



Ministry of Foreign Affairs

Activity: SAA Yamaan voucher program (Phase IV) (10-0001441)

Id	10-0001441
Date	17-11-2025
SAP application number	4000004784

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Key data

Activity basics

Type	Standard
Short name	SAA Yamaan voucher program (Phase IV)
Contract party	Yamaan Foundation for Health & Social Development (30022693)
ODA	Yes
Amount EUR	16500000
Start date	01-06-2021
End date	30-06-2027
Full name	Respecting, Protecting and Fulfilling SRHR in Conflict in Yemen (Dhamar, Sa'ada, and Abyan)
Summary	This activity concerns the 4th phase of support to Yamaan for the implementation of a maternal and neonatal health and family planning voucher program. The preceding phases have the following activity numbers: 25361 (as part of MSY program); 4000000913 (with She Decides funds); 4000002907; and 4000004784 with a €2.5 million top-up in 2023 and a €4 million top-up in 2025.

Activity details

Date of receipt of proposal	01-01-2023
Proposal's reference number	
Budget holder	Ambassade Sana'a (8251SAA)
Limit access	No
Related activity	

Accounting data

SAP application number	4000004784
Funds center	SAA YE SRHR contribution (1703U01040009)

Policy data

Cooperation modality

Technical assistance

CRS code

Policy Keywords

Policy Markers

Equality between men & women

Building institutions & capacity

Explain your choices

Project support

Less than 10 % of the activity budget

13020 Reproductive health care

Principal

Principal

Beneficiary location

Beneficiary location

Country

Location type

Specific location

Country

Yemen

Policy Appraisal

In November 2025, a No-Cost Extension (NCE) was approved, extending the project until June 30, 2026 (MINBUZA-2025.2668927). Please also refer to the Finance and Risks sections for further details. This NCE does not entail any changes to the Logframe.

This is a migrated activity. Please also see the original BEMO (04-05-2021, MINBUZA-2021.344260) and first top-up BEMO (06-06-2023, MINBUZA-2023.933610).

The information below concerns a top-up of this activity for 2025 which totals EUR 4.000.000 (date of receipt of final proposal: 17-02-2025).

Why, What and How

1 Why

1.1 MACS 2023-2026 and Annual Plan 2025

This activity continues to contribute to the strategic result of policy area Social Progress (HGIS 7) of the MACS 2023-2026 and the Annual Plan of 2025:

-The rights of women and girls, in all their diversity, to control and decide on matters related to their sexuality and fertility are better respected, protected and fulfilled through access to information, services and commodities.

The duration of the program is set until 31-12-2025, but Yamaan has almost exhausted the entire budget in 2024. This is primarily due to the increased demand for safe motherhood services and the increased costs associated with delivering these services. This top-up will provide the necessary resources to sustain the activities in 2025 while the organization explores alternative future funding opportunities for these activities, as ways of working at the Ministry of Foreign Affairs will change.

1.2 Context

The Humanitarian Needs and Response Plan (HNRP) 2025 indicates that 19.7 million people in Yemen need health assistance – 10.7% more compared to 2024. About 35% of the 5,345 assessed health facilities are partially functional, while around 5% are non-functional. This is mainly due to lack of financial resources, staff shortages and insufficient equipment and medical supplies. The ratio of health workers to population is low, with only 12 workers per 10,000 people – significantly below the WHO standard of 20 per 10,000 in emergency settings.

An estimated 5.5 million women and girls of reproductive age have limited or no access to reproductive health services, including family planning (FP), antenatal care, safe delivery, postnatal care and emergency obstetric and newborn care. Only 22% of primary health care centers and 50% of district hospitals provide a full range of maternal and newborn health services. The maternal mortality ratio (MMR) in Yemen is estimated at 183 per 100,000 live births – three times the average in the Middle East and North Africa (MENA) region.

