficiaries (Female), Jabal Habshi District, Taiz, Yemen | 7 | | Onsite |
| Group Discussion – Community Members, Jabal Habshi District, Taiz, Yemen | | 11 | Onsite |
| Group Discussion – Community Committee, Jabal Habshi District, Taiz, Yemen | | 2 | Onsite |
| Visit to beneficiary homes – Jabal Habshi District, Taiz, Yemen | 3 | | Onsite |
| Key Informant Interview - Community Committee Member, Salh District (Aljahmalie), Taiz, Yemen | 1 | | Onsite |
| Group Discussion – Community mix, Salh District, Taiz, Yemen | 2 | 6 | Onsite |
| Group Discussion – Community Members, Salh District, Taiz, Yemen | | 7 | Onsite |
| FGD 8 – House rehabilitation beneficiaries (Female), Salh District (Aljahmalie), Taiz, Yemen | 7 | | Onsite |
| Beneficiary home visit, Salh District (Aljahmalie), Taiz, Yemen | | 2 | Onsite |
| FGD 10: Community committee members, Lahj, Yemen | 1 | 3 | Onsite |
| Key Informant Interview – Community Leader, Tuban District, Lahj, Yemen | | 1 | Onsite |
| FGD 11: Cash Assets Beneficiaries (Female), Lahj, Yemen | 8 | | Onsite |
| Group Discussion – Community Members, Tuban District, Lahj, Yemen | | 13 | Onsite |
| Total number of participants | 53 | 58 | 111 |

2.5 Closing Meeting

| | | | |
|-----------------|------------|---------------------------------------|------|
| Date | 2026/03/16 | Number of participants | 3 |
| Location | Remote | Any substantive issues arising | None |

3. Background information on the organisation

3.1 General information

Nahda Makers Organization (NMO) is a national Yemeni non-governmental organisation providing humanitarian and development assistance to vulnerable communities affected by the ongoing crisis in Yemen. Established in 2012 as a non-profit entity, NMO is registered with Yemen's Ministry of Social Affairs and Labour, and operates under Yemeni law, with its head office coordinating activities across multiple governorates.

In late 2025 NMO undertook a strategic review resulting in a new strategy in early 2026 and a revised organisational staffing structure (see organisational chart below). The new strategy (2026-2028) sets out 5 strategic priorities; Strengthen community-based basic services and resilience systems; Promote sustainable livelihoods and inclusive local economies; Improve co-delivery, governance and local accountability; Encourage social cohesion, protection and dignity in all interventions; Enable learning, information and adaptive capabilities to drive innovation and continuous improvement.

NMO implements programmes in several locations including Lahj, Hadramawt, Taiz, and areas under the Internationally Recognized Government (IRG). The organisation works in both camp and non-camp settings, supporting internally displaced persons and vulnerable host communities. Programming is delivered across multiple humanitarian and development sectors: Food Security and Livelihoods (FSL), Shelter, Camp Coordination and Camp Management (CCCM), Education, Protection, and Governance including localisation initiatives.

The organisation's programming focuses on maintaining food security for crisis-affected populations, building household and community resilience, providing vocational training for skills and income diversification, rehabilitating water facilities to support agricultural production, and addressing urgent shelter needs for displaced populations. In camp settings, NMO establishes community committees through participatory processes to support site management and ensure community voice in decision-making.

NMO partners with United Nations agencies and international non-governmental organisations, while also developing independent programming through Community Based Participatory Plans developed with target communities. The organisation maintains active engagement with humanitarian coordination mechanisms and funding partners. At the time of audit, NMO was managing approximately 17 active projects across its operational areas, positioning it as a medium-sized organisation among national NGOs operating in Yemen.

