



# Care of Afghan Families (CAF)

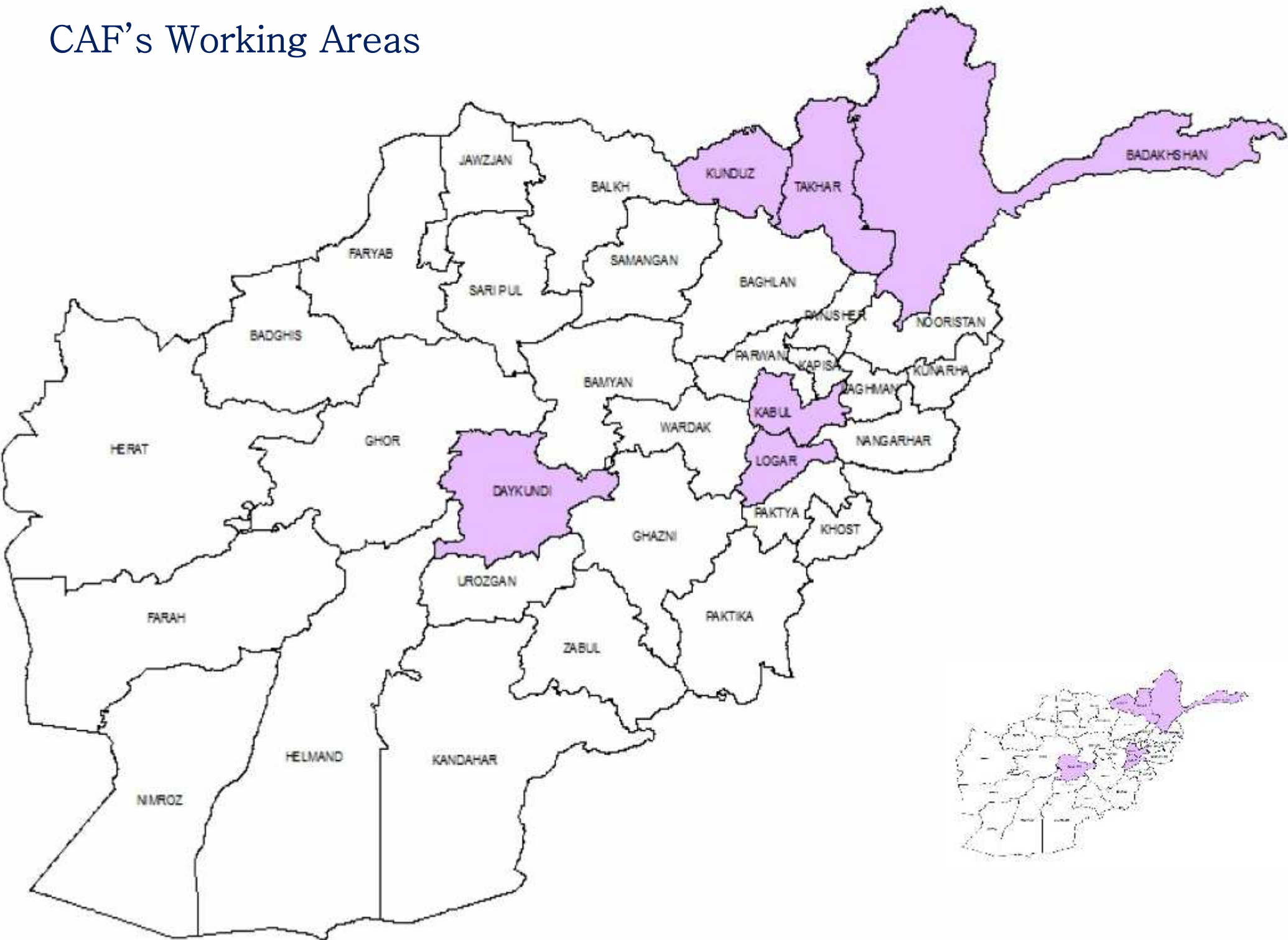
## Annual Report 1393

(Dec 22, 2013 to Dec 21, 2014)





# CAF's Working Areas



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## Message from Director General



It is a great honor and pleasure that Care of Afghan Families (CAF) has passed its twelfth years of experience in the field of health, nutrition, community development and education/research. In this annual report we are happy to present CAF achievements, undertakings, success and challenges within a difficult environment during the past year (2014).