Despite the increasingly challenging operating environment, Yamaan is able to improve access to lifesaving SRHR services in both the North and South of Yemen, making it even more crucial to sustain their activities. Between April 2013 and July 2024, the voucher scheme reached 575,853 women and provided 1,651,500 Safe Motherhood (SMH) and Family Planning (FP) services. This included 229,078 safe deliveries and treatment for 343,150 maternal and neonatal complications. Additionally, both the voucher scheme and PBF supported 769 public health facilities across 10 governorates, covering 55 districts. The SRHR external portfolio review, conducted in 2024, also justifies the continued support for Yamaan, highlighting their ability to continue to achieve valuable results in the North and South of Yemen.

2 What

During this top-up phase, Yamaan will continue working towards reducing maternal and newborn morbidity and mortality and maintaining the overall and sub-objectives:

Overall objective

To improve the health system and SRHR of Yemeni women and girls in hard-to-reach areas.

Sub-objectives

1. To improve access of women and girls to improved maternal health and family planning services and information in the target governorates and districts.
2. To strengthen the capacity and supply of the health facilities in the conflict affected districts in the target governorates and districts that would serve vulnerable and affected men, women and children.

Over a period of five months, Yamaan aims to distribute 32,571 SMH vouchers in Aden, Abyan, Dhamar and Sa'adah and 11,154 FP vouchers in in Aden and Abyan. Yamaan will work with an anticipated 155 health facilities – both concerning vouchers and PBF. Six public health facilities in the South will receive support through PBF – four in Abyan and two in Aden – while 149 facilities will be supported through the voucher scheme in Aden, Abyan, Dhamar, and Sa'adah. At these 155 contracted health facilities, 260 additional health workers will be trained in PBF or the voucher scheme.

The Contact Centre will continue to be a key component of the program as well, providing comprehensive SRHR information, facilitating contact with Yamaan for program details or complaints and encouraging voucher holders to access the services.

Please refer to the table below for the number of contracted facilities regarding the Voucher Scheme and PBF in the targeted areas.

Target Governorate	Total number of facilities in the target areas	The estimated number of contracted facilities by the Voucher scheme	The estimated number of contracted facilities by the PBF	Total Contracted
Aden	44	35	2	37
Abyan	98	45	4	49
Dhamar	115	51	0	51
Sa'adah	42	18	0	18
Total	299	149	6	155

2.1 Budget

The requested top-up funding is EUR 4,000,000. For more details, please refer to the approved top-up budget from 10-02-2025, MINBUZA-2025.391880.

3 How

3.1 Vouchers, PBF and the Contact Center

During the top-up phase, the program will work towards achieving the two key outcomes:

Outcome 1 Women, girls, adolescents, and youth, mainly in target areas, have improved access to high-quality SRHR (mainly SMH and FP) services and information.

Outcome 2 Supported public health facilities are able to provide high-quality, comprehensive, inclusive, and non-judgmental MH and FP services to married women and girls.

Via the Voucher Scheme, PBF and the Contact Center, the program increases the use of:

- Skilled birth attendance at delivery – mainly institutional delivery;
- ANC attendance among pregnant women;
- PNC attendance among postpartum women; and
- FP services (South only).

3.1.1 Target areas

Yamaan plans to continue implementing the program in the same target governorates – Dhamar, Sa'adah, and Abyan with and expansion to Aden.

This second top-up will focus on PBF in the South only and the voucher scheme in both the North and South.

Regarding the voucher scheme, the number of target districts in Dhamar will be reduced from nine to four to align with the available budget for the northern region due to a greater focus on the South. The three targeted districts in Sa'adah will remain unchanged.

The target districts have been selected based on population size, density, and number of IDPs; the number of People in Need (PiN), severity of needs, security and access; and the availability and functionality of health facilities providing RH services. Please refer to the table below.

Area of intervention	Original Proposal	First Top-up Proposal	Current Top-up Proposal
Voucher Scheme	Dhamar: 9 districts Sa'adah: 3 districts Abyan: 3 districts	Dhamar: 9 districts (completed end of 2024) Sa'adah: 3 districts (ongoing) Abyan: 3 districts (completed end of 2024)	Dhamar: 4 districts instead of 9 Sa'adah: same 3 districts Abyan: 4 districts (1 district added) Aden: 6 districts (all new)
Performance-based Financing (PBF)	Dhamar (31 facilities) Abyan (3 facilities)	Same (completed by the end of 2024)	South only: Abyan (4 facilities) and Aden (2 facilities)
EmONC Diploma	No	North only (ongoing)	No
Health Facility Rehabilitation	No	Sa'adah (ongoing)	No

3.1.2 Vouchers

As mentioned above, 149 facilities will be supported through the voucher scheme and Yamaan will distribute around 32,571 SMH vouchers in the selected districts of Aden, Abyan, Dhamar and Sa'adah and 11,154 FP vouchers in Aden and Abyan.