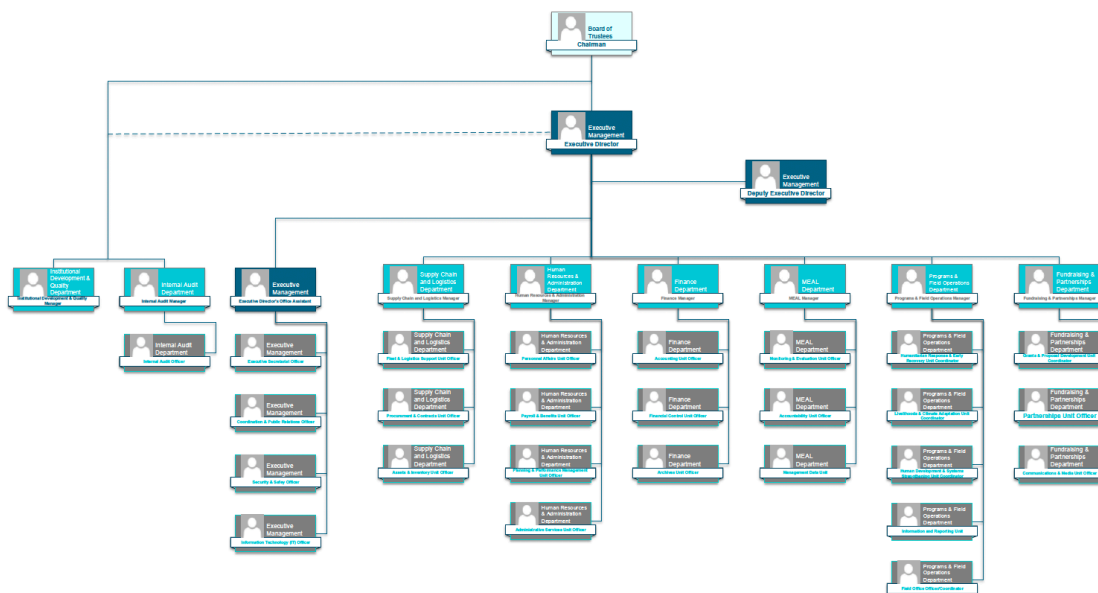
3.2 Governance and management structure

NMO's governance structure consists of a Board of Trustees who meet on a regular basis and oversee the strategic direction of the organisation. The Board of Trustees demonstrates notable gender balance with 60% female membership. The organisation's Statutes and Board Charter define governance roles and responsibilities.

The Board of Trustees meets 4-6 times per year and its operations are governed by the relevant Yemeni laws and procedures. The organisation's risk and development department, and internal audit departments report to the Board, including sharing internal audit reports with the Board. NMO has recently (2026) appointed external consultants to improve the operation of the Board, and to support the relationship between the Executive Director and the Board.

NMO is managed by a management team consisting of the Executive Director, deputy Executive Director and heads of departments. The organisation structure includes dedicated departmental functions: Programmes and Field Operations (overseeing sector manager for shelter, Camp Coordination and Camp Management (CCCM), education, food security and livelihoods, and governance), Finance, HR and Admin, Supply Chain and Logistics, Institutional Development and Quality, Fundraising and Partnerships. The head of programmes supervises sector

managers and coordinates programme delivery across all operational areas. NMO’s main office is based in Aden, with the management, heads of departments as well as most technical staff based there. NMO has three sub-offices based in Lahj, Hadramawt and Taiz Governorates. Sub-offices manage most day to day programme implementation operations, whereas strategic, technical and programmatic leadership is located within the Aden office.



3.3 Work with partner organisations

NMO is an established national NGO that works in partnership with other civil society organisations, community based organisations, government bodies, International NGOs and UN agencies, both as funding partners and consortium members. Current International partners, many of whom are CHS certified, include Cordaid, Catholic Relief Services, Norwegian Refugee Council and Oxfam. NMO also works closely with World Food Programme, UNHCR, UNICEF and UNDP. NMO works as part of the Yemen Joint Response and is a member of national coordination bodies and has been active and vocal in their support for localisation and increased support for national and local organisations in Yemen.

NMO works with national and local government agencies in order to ensure programmes are in line with national and local priorities and standards. NMO is an active member of national and sub-national thematic and sectoral clusters with whom it shares information, where relevant conducts joint needs assessments, and where appropriate applies cluster approved programmatic standards.

NMO also works closely with community structures and local, community based organisations. Currently about 5% of NMO’s programmes are implemented through local NGO and CBO partners. NMO is an active advocate for the localisation agenda within Yemen and is engaged in a number of projects advocating for greater support to local and national NGOs.

NMO uses a Due Diligence tool to assess partners organisations capacity across a range of indicators including governance and management, programme performance, risk management and safeguarding. Capacity development plans are included as part of the due diligence and partnership approach.