During this year we provided a wide range of relevant services to our beneficiaries, through a variety of channels that responded to the hectic pace of medical practices and diverse needs. We always value the professionalism, efficiency, equity, integrity, accountability, transparency and personal advice and assistance available to us. The leadership and management team of CAF always adopted different approaches and strategies to cope with dynamic situations. Challenges are increasing constantly in contrast to the previous years and despite of all these challenges we tried our best to fulfill our responsibilities and highly consider quality dimension in respect to our projects. It is our duty and obligation to improve the quality of life among Afghan population through our service deliveries.

We have built our future by working hard, being creative and innovative, and establishing of an organizational culture which reward talents and pursues win-to win approach that benefits all.

CAF is greatly indebted to all its donors such as MOPH, other governmental line ministries, USAID, EU, WB, UNICEF, WHO, MSH, GF, WFP, its partners such as BRAC, HNTPO, Save the children, AKF, BARAN, SHDP and other stakeholders for their constant supports in programs implementation which has enabled us to serve our people in a better way and to meet their needs. Meanwhile, CAF highly appreciates its prime partner, the community members, in its operation area for their close support and cooperation.

I would like to acknowledge the significant contribution of CAF's board of trustee and whole CAF team on all the achievements during the year 2014 (corresponding to 1393). My special thanks and appreciation is from the provincial staff, health facilities staff and community volunteers who are the frontline for preventing and fighting against the diseases, injustice and unawareness.

At the end; all what I would like to say and focus on; is that we must try our best to search ways to make this country a place for a better life so that all people live in peace and far from all the diseases, injustice and unawareness. Besides I would like to request all to contribute either financially or morally so that we achieve our shared goals.

Thank you for your supports

M.Naim.Rassa  
Director General  
Care of Afghan Families (CAF)

## ABOUT CAF

*Care of Afghan Families* (CAF) is an Afghan non-Governmental, non-political, not for profit, independent and national Organization. The organization has been established in Kabul, registered in Ministry of Planning of Islamic Transitional Government of Afghanistan in January 1, 2003 with Registration No 946 then based on the requirement of the government in 2005, reregistered in the Ministry of Economy with registration number 68.

CAF is an initiation of senior Afghan staff of several international organizations i.e. Action Contre la Faim (ACF), International Federation of Red Cross and Red Crescent Societies (IFRC), and World Health Organization (WHO). The aim of founders of the organization was to transfer the knowledge, expertise and experiences of international organizations into a national agency to guarantee sustainability of humanitarian interventions in the country.

CAF is governed by its board of trustee comprised of dedicated volunteer members and its board of management comprised of high level staff with postgraduate-education from prestigious institutions.

CAF as an independent organization has its own charter, policies and procedures, developed in line with operating country laws and international standards. CAF Charter, the main governing instrument of the organization, is emphasizing on the effective and efficient use of the resources. CAF financial management policy and procedures is prepared in line with International Accounting Standards (IASs) and Generally Accepted Accounting Principles (GAAP).

### **Mission**

To enable families to fight against poverty, injustice and unawareness.

### **Vision**

“Self-reliant, aware and healthy Afghan Families”.

### **Core Values**

1. Accountability and transparency: able to provide evidences and proves for use of organization's resources.
2. Equity and integrity: Being honest and respect others rights.
3. Professionalism: Having required qualifications and using it in performing a job.
4. Efficiency: Using resources economically and reasonably to deliver effective outputs.

5. Innovation: Applying new methods to deliver better services.
6. Neutrality: CAF provides services considering neutrality.

### **STRATEGIC DIRECTION:**

- a. Health,
- b. Nutrition,
- c. Community development,
- d. Education and research,

The organization has tremendous capacity to develop highly qualified and committed staff to ensure effectiveness, efficiency and sustainability of its projects in the country. Currently CAF has total of 1850 full time paid staff at different levels of the organization from top to lower management and technical positions. CAF also has 2238 Community Health Workers (CHWs) who are delivering basic health services considering the CHW guidelines and strengthening more the referral systems.