Due to restrictions imposed by the authorities in the North, the FP vouchers will be distributed exclusively in the South, targeting married women of reproductive age who are seeking FP services. Pregnant women can also access the FP services after delivery by using the FP coupons included in their SMH vouchers. FP coupons are also not included in the SMH vouchers in the North. The primary beneficiaries will be married women of reproductive age (MWRA) in vulnerable situations and Yamaan will mainly focus on pregnant women who are in their fourth or fifth month of pregnancy, to also align with the programs' timeline. Community health volunteers will identify and prioritize the most vulnerable women through their door-to-door visits using a dedicated assessment tool.

Please refer to the table below for the projected voucher targets.

Governorate	Estimated Target Population	WRA	MWRA	Expected Pregnancies	Expected Deliveries	Total IDPs	2025 SMH Target	2025 FP Target
Aden	1,047,748	261,937	209,550	36,747	34,994	90,262	18,339	8,253
Abyan	368,310	92,078	73,662	12,917	12,301	37,507	6,447	2,901
Dhamar	883,374	220,843	176,675	30,982	29,504	102,639	5,135	0
Sa'adah	455,837	113,959	91,167	15,987	15,225	59,936	2,650	0
Total	2,755,269	688,817	551,054	96,633	92,024	290,344	32,571	11,154

Of the women who receive SMH vouchers in the target districts, it is expected that:

- 75% will use them for safe delivery, of which 90% are institutional deliveries;
- 10% will use them for four ANC visits;
- 65% will use them for at least one ANC;
- 45% will use them for at least one PNC;
- 15% will use them for any FP services (only in the South); and
- 5% will use them for LARC services (only in the South).

Of the women who receive FP vouchers in target districts (South), it is expected that:

- 30% will use them for any FP services; and
- 10% will use them for LARC services.

Please refer to the table below for the expected Safe Motherhood and Family Planning voucher utilization.

Voucher Type	Service Utilization	% utilized of distributed	Total
SMH voucher	Any use of the SMH voucher	85%	27,685
	Any ANC (ANC1 and/or 2,3,4)	65%	21,171
	All four ANCs	10%	3,257
	Delivery services (normal and c-sections)	75%	24,428
	C-sections as a percentage of all deliveries	15%	4,886
	Complicated maternal and neonatal cases	25%	8,143
	Any PNC (PNC1 and/or 2): mother and newborn	45%	14,657
	Any FP service (South only)	15%	3,157
FP voucher	LARCs (South only)	5%	1,052
	Any use of the FP voucher (South only)	50%	5,577
	LARCs (South only)	10%	1,115

The number of vouchers has been determined using a calculation tool based on population size, expected pregnancies, the number of married women of reproductive age (MWRA), projected service utilization and the forecasted budget.

While various factors affect the uptake of services beyond the program's scope, the demand generation activities, such as raising awareness about reproductive health through community health volunteers and the Contact Center, will help increase the usage of the voucher-supported services. The expected utilization and targets were developed based on analyzing the utilization data accumulated over the past phases of the voucher program.

3.1.3 Performance-Based Financing

Yamaan's approach to PBF will continue to be structured while allowing for adjustments to performance targets and incentives based on the context and to ensure effective and satisfactory results. Authorities in target governorates are involved from the start regarding site selection, oversight and disciplinary roles within facilities.

As mentioned earlier, 6 public health facilities will be supported through PBF in the South - four in Abyan and two in Aden - and none in the North. This focus on the South is due to the prioritization of activities in the South and the halt of health system strengthening efforts in the North. The 6 facilities supported are specialized maternal and child health (MCH) centers. Previously, most of the PBF facilities were health units, which typically had fewer measurable service indicators.