4. Overall performance of the organisation

4.1 Internal quality assurance and risk management mechanisms

NMO has well established quality assurance mechanisms, and technical specialists who oversee programme design and delivery, ensuring programmes are designed according to recognised quality standards. NMOs Monitoring, Evaluation and Learning (MEAL) team has developed guidance which is followed by programme staff.

NMO has established multiple mechanisms for internal quality assurance. The MEAL unit, operational since 2018, implements a comprehensive monitoring framework including verification visits by MEAL staff, Output Delivery Monitoring (ODM), Distribution Day

Monitoring (DDM), Post-Distribution Monitoring (PDM) conducted two to three weeks after distributions, field visits by technical staff (minimum three per technical activity) and quarterly desk reviews. The MEAL Policy explicitly links monitoring to adaptive management and decision-making. Regular monitoring visits (by SMT members, MEAL team members, sectoral Project Managers (FSL, WASH, Shelter/CCCM, etc) take place from NMO's Aden office to its other sub-offices and project sites.

NMO's Board of Trustees has oversight over the organisation's Risk Management function. Risk management is managed through an organisational risk matrix which is regularly reviewed and updated by senior management and is periodically reviewed by the organisation's board of trustees. The Risk Matrix is updated to reflect current organisational risks. The Internal Audit function, established in April 2025 and reporting directly into the Board of Trustees (with dotted line reporting to the ED), conducts semi-annual audits covering finance and compliance, supplemented by project-based auditing. An external company was engaged to update the Internal Audit Manual and provide staff training. The unit currently operates with one internal auditor against a budgeted establishment of two. Monthly audit plans are maintained and updated.

Financial quality assurance includes a multi-layer expenditure approval process with segregation of duties: requests undergo accounting review (maximum three reviewers), Finance Manager authorisation, purchase order issuance with dual-signature bank requirements, and financial controller review before final authorisation. Monthly financial closures are conducted. Annual external audits are undertaken as a donor requirement, with project-based donor audits also conducted.

Despite their notable strengths, a number of gaps were identified in NMOs quality assurance mechanisms, particularly in monitoring the full application of policies at field level and monitoring that communities fully understand the PSEAH commitments and expectations of NMO staff and volunteers.

4.2 Level of application of the CHS

NMO's leadership and management demonstrate a strong commitment to the Core Humanitarian Standard on Quality and Accountability (CHS), evidenced by a comprehensive policy framework addressing all nine commitments. The organisation's leadership is committed to quality and accountability, building on previous quality improvement initiatives including ISO certification and regular external audits. NMO takes the application of the CHS seriously and overall has a good level of application of most of the areas of the Standard across its operations, although there are a number of gaps to be addressed. NMO's senior management are committed to ensuring the CHS is applied across the organisation and its work.

Policies and procedures reflect commitment to the CHS; NMO's MEAL policy commits to CHS and Sphere Standards, the CFM Policy aligns explicitly with Commitment 5, the PSEA policy references IASC (Inter-Agency Standing Committee) core principles, and the Data Protection policy embeds do no harm principles.

The organisation performs strongly against a number of CHS commitments, in particular Commitment 2: designing relevant programmes based on local knowledge and need, using transparent and fair criteria to design programmes and applying relevant technical standards.

Commitment 3: supporting community leadership structures, contributing to local resilience and livelihoods and ensuring local participation in decision making.

Commitment 4: applying a do no harm approach.

Commitment 6: excellent coordination and collaboration with other actors to ensure interventions are complimentary and not duplicative.

Commitment 7: strong systems for capturing data and lessons from programmes and for ensuring continuous learning.

Commitment 8: staff are all aware of and have signed the Code of Conduct and mechanisms exist for whistleblowing and reporting of misconduct, staff are well managed in a non-discriminatory manner.

Commitment 9: a coherent organisation approach exists to financial and risk management with systems in place to ensure appropriate use of resources.

There are areas for improvement noted in relation to specific indicators within Commitment 1 (information sharing with communities), Commitment 4 (potential negative effects and data protection) and Commitment 5 (ensuring communities clearly and consistently understand expected behaviour of NMO staff including in relation to SEAH), and Commitment 7

(ensuring projects explicitly draw on lessons from previous work and sharing learning with communities).