CAF is an active member of Country Coordination Mechanism (CCM) and HSS Steering Committee, representing all civil societies in this forum, active member in CPDS (Coordinated Procurement Drugs Supply System ), active member and the steering committee member of Alliance of Health Organization(AHO) which is umbrella organization of most health NGOs working in Afghanistan. CAF has greatly contributed in health sector policy development through participating at different forums. CAF has

contributed in the finalizing of National Standard Treatment Guidelines (STG) for the primary level (as quick reviewer). This Guideline was developed by the Ministry of Public Health (MOPH)-General Directorate of Pharmaceutical Affairs (GDPA) under the financial support of USAID/SPS. In addition, CAF is a member of nutrition cluster and health clusters at the national level and an active member of PHCC meetings at the provincial levels.





## ABOUT CAF'S MANAGEMENT BOARD:

CAF's management board is a professional stand lead and manage the organization activities over the country. The board is empowered by a team of experts with years of experiences, academic knowledge, expertise and professionalism graduated from different prestigious international and national universities on Master of Public Health (MPH), Master of Art (MA), and Master of Business Administration (MBA). The board is the main decision making body for the day to day organization activities. The board is leading organization strategic activities through its experts in public health, public nutrition, community development, environmental health, finance and accounting, human resources management, procurement and pharmaceutical management.





## ABOUT CAF'S DONORS:

CAF is greatly indebted to all the following donors who contributed to the organization's fund during 2014 and enabled us to implement the projects successfully.

### **Unite State Agency for International Development (USAID):**

USAID was the main donor of CAF's activities since its establishment. USAID has made 60% of CAF's funds during 2014 for the implementation of BPHS services in Takhar and Badakhshan provinces channeling through MOPH and community based DOTs project in Takhar and Badakhshan provinces through MSH.



### **MOPH (Trust Fund)/World Bank (WB):**

MOPH was the second largest donor of CAF's activities during 2014. MOPH has made 34.5% of CAF's funds during 2014 for implementation of System Enhancement for Health Action in Transition (SEHAT) projects in Kunduz, Daikundi and Logar provinces through MOPH-Trust Fund and Result Based Financing (RBF) projects in Takhar and Badakhshan provinces.



**Global Fund (GF):** GF has contributed in 2.5% of total CAF's fund during 2014 for implementation of Malaria control programs and TB control programs through BRAC and HNTPO.



Investing in our future

**The Global Fund**  
To Fight AIDS, Tuberculosis and Malaria

**European Committee (EC):** EC contribution in CAF's fiscal year of 1393/2014 has made 2% of total CAF's fund through implementation of BPHS project in Kunduz province.



**World Food Program (WFP):** WFP provided around 1% of CAF's fund during 2014 for implementation of target supplementary feeding program in Takhar and Badakhshan provinces through ex Merlin and current SCI.



**World Health Organization (WHO):** WHO donated around 0.5% of CAF's fund during 2014 for implementation of mobile health teams and scaling up of growth monitoring in Logar province and establishing of incinerator in Daikundi province.



## EXECUTIVE SUMMARY:

Care of Afghan Families (CAF) successfully passed its 11th anniversary with honorable performances to the needy people of Afghanistan in different provinces. During the reporting year, a total of 22 projects have been successfully implemented in 5 provinces of the country funded by different donors. USAID was the main donor of CAF through MOPH trust fund followed by MOPH/WB, Global Fund (GF), European Committee (EC), World Food Program (WFP) and World Health Organization (WHO).

CAF's projects including BPHS, EPHS and other supplementary projects, mainly focused on improving the global health of the target communities. Total of 200 health facilities and 1422 health posts were active and provided BPHS and EPHS services. Around 6,600,000 people have received different services through the catchment areas of CAF during the year which make a utilization rate of 2.23 per annum. Among this figure only 355,193 women of reproductive age received maternal health services. Around 2,000,000 children under five have been screened and provided child health and nutrition services during the year.