The selection of MCH centers reflects a targeted strategy to enhance specialized maternal and child health services. These facilities combine dedicated infrastructure and specialized staff with the standard operations of health centers. The PBF support will increase their capacity to serve more women and children within their catchment areas. Additionally, it could motivate these centers to upgrade to higher-level health facilities, such as basic emergency obstetric care (BEmOC) facilities that operate 24 hours a day. The PBF approach includes clear performance indicators related to assisted deliveries, antenatal and postnatal care visit rates, immunization coverage, and quality of care metrics, with financial incentives directly linked to the achievement of the targets.

Support for the previous PBF facilities ended in 2024, following the standard exit plan - which typically includes two years of support. This process aims to ensure that the facilities can maintain sustainable outcomes independently beyond the program's involvement.

3.1.4 PBF and Vouchers

Building on implementation experiences, Yamaan decided that the voucher and PBF components will now target different health facilities to avoid the operational complexities that can arise when a single facility receives funding from both interventions. However, with expert support Yamaan is currently exploring the best approach to reintegrating both interventions within the same facility. MoFA will continue discussions with Yamaan on this matter.

Please refer to the table below for details on the planned support per district.

Governorate	Districts	Planned Support	Estimated Population	WRA	MWRA	Expected Pregnancies	Expected Deliveries	Total IDPs
Aden	Dar Sa'd	Voucher	197,621	49,405	39,524	6,931	6,600	37,350
Aden	Ash Shaikh Outhman	Voucher	218,129	54,532	43,626	7,650	7,285	12,904
Aden	Al Mansura	Both	213,686	53,422	42,737	7,494	7,137	8,778
Aden	Al Buraiqeh	Voucher	153,838	38,459	30,768	5,395	5,138	25,991
Aden	Attawahi	Voucher	109,437	27,359	21,887	3,838	3,655	2,017
Aden	Craiter	Voucher	155,038	38,759	31,008	5,438	5,178	3,222
Abyan	Lawdar	Voucher	106,805	26,701	21,361	3,746	3,567	16,409
Abyan	Mudiyah	Voucher	51,081	12,770	10,216	1,792	1,706	716
Abyan	Sibah	PBF	25,543	6,386	5,109	896	853	2,730
Abyan	Rassd	PBF	79,793	19,948	15,959	2,799	2,665	824
Abyan	Sarar	PBF	22,161	5,540	4,432	777	740	249
Abyan	Zinjibar	Voucher	41,649	10,412	8,330	1,461	1,391	7,380
Abyan	Khanfar	Voucher	168,776	42,194	33,755	5,919	5,637	13,002
Total South			1,543,557	385,887	308,712	54,136	51,552	131,572
Dhamar	Jahran	Voucher	168,302	42,076	33,660	5,903	5,621	21,600
Dhamar	Jabal Ash sharq	Voucher	109,464	27,366	21,893	3,839	3,656	4,272
Dhamar	Utмах	Voucher	265,156	66,289	53,031	9,300	8,856	21,582
Dhamar	Dhamar City	Voucher	340,452	85,113	68,090	11,940	11,371	55,185
Sa'adah	Sahar	Voucher	263,359	65,840	52,672	9,237	8,796	26,408
Sa'adah	As Safra	Voucher	101,738	25,435	20,348	3,568	3,398	12,372
Sa'adah	Sa'adah	Voucher	90,740	22,685	18,148	3,182	3,031	21,156
Total North			1,339,211	334,804	267,842	46,969	44,729	162,575

3.1.5 The Contact Centre and social media

As mentioned above, the Contact Centre will continue to play a key role in the program as well. It provides a toll-free call center for Yemenis, especially young people, to access confidential, safe, non-judgmental and accurate information about SRHR issues and other health-related matters. Trained male and female counselors provide confidential information to callers nationwide with support from three female medical doctors. It operates daily from 8am to 10pm, except on Fridays when it runs from 2pm to 8pm. Additionally, Yamaan has a popular Facebook page (Seha Talk, formerly Shabab-line) with over 143,000 followers and a mobile app.