4.3 PSEAH

NMO has established a policy framework for PSEAH comprising a dedicated PSEA Policy with zero tolerance commitment, a Code of Conduct explicitly prohibiting sexual exploitation, abuse and harassment with defined consequences, and a sensitive complaints pathway directing SEAH allegations to the Code of Conduct Review Mechanism. The Anti-Corruption Policy includes whistleblower protection provisions applicable to SEAH reporting. The PSEA Policy references survivor-centred approaches and the six IASC core principles.

Staff-facing mechanisms are functional, with confidential reporting channels and retaliation protection documented. Some gaps exist in community-facing PSEAH implementation. The requirement that communities understand expected staff behaviours regarding SEAH, know how to report SEAH concerns, and trust mechanisms to handle such complaints appropriately was not found to be consistently met. This is in large part due to the contextual challenges in relation to cultural sensitivity in speaking openly about PSEAH related topics in the communities with who NMO works and ensuring that alternative methods of sharing this information results in a clear and consistent understanding among people and communities. Given that the reality in some communities in which NMO works means direct discussion of sensitive topics can create a risk to the safety of NMO staff, sensitive complaint channels are integrated and communicated indirectly within broader CFM messaging to maintain community acceptance while preserving access to reporting channels.

4.4 Organisational performance against each CHS Commitment

| Strong points and areas for improvement | Average score* |
|--|----------------|
| Commitment 1: People and communities can exercise their rights and participate in actions and decisions that affect them. | 1.8 |
| <p>NMO demonstrates strong awareness of diverse needs, particularly those of marginalised groups, which is reflected in NMO's policies and guidance and in the practical application of these. Examples of good practice include regularly conducting home visits for people with disabilities and conducting regular information sessions during project implementation where staff are accessible. Local community and project leadership committees are engaged in decision making in relation to NMO's projects, in particular during project implementation stage rather than at project design stage.</p> <p>NMO lacks a standalone disability inclusion policy or specific requirement for collection of data on people with disability. Due to cultural sensitivities, information on PSEAH is not always discussed at community meetings, leading to the risk of inconsistent knowledge among communities on their rights and NMOs obligations in relation to PSEAH.</p> <p>NMO demonstrates good relationships and open and transparent communication with communities, much of which is verbal. There is a lack of consistent use of visual aids to promote complaints and feedback mechanisms which would make this information more widely accessible. NMO seeks consent from people in relation to their participation in communication materials, although this consent is not always well defined or fully understood.</p> | |
| <p>Feedback from communities: Communities consistently feel that their participation in actions and decisions that affect them is valuable and worthwhile. They feel listened to by NMO staff and able to contribute their opinions. NMO request approval from community members before photographs of them are used in communication material and reports, although reports from some community members indicate that this consent is not always fully understood.</p> | |
| Commitment 2: People and communities access timely and effective support in accordance with their specific needs and priorities. | 2.3 |
| <p>NMO has comprehensive MEAL and programme frameworks which guide project design and implementation. Projects are designed and implemented based on consultations on local context, ensuring assistance provided is relevant to communities. NMO ensures its work meets internationally recognised standards. Projects are monitored regularly and consistently, with regular post distribution monitoring. Projects are adjusted based on feedback to ensure they are addressing priority needs. NMO does not systematically conduct SEAH risk and vulnerability analysis across all of its projects.</p> <p>Due to often overwhelmingly high demand, NMO is not always able to meet community needs, but it is able to work with local authorities and other actors through good referral systems where relevant to identify gaps and needs that it is unable to meet.</p> | |
| <p>Feedback from communities: Overall, communities report that NMO programmes are highly relevant and timely, and that NMO staff are attentive to the needs and priorities of communities. Communities reported that NMO is responsive to their needs and delivers appropriate interventions and high quality goods (non-food items) and construction materials.</p> | |
| Commitment 3: People and communities are better prepared and more resilient to potential crises. | 2.8 |
| <p>NMO works closely with local authorities, community leaders and community committees as well as individual project participants to meet community needs and to build resilience to future crises. Additional and more structured support to community leadership would further enhance these efforts, such as more formal training for local leadership</p> | |

structures, and clearer exit strategies for projects in order to strengthen local ownership of projects after NMO projects end. Long term positive effects are reported in relation to NMOs post-war reconstruction efforts, as well as psychosocial support to people affected by the crisis.