In addition, to improve the quality of services provided, a total of 9519 persons including 5517 female and 4002 male staff received different training sessions through MOPH, PEMT, PND, CAF and other stakeholders during the year. Among this figure 2,050 persons received training sessions under cascading plan, 4572 CHWs received initial and refresher trainings by CAF qualified trainers at the national and provincial levels. Furthermore, CAF encouraged its staff in order to attend post graduate degrees such as Master and Doctoral (PHD) programs inside and outside of the country. During the reporting period, two members of CAF have completed the Master degree in prestigious universities outside of the country and other three staff members of CAF have started post graduate degree in Master of Public Health.

Coordination with our partners and stakeholder such as, MOPH, Merlin, SCI, Aga Khan Health Services (AKF-AKHS), WHO, UNICEF, MSH, WFP SHDP, BARAN, Women Affair Department, UNFPA, TDH, Provincial council and governmental agencies at the national and provincial level was the key interventions of the organization.

Total of 132 external monitoring visits and 514 internal monitoring visits have been conducted from the projects through GCMU-MOPH, HEFD-MOPH, Tech-Serve, WHO, PPHD, MSH TB-CARE, RBF-MOPH and CAF.

In addition, quarterly review workshop, gender mainstreaming, emergency preparedness and response and celebration of special days were other main activities of the organization during the year.

The main challenges which CAF faced during the year were, shortage of female professional staff, non-standard infrastructures, insecurity and lack of skilled medical engineers.

## CAF'S STRATEGIC ACTIVITIES:

### HEALTH ACTIVITIES:

Implementation of BPHS project in Takhar province: CAF started BPHS implementation in 2003 as the lead implementer in Takhar province. Currently, CAF is implementing BPHS in total of 57 HF's (3 district BHCs, 1 Prison Health (1011 CHWs) under province. CAF's Total of 2,040,070 health services through during the year. In population is under receiving community through active CHWs. Out of the total beneficiaries 111,719 women received MCH services, and 631,669 under five children screened for childhood disease.



and is the lead BPHS province since 2005. CAF is implementing BPHS in total of hospitals, 1 CHC+, 12 CHC, 34 and 6 SHCs) and 508 HPs USAID/PCH contract in Takhar partner in this project is SHDP. beneficiaries received public active HF's in the province addition, 77% of total coverage of health posts based primary health care

Implementation of BPHS project in Badakhshan province: CAF is the BPHS implementer in Badakhshan province since 2005. Currently, CAF is implementing BPHS in total of 34 HF's (1 district hospitals, 2 CHC+, 5 CHC, 19 BHCs and 7 SHCs) and 269 HPs (526 CHWs) under USAID/PCH



contract in cluster 1 Badakhshan province. CAF's partner in this project is BARAN. Total of 1,162,530 beneficiaries received public health services through active HF's in the province during the year. In addition, 68% of total population is under coverage of health posts receiving community based primary health care





through active CHWs. Out of the total beneficiaries 48,543 women received MCH services, and 357,675 under five children screened for child hood disease.

**Implementation of BPHS project in Logar province:**

CAF is the lead BPHS implementer in JV with a local partner in Logar province since Jan, 2014. Currently, CAF is implementing

BPHS in total of 40 HF's (2 district hospitals, 2 CHC+ , 6 CHC, 18 BHCs, 1 prison health and 11 SHCs) and 202 HPs (365 CHWs) under SEHAT/MOPH trust fund contract in Logar province. CAF's partner in this project is SHDP. Total of 1,500,265 beneficiaries received public health services through active HF's in the province during the year. In addition, 80% of total population is under coverage of health posts receiving community based primary health care through active CHWs. Out of the total beneficiaries 62,478 women received MCH services, and 358,456 under five children screened for child hood disease.



**Implementation of BPHS project in Kunduz province:** CAF is the BPHS implementer in Kunduz province since 2007. Currently, CAF is implementing BPHS in total of 64 HF's (1 district hospitals, 2 CHC+ , 12 CHC, 27 BHCs, 1 prison health, 4 MHT's and 17 SHCs) and 430 HPs (856 CHWs) under SEHAT/MOPH trust fund contract in Kunduz province. CAF is in joint venture partnership model with SCI in this project. Total of 1,785,412 beneficiaries received public health services through active HF's in the province during the year. In addition, 66% of total population is under coverage of health posts receiving community based primary health care through active CHWs. Out of the total beneficiaries 115,110 women received MCH services, and 546,748 under five children screened for child hood disease.