The Contact Centre also allows to contact Yamaan for additional information about the program or to register complaints regarding the services provided by healthcare facilities and/or community midwives.

The Contact Centre makes outgoing welcome calls to voucher beneficiaries when they receive their vouchers as well. The purpose is to build a positive relationship, encourage them to seek services at contracted health facilities, and remind them to use the toll-free number for the mentioned purposes. These services are provided through an outbound communication unit within the Contact Centre to support the program in connecting with beneficiaries.

For an overview of the planned deliverables, please refer to the Logframe dated 06-02-2025, MINBUZA-2025.392363.

Results

Global Health & Sexual and Reproductive Health Rights

To protect, promote and fulfil universal access to sexual and reproductive health and rights (SRHR), including HIV/AIDS

Learning questions

What have we learned from this activity with regards to Sexual and Reproductive Health Rights?

Measurements:

- Individual result: Despite the challenging environment, our (local) partners such as Yamaan continue to find effective ways to deliver lifesaving SRHR services in Yemen, and it has become even more important to sustain these activities in the current context.

Comment:

1.c. Boost access to and use of youth-friendly SRH and HIV/AIDS Services

Indicators

1.c.1 # of health facilities that adopt and implement youth-friendly SRH and HIV/AIDS services

Measurements:

- Individual result: 287
Comment: 2.1.1 Voucher and PBF Health Facilities/Providers in the target districts in Dhamar, Sa'adah and Abyan are accredited according to the key quality standards.

287 health facilities were accredited in Abyan, Dhamar and Sa'adah for voucher and PBF projects (255 voucher and 34 PBF; two HF's are enrolled in both voucher and PBF components).

Annual Progress Report Yamaan 2023, page 4.

https://sophia.hag.minbuza.nl/contentmanager?uri=15658303&t=record&lang=ln_english&mbd=false

3.a. Strengthen health systems to support provision of SRH including HIV/AIDS services and safe abortion care

Indicators

3.a.1 # health workers trained in providing SRH services

Measurements:

- Individual result: 168
Comment: Specific trainings were conducted, four topics were covered for 168 service providers.

Annual Progress Report Yamaan 2023, page 15.

https://sophia.hag.minbuza.nl/contentmanager?uri=15658303&t=record&lang=ln_english&mbd=false

1.b. Promote good quality, gender-transformative, comprehensive sexuality education that encourages healthy sexual behavior, that reaches all youth (in and out of school)

Indicators

1.b.1 # of young people reached with comprehensive, correct information on sexuality, HIV/AIDS, STIs, pregnancy and contraception

Measurements:

- Individual result: 24054
Comment: Output 1.4: Access of adolescents and youth to RH information, education, and services (percentage of girls 60%) improved.
2.4.3 # RH health education incoming calls through Contact Centre

24,054 people called the CC for RH information.

Annual Progress Report Yamaan 2023, page 3

https://sophia.hag.minbuza.nl/contentmanager?uri=15658303&t=record&lang=ln_english&mbd=false

Monitoring and evaluation

This is a migrated activity.

Top-up request EUR 4 mln. for 2025 [MINBUZA-2025.391880]

This second top-up period is the same as the current duration of the project. Therefore, no additional monitoring and evaluation components need to be added.

DevPro will continue to provide TPM for the project. It should be noted that the TPM company is currently in the process of obtaining the required permits, and is expected to receive them soon. EKN will monitor closely the situation with TPM for the duration of the project- particularly in the absence of the possibility to conduct field visits.

Please note that an evaluation was already part of the reporting obligations. The AP25 reporting obligation is waived with this request, as we approve the updated proposal, logframe, risk paragraph and budget.

Finance

This is a migrated activity.