Feedback from communities:

Communities report long term positive impacts of NMOs interventions, both on physical infrastructure (roads, houses, etc), and also on psychological and mental wellbeing especially for those facing trauma. Communities express their desire for more support to their leadership structures, to enhance their resilience and capacity.

Commitment 4: People and communities access support that does not cause harm to people or the environment.

2.0

NMO has a comprehensive do no harm policy framework with protection mainstreaming. NMO's MEAL policy requires safety considerations in data collection including consent and confidentiality. NMO's safety and security policy provides a comprehensive staff and operational safety framework. However, examples were found of programmes which do not always identify or mitigate potential or actual negative impacts of programmes on people and the environment, although this appeared to represent isolated cases only. NMO's data protection policy is in line with recognised good practice, although staff would benefit from additional training on its consistent application.

Feedback from communities:

Communities express their gratitude that NMO's projects enhanced the environment and their homes and water supplies. A small number of examples were given where negative environmental impacts could have been better addressed, but overall the feedback was extremely positive.

Commitment 5: People and communities can safely report concerns and complaints and get them addressed.

2.0

NMO has strong policies and established processes for people and communities to report concerns and for complaints to be addressed. NMO has a comprehensive and active CFM (consisting of a toll free number, WhatsApp number, mobile and static feedback and suggestion boxes and face to face interactions with staff) covering complaints, feedback and suggestions which is well used by communities. Communities generally know and use NMO CFM channels; however, the audit found inconsistent understanding and confidence regarding how sensitive SEAH concerns can be reported and addressed. The audit identified a specific gap in the consistency of community understanding of PSEAH / staff conduct expectations and sensitive complaint pathways, partly linked to cultural sensitivities which means that in some communities direct discussion of SEAH can create risks for NMO staff.

Feedback from communities:

Community members consistently report that NMO staff are respectful and highly professional and have a high level of trust in NMO. The Complaints and Feedback Mechanism (CFM) and multiple reporting channels are known by most community members, and many people feel comfortable reporting concerns and feedback to NMO staff verbally. For sensitive cases, the process is less well understood on a consistent basis in all communities, and confidence in reporting PSEAH incidents through NMO's reporting channels is extremely low.

Commitment 6: People and communities access coordinated and complementary support.

3.0

NMO is committed to coordinating its support to communities with other actors. NMO is a national NGO and works well with a number of international NGOs and UN agencies as well as with local authorities, and local community structures, and its work is well coordinated with, and complimentary to, the work of a range of other organisations. NMO is active on national coordination mechanisms and bodies and works to support the capacity of local organisations.

Feedback from communities:

Communities report that NMO coordinates well with other organisations and provides support that compliments and does not duplicate the work of others.

| | |
|--|------------|
| Commitment 7: People and communities access support that is continually adapted and improved based on feedback and learning. | 2.0 |
| <p>NMO has the policies, tools and processes to ensure that it learns from programmes in order to improve performance. Learning is built into the project management cycle and mechanisms are in place to capture learning from projects and to draw on these at project design stage, however this was not found to always be the case in every project. Some lessons remain at the programme site level and do not enter the NMO learning system, which means NMO does not always integrate lessons into future project design. Learning is not systematically shared with communities.</p> | |
| <p>Feedback from communities: Community members express that they are able to contribute to NMO’s project learning and give direct feedback to NMO project staff. But they are unsure whether their input has been considered by NMO’s senior leadership. However, they report that learnings are not shared with them by NMO.</p> | |
| Commitment 8: People and communities interact with staff and volunteers that are respectful, competent, and well-managed. | 2.6 |
| <p>NMO has highly competent and professional staff who are respectful and well-managed. NMO has created a strong set of policies and practices for supporting staff including a comprehensive HR policy, equal opportunity employment policy, safety and security policy, a gender policy which establishes a zero tolerance policy for harassment, and regular performance evaluations. NMO is committed to supporting staff development and invests in the capacity of its staff. NMO has HR systems, policies and processes for staff care and welfare, although some field based staff work in a highly stressful context, potentially putting staff well-being at risk in the future.</p> | |
| <p>Feedback from communities: Communities report a high level of respect for the quality of NMO staff, reporting that staff know their jobs very well act in a professional manner, and do not display any negative or discriminatory behaviours or attitudes. NMO staff are considered highly respectful by community members, who consistently report excellent behaviour of NMO staff.</p> | |
| Commitment 9: People and communities can expect that resources are managed ethically and responsibly. | 2.8 |
| <p>NMO has strong and effective finance and risk management systems in place to ensure that resources are managed responsibility and ethically. The organisation is committed to transparency, compliance and continuous improvement and has strong policies and procedures in relation to finance, procurement and programmes. NMO has recently strengthened its internal audit and risk management functions and processes and is strengthening governance procedures.</p> | |
| <p>Feedback from communities: Communities report that NMO is efficient in its use of resources and do not report any waste or duplication.</p> | |