**Implementation of EPHS project in Daikundi province:** CAF is the lead EPHS implementer in Daikundi province since Jan, 2014. Currently, CAF is implementing EPHS in Nilli provincial hospital and community based health programs in 13 HPs (26 CHWs) under SEHAT/WB/MOPH contract in Daikundi province. CAF's partner in this project is SHDP. Total of 118,353 beneficiaries received hospital services through Nilli provincial hospital in the province during the year. In addition, 48% of population from Daikundi center are under coverage of health posts receiving community based primary health care through active CHWs. Out of the total beneficiaries 17,334 women received MCH services, and 30,833 under five children screened for child hood disease.



**Implementation of RBF project in Takhar and Badakhshan provinces:** Result Based

Financing is a supply side health care financing scheme which is integrated in all HFs of Takhar and Badakhshan provinces for further strengthening of quality health services under financial support of World Bank. This project a case control pilot study started since Dec 2010. 29 HFs in Takhar and 17 HFs in Badakhshan are under treatment (case) arm of the study. Amount of 10,147,281 AFS has



been disbursed to the health workers of Takhar province and amount of 5,675,693 AFS has been disbursed to the health workers of Badakhshan province as incentive payment for their outstanding achievements over the set baselines for particular public health indicators during the year.

**Deployment of Mobile Health Teams to Support Un-Served/ Conflict Areas in Logar:** This project started since May 2014 in two districts of Logar province funded by WHO. Two mobile health teams have been established in un-served and conflicted areas of Logar province. The mentioned teams are providing BPHS services as per mobile





health team package to the targeted districts. According to MHT structure 1 doctor 1 Midwife, 1 vaccinator, 1 guard were recruited in each team. The staff received training on BPHS components, emergency preparedness and response mechanism, IPCC, HMIS and Nutrition topics. Total of 11223 beneficiaries received services through the mobile health teams. Out of this, 5000 women received MCH services, 3791

under five children screened for childhood diseases, 942 children 0-23 months and 1522 women of reproductive age received vaccination services.

**Deploying of mobile health team and static facility in Logar province:** As a supplementary support to the BPHS project, CAF is implementing 1 mobile health team and 1 static facility in two districts of Logar province. The project has been started since Dec 2014 through financial support of WHO under OCHA-CHF annual program. The mobile health team and static facility provide necessary public health services to the remote areas of Logar where winter is a challenge for normal access to health services and a burden of public health services. Total of 452 beneficiaries received BPHS services in which 170 children under five screened for childhood diseases, 100 women of reproductive age received MCH services and 28 children under 1 years received vaccination services.



### **NUTRITION ACTIVITIES:**

**Implementation of target supplementary feeding program in Takhar and Badakhshan provinces:** CAF implemented TSFP program in 37 HF's of Takhar and 29 HF's of





Badakhshan provinces under financial support of WFP with partnership of SCI during the year. During project period 8,195 children under the age of five with MAM and 11,086 AM PLW were registered and received food rations according to protocol in Takhar province. Of these, 2,037 under 5 children and 4,765 PLW were exited from the program. Meanwhile, 9274 children under the age of five with MAM and 14663 AM PLW were registered and received food rations according to protocol in Badakhshan province. Of these, 1,678 under 5 children and 2,324 PLW were exited from the program. The performance indicators for Supplementary Feeding program reported as following; SFP <5 - (cure rate 92.2%, Death rate 0.05% and defaulter rate 7.7%); SFP PLWs-(cure rate 91.5%, Death rate 0.08% and defaulter rate 8.4 %). This translates performance on SFP indicator within the sphere standard limits.