No-Cost Extension (NCE) until 30-06-2026

Yamaan has requested a 6-month NCE in October 2025 [MINBUZA-2025.2521345]. The following budget [MINBUZA-2025.2668927] has been approved:

Project number: Aqshyano-400004764
 Project # : E2353
 Project title: Respecting, Promoting and Fulfilling SRHR in Conflict
 Project duration: June 2021 - June 2026 (5 Year)

		TOTAL PROJECT			NORTH REGION			SOUTH REGION			
Result level	Result/Activity	Budget after 2nd top-up (Mar 2025)	Revised Budget Sep 2025	Variance	Commentary	Budget after 2nd top-up (Mar 2025)	Revised Budget Sep 2025	Variance	Budget after 2nd top-up (Mar 2025)	Revised Budget Sep 2025	Variance
OUTCOME 1	Women, girls, adolescents, and youth, mainly in target areas, have improved access to high-quality SRHR (mainly DMM) and FP3 services and information. Qualified safe motherhood services offered by clusters of accredited health providers	12,072,826	12,120,541	-47,715		6,384,749	6,009,306	-24,557	5,688,077	6,111,234	-23,359
Outcome 1.1	Reinforcement to service providers for SRHR services	11,286,844	11,254,884	-31,960		6,327,719	6,327,719	0	2,873,106	2,873,149	-43,043
1.1.1	Unqualified safe motherhood services offered by clusters of accredited health providers	11,232,500	11,232,500	-45,022	To utilize the balance resulting from the impact of the exchange rate issue in the South	6,342,547	6,342,545	-2	2,884,944	2,822,987	-61,957
1.1.2	Safe from vouchers	-24,844	-24,844	0	No change	-26,828	-26,828	0	-5,133	-5,133	0
1.1.3	Family planning services (especially long-term methods) offered by clusters of accredited health providers	10,243	10,243	0	No change	0	0	0	10,243	10,243	0
1.1.4	Rehabilitation to service providers for FP services	6,242	6,242	0	No change	0	0	0	6,242	6,242	0
Outcome 1.3	Vouchers subsidised and promoted to the target group of poor women and girls (including the most vulnerable women: PWs, IDPs, and marginalised)	633,884	631,683	-2,200		444,886	428,863	-16,023	183,771	193,228	-49,557
1.3.1	Voucher - Printing	54,306	53,739	576	The retained change is due to a higher printing price for the small number of DMM vouchers for the second top-up period.	41,809	41,221	588	13,200	5,900	7,300
1.3.2	Voucher - Distribution and Promotion	579,577	577,944	1,633	Impact of the exchange rate in the North (more adoption) and the South (less adoption), considering the top-up is more focused on the South.	402,070	424,632	-22,562	176,576	152,720	23,856
1.3.3	Access of adolescents and youth to SRHR information, education and services (percentage of girls being improved)	221,853	243,501	-21,648		212,828	212,558	270	8,531	38,823	-29,292
Outcome 1.4	Contract Centre Support	225,996	243,190	-17,194	More support has now been initiated under the South Contract Centre due to the expansion in the South to new districts (Dereen in Aden, Edmore in Hajar). Before that, most support was through our Contract Centre in the North.	252,308	252,828	-520	8,930	30,823	-21,893
OUTCOME 2	Supported public health facilities are able to provide high-quality, comprehensive, inclusive, and non-judgemental SRHR and FP services to married women and girls. Accredited health providers offer improved safe motherhood and family planning services	1,501,637	1,437,485	64,152		1,227,623	1,219,300	8,323	274,014	278,085	-4,071
Outcome 2.1	Service provider - Quality Assessment and Quality Audit	217,327	164,479	51,848		134,887	104,563	30,324	82,879	61,908	20,970
2.1.1	Service provider - Quality Assessment and Quality Audit	15,405	14,525	880	Impact of the exchange rate in the South, mainly before the latest devaluation from the Central Bank in Aden to reduce the rate (currently 1 EUR = 879 YER).	42,885	42,886	0	43,390	22,945	20,445
2.1.2	Training - Service providers	132,272	105,952	26,320	No additional training will take place in the North. In addition, the number of facilities included in training in the South was lower than anticipated.	92,707	62,300	30,407	39,964	39,964	0
Outcome 2.2	Health facilities: reinforced against performance (PBF)	364,490	351,420	13,070		363,561	351,551	12,010	128,952	129,811	-859
2.2.1	Performance-based financing (PBF)	364,490	351,420	13,070	No change	363,561	351,551	12,010	128,952	129,811	-859
Outcome 2.3	Functional and efficient Voucher and FPM management	275,475	322,322	-46,847		295,107	227,789	67,318	78,262	95,325	-17,063
2.3.1	Monitoring & Evaluation and Verification	208,927	248,177	-39,250	This is because of the additional period. In addition, we expect the Audit firm to visit Aden, which will incur additional costs.	138,788	167,781	-28,993	18,805	17,218	1,587
2.3.2	Voucher - Verification by external auditors	44,160	44,160	0	No change	30,700	30,700	0	10,410	10,410	0