* Note: Commitments are scored by taking the mean average score of the requirements, i.e. the sum of all the requirement scores in a commitment divided by the number of requirements in that commitment. Except when a major non-conformity/weakness is issued, in this case the overall score for the Commitment is 0 (CHSA Verification Framework – Scoring Grid, 2024).

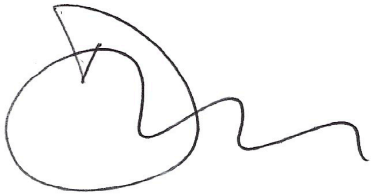
5. Summary of non-conformities

| Corrective Action Request (CAR) | Type | Status | Resolution timeframe |
|--|-------------|---------------|-----------------------------|
| 2026-1.5: NMO does not ensure that communities always give informed consent for use of their images in communications materials. | Minor | New | By the 2029 Renewal Audit |

| | | | |
|---|-------|-----|---------------------------|
| 2026-2.6: NMO does not have a coherent organisational approach to understand SEAH risks and vulnerabilities specific to the communities in which it is working. | Minor | New | By the 2029 Renewal Audit |
| 2026-4.5: NMO does not consistently monitor the implementation of its environmental commitments to reduce negative environmental impacts across all projects. | Minor | New | By the 2029 Renewal Audit |
| 2026-5.2: NMO does not regularly monitor that communities explicitly understand expected behaviours or PSEAH protections. | Minor | New | By the 2029 Renewal Audit |
| 2026-5.5: NMO does not have the capacity to apply appropriate victim/survivor-centred approaches to investigate and address complaints and reports of SEAH. | Minor | New | By the 2029 Renewal Audit |
| 2026-7.3: NMO does not systematically and consistently use monitoring data to guide decision making in relation to new project design. | Minor | New | By the 2029 Renewal Audit |
| 2026-7.4: NMO does not regularly share learning from feedback and monitoring with people and communities. | Minor | New | By the 2029 Renewal Audit |
| Total Number of open CARs | | 7 | |

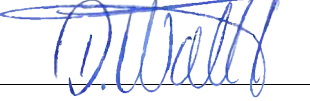
* *Note: The CARs are completed by the audit team based on the findings. The audited partner is required to respond with a Management Response for each CAR to HQAI before a certificate is issued (reference: HQAI Procedure 114).*

6. Lead auditor recommendation

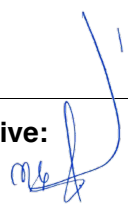
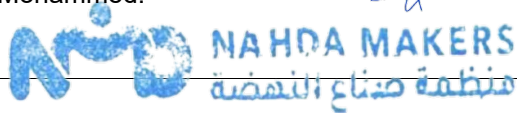
| | |
|--|--|
| <p>CERTIFICATION</p> <p>In my opinion, Nahda Makers Organisation (NMO) demonstrates no major non-conformities in its application of the Core Humanitarian Standard on Quality and Accountability.</p> <p>I recommend certification.</p> | |
| <p>Name and signature of lead auditor:</p>  <p>Daniel Rogers, Senior Auditor</p> | <p>Date and place:</p> <p>Brighton, UK</p> <p>13 May 2026</p> |

7. HQAI decision

| | |
|--|---|
| <p>Final decision on certification:</p> | <p><input checked="" type="checkbox"/> Issued</p> <p><input type="checkbox"/> Refused</p> |
| <p>Start date of the certification cycle: 2026/05/19</p> | |

| | |
|---|---|
| Next audit before 2027/05/26 | |
| Name and signature of HQAI Executive Director: Désirée Walter  | Date and place: Geneva, 26 May 2026 |