2.3.3	Contract verification by project team	58,978	33,851	25,127	Material change to be added to TPM	29,626	23,114	6,512	0	0	0
2.3.4	Monitoring & evaluation - regular quality visits, spot-checks, monitoring field visits and biannual meetings	49,836	29,834	20,002	This amount will be sufficient for both regions. The reduction is due to the fact that, when most of the reduction occurs, the main reason for the length, permits and movement restrictions, primarily in Sa'ada, in the South, reduced the impact of the exchange rate and the lower transport costs, mainly in Aden.	33,738	20,842	12,896	8,234	8,471	-237
2.3.5	Contract verification by project team	79,750	111,594	-31,844	On a high-level transport request for many proposed monitoring visits under local transport (both open and closed).	44,443	73,339	-28,896	34,350	82,164	-47,814
2.3.6	Theodory monitoring (TPM) and mid-term review and end-term evaluation	79,750	111,594	-31,844	The amount needed on the mid-term review (conducted in November 2025) to further monitor TPMs for 6 months in both North and South from January to June 2026, including the procurement and delivery approval period, as well as available reallocation in each region, and the costs of the end-term evaluation (ETE). The deficit in the South (€14) was transferred from the South's budget to ensure the amount could be raised out in the North.	66,417	65,437	980	136	4,805	-3,825
2.3.7	International Consultants and External Audit Costs	60,625	73,546	-12,921	This is to cover the annual oversight on the international consultants. There are no further contracts.	60,625	66,028	-5,403	0	0	0
2.3.8	Allowance & Accommodation for International Consultants	516	517	-1	There are no further contracts.	0	0	0	0	0	0
2.3.9	International Flights for International Consultants (Europe to Jordan)	1,724	1,724	0	Reduced as there is no further contract.	1,724	0	1,724	0	0	0
2.3.10	External audit fees	6,665	6,665	0	This is because of the additional period. In addition, we expect the Audit firm to visit Aden, which will incur additional costs.	6,665	6,296	369	0	3,260	-3,260
Outcome 2.4	Enabling health facilities rehabilitated and equipped	299,875	299,875	0		299,875	299,875	0	0	0	0
2.4.1	Rehabilitation and Equipment	299,875	299,875	0	No change	299,875	299,875	0	0	0	0
Outcome 2.5	Health personnel qualified in Enabling Diploma Programme	494,384	494,384	0		494,384	494,384	0	0	0	0
2.5.1	Enabling Diploma Training	494,384	494,384	0	No change	494,384	494,384	0	0	0	0
2.5.2	HR, Training and other Project Operations Costs	2,195,997	2,073,318	122,679		1,797,775	1,797,775	0	317,422	275,535	41,887
2.5.2.1	Local Personnel Costs	1,856,911	1,834,941	21,970		1,668,658	1,668,262	396	287,861	247,889	40,000
2.5.2.2	Local Personnel - Project Management Staff	1,856,911	1,834,941	21,970	No material change.	1,228,975	1,228,975	0	151,111	151,111	0
2.5.2.3	Local Personnel - Support Office	501,643	501,643	0	Material reduction.	39,244	39,244	0	39,244	39,244	0
2.5.2.4	Local Personnel - Support Office	501,643	501,643	0	Material change for the additional period.	47,781	48,388	-607	11,521	15,242	-3,721
2.5.2.5	Infrastructure Costs	59,222	59,222	0		59,222	59,222	0	59,222	59,222	0
2.5.2.6	IT and office equipment (laptops, computers, backup, pc system and others)	11,521	11,521	0	No material change. Material reduction.	11,521	11,521	0	11,521	11,521	0
2.5.2.7	System maintenance and upgrade	6,521	6,521	0	No material change. Material reduction.	6,521	6,521	0	6,521	6,521	0
2.5.2.8	Security equipment and services	11,521	11,521	0	No material change. Material reduction.	11,521	11,521	0	11,521	11,521	0
2.5.2.9	Local Transport and International Travel Costs	204,864	178,451	26,413	No material change. Material reduction.	182,264	162,442	19,822	10,846	16,005	-5,159
2.5.2.10	Local Transport	161,104	134,644	26,460	No change	134,644	134,644	0	23,810	23,810	0
2.5.2.11	Vehicle	40,760	40,760	0	No change	40,760	40,760	0	40,760	40,760	0
2.5.2.12	Allowance & Accommodation for Local Personnel	11,004	11,004	0	Reduced due to limited international travel for the team.	11,004	0	11,004	0	0	0
2.5.2.13	International Flights for Local Personnel (Europe to Jordan & Europe)	61,660	61,660	0	Reduced due to limited international travel for the team.	61,660	0	61,660	0	0	0
2.5.2.14	Other	61,660	61,660	0	Reduced due to limited international travel for the team.	61,660	0	61,660	0	0	0
2.5.2.15	SHO (TOTAL)	15,668,720	15,668,720	0		12,000,147	12,026,461	-26,314	3,678,573	3,665,258	13,315
2.5.2.16	Outcome 2.5	69,240	69,240	0	No change	69,240	69,240	0	69,240	69,240	0
2.5.2.17	TOTAL BUDGET	16,500,000	16,500,000	0		12,630,400	12,646,713	-16,314	3,888,003	3,853,217	34,786

The following main changes have been made:

- In general, because in the North exchange rate have been fixed at a low level, the program has more higher expenses to reach the same results.
- In the South, the impact of the exchange rate and devaluation of the YER led to lower expenses.
- In total, no funds move from South to North or vice versa, except for EUR 16k which is required to do 6 additional rounds of TPM. Monitoring in the North is becoming increasingly difficult. Also in the South, 6 rounds of TPM will be conducted. The ToR for the TPM is approved with the NCE. The previous ToR (submitted as reporting obligation) has been rejected because it did not incorporate this increased monitoring.
- On staff, only support staff working remotely are charged to the Aden Office. As a result, support staff costs were reduced in the South and increased in the North. Conversely, project staff costs increased in the South and decreased in the North.

For all justifications, please refer to MINBUZA-2025.2668927.

Top-up request EUR 4 mln. 2025 [MINBUZA-2025.391880]

The total value of the top-up request is EUR 4,000,000. As the current phase has a North/South split of 88/12, the top-up is 41/59. Therefore, it marks a clear shift to the South, delivering an overall split of 77/23. 79% of the top-up is reserved for outcome 1.

Overall, the ratios of the current phase vis a vis the top up are comparable. The following points indicate the main changes:

- Budget line 1 (Outcome 1): +EUR 3.159.604 (79%), as compared to 71% in the current phase.
- Budget line 2 (Outcome 2): +EUR 363.151 (9%), as compared to 9% in the current phase.
 - o Note that the partner expects that no additional audit fees are required [MINBUZA-2025.391880]
 - o TPM: As Aden is included as a new target governorate, and as the current TPM costs for the existing target governorates prove to be insufficient, additional funds are allocated to TPM [MINBUZA-2025.391880]
 - o Evaluation: No budget for the end evaluation had been included in the current budget. This has been added. In total, TPM and evaluation are 0,5% of the overall budget.
 - o Performance Based Financing: +EUR 91.000 (+43%). This amount is significantly higher as a percentage because the targeted centers are specialized maternal and child health center. As the specialized centers have

higher operating costs, the above average increase can be explained. Also note that only new clinics in the South are targeted.

- Budget line 3 (Operational and staff costs): Staff costs are only 6% of the top up, while 13% of the current phase. In addition to changed ratio, the staff costs per month also decreased.
- Overhead: +EUR 196.432 (5%), as compared to 5% in the current phase.

The changes listed above are accepted.

The full budget can be found in MINBUZA-2025.391880.