8. Acknowledgement of the report by the organisation

| | |
|--|--|
| Space reserved for the organisation | |
| Any reservations regarding the audit findings and/or any remarks regarding the behaviour of the HQAI audit team: <i>If yes, please give details:</i> | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Acknowledgement and Acceptance of Findings: I acknowledge and understand the findings of the audit I accept the findings of the audit | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Name and signature of the organisation's representative: Mohammed Hussein Al-sayed Mohammed.   | Date and place: Aden-Yemen 8/6/2026 |

Appeal

In case of disagreement with the quality assurance decision, the organisation can appeal to HQAI within 14 workdays after being informed of the decision.

HQAI will transmit the case to the Chair of the Advisory and Complaint Board who will confirm that the basis for the appeal meets the appeals process requirements. The Chair will then constitute an appeal panel made of at least two experts who have no conflict of interest in the case in question. The panel will strive to come to a decision within 45 workdays.

The details of the Appeals Procedure can be found in document PRO049 – Appeals Procedure.

Annex 1: Explanation of the scoring scale*

| Scores | Meaning for all verification scheme options, including self-assessment and third-party audits | Guidance for scoring requirements |
|--------|---|--|
| 0 | <p>Your organisation does not currently meet the requirement and indicates a major issue that is so significant that the organisation's ability to meet the commitment is compromised.</p> <p>For third-party auditing schemes:</p> <p>Independent verification: A major weakness.</p> <p>Certification: A major non-conformity that compromises the integrity of the commitment which leads to a major corrective action request (CAR).</p> | <p>To give a score 0, not all of the measurable components of the requirement are verified to be in place and the issue(s) identified are so significant that the organisation's ability to meet the commitment is compromised.</p> |
| 1 | <p>Your organisation does not currently meet the requirement.</p> <p>For third-party auditing schemes:</p> <p>Independent verification: A minor weakness.</p> <p>Certification: A minor non-conformity that compromises the integrity of the requirement which leads to a minor corrective action request (CAR).</p> | <p>To give a score 1, not all of the measurable components of the requirement are verified to be in place.</p> |
| 2 | <p>Your organisation currently meets the requirement, but there is an opportunity for improvement that deserves attention so that the requirement is not compromised in the future.</p> <p>For third-party auditing schemes:</p> <p>Independent verification: Requirement is met with an observation.</p> <p>Certification: Conformity with an observation.</p> | <p>To give a score 2, all measurable components of a requirement are verified to be in place, however, one or more opportunities for improvement are observed which deserve attention so that the requirement is not compromised in the future.</p> |

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| 3 | <p>Your organisation meets the requirement, with organisational systems ensuring it is being met consistently throughout the organisation.</p> <p>For third-party auditing schemes:</p> <p>Independent verification: Requirement is met.</p> <p>Certification: Conformity.</p> | <p>To give a score 3, all measurable components of a requirement are verified to be in place.</p> |
| 4 | <p>Your organisation meets the requirement in an exemplary way, demonstrating innovation and/or special recognition of performance, and organisational systems ensure this high quality throughout the organisation.</p> <p>For third-party auditing schemes:</p> <p>Independent verification: Requirement is met in an exemplary way.</p> <p>Certification: Conformity in an exemplary way.</p> | <p>To give a score 4, all measurable components of a requirement are verified to be in place.</p> <p>In addition, the following must be verified:</p> <ul style="list-style-type: none"> • An organisational system (or systems) that demonstrate an innovative approach to meeting the requirement at a high standard throughout the organisation are in place. <p>and/or</p> <ul style="list-style-type: none"> • The organisation has been awarded special recognition of performance in relation to meeting the requirement at a high standard, and this is built into organisational systems so that the high quality is ensured throughout the organisation. |
| | <p>Guidance notes for scoring commitments:</p> <ul style="list-style-type: none"> • Commitments are scored by taking the mean average score of the requirements, i.e. the sum of all the requirement scores in a commitment divided by the number of requirements in that commitment. • Except when a major non-conformity/weakness is issued, in this case the overall score for the Commitment is 0. | |

* Scoring Scale from the CHSA Verification Framework 2024