### Scaling up of new growth monitoring charts and material in Logar province:

CAF has scaled up the new growth monitoring charts and its related IEC materials in HF's of Logar province under financial support of WHO and technical support of MOPH/PND. A team of trainer from CAF received TOT training in MOPH and scaled it up in all HF's to the necessary health workers. In addition, the provided IEC material, registers and reporting forms

supplied to all HF's for screening and recording of children under 2 years. A total of health workers from different health facilities received training on the use of new growth monitoring chart and screening of children of under 2 years.

### COMMUNITY DEVELOPMENT ACTIVITIES:

**Implementation of community based DOTs in Takhar and Badakhshan provinces:** This project is implemented by



the financial support of TB care MSH/USAID in 45 HF's and 680 CHW's of Badakhshan province and 50 HF's and 690 CHW's of Takhar province. The project aimed to increase TB case detection at the community level and to improve treatment and management of TB patients by CHW's. During the reporting period, total of 21,192 suspected cases identified in Badakhshan and Takhar provinces which make 1% of total OPD of these provinces. Among these figures 4,678 patients have been detected and referred by CHW's. Totally, 1,377 TB smear positives identified and 225 of them were referred by CHW's.

**Implementation of home based management of Malaria in Takhar, Badakhshan and Logar provinces:**

The Global Fund to fight AIDS, Tuberculosis, and Malaria ("Global Fund") has recognized the burden of Malaria in Afghanistan and extended financial assistance to scale up and strengthen Malaria control intervention in the country. This project is implemented by the financial support of GF/BRAC in 40 HF's and 359 HP's of Takhar province, 6 HF's and 28 HP's of Logar province and 20 HF's and 148 HP's of Badakhshan province. The project aimed to cover all strata 1 and 2 provinces under malaria program through establishing of health forums and training of health workers.



Total of 535 health forums conducted in the mentioned provinces through trained CHW's

emphasized on the home based management of Malaria.



**Implementation of community based control of Malaria program through distribution of long lasting insecticidal nets (LLINs) in Takhar, Badakhshan and Logar provinces:**

This project was implemented in high priority areas of Takhar, Badakhshan and Logar provinces under financial support of GF/ HNTPO. During the project, target beneficiaries have been surveyed by trained CHW's and required number of LLINs were



distributed by distributors at the community level. Total of 155,745 LLINs in Takhar, 140,158 LLINs in Badakhshan and 112,755 LLINs in Logar provinces distributed to the target beneficiaries during the project.

**Implementation of TB control program in Takhar province:**

CAF has implemented this project in all HF's through health workers and CHWs under financial support of Global Fund/BRAC. All CHSs and 665 CHWs received refresher training on DOTs strategy and community based implementation of TB-DOTs. The project aimed to improve DOTs strategy through supporting anti-TB drug supply, training of CHSs and CHWs and promotion of TB case notification and TB world days. Total of 186 cases detected by CHWs during the project and amount of 43,524 AFS distributed to CHWs as incentive. The project ended at the Sept 30, 2014.



**Construction of incinerator in Daikundi provincial hospital:** CAF has established a standard incinerator in Nilli provincial hospital of Daikundi province with financial support of WHO during the year. The project was implemented to support environmental health at the provincial level. The project started at May 2014 and ended at June 2014.





### Education/Research Activities:

Implementation of community midwifery education (CME) program in Takhar province: CAF is implementing CME program in Takhar CME School under financial support of USAID/PCH with partnership of AKF. Total of 26 female students are enrolled in the school, are under the training and will be deployed in the needy health facilities of the province. Deployment of the



trained community midwives in the province will further support female health workers of the human resource collection of the province. The program is carrying through qualified and experts trainers using AMNEAB principles and standards.



## MAJOR ACHIEVEMENTS:

### Capacity building programs:

#### Programmed in-service training:

Capacity building is one of the main objectives of all projects through which the quality of performance is improved. During the year, 9519 persons including 5517



female and 4002 male staff (235 in Daikundi, 761 in Logar, 4529 in Takhar, 2792 in Badakhshan and 1202 in Kunduz) received training sessions through MOPH, PEMT, PND, CAF and other stakeholders. Among this figure 2,050 persons received training sessions under cascading plan in Logar, Takhar, Badakhshan and

Kunduz provinces, 4572 CHWs received initial and refresher trainings, and 2897 persons received trainings through other stakeholders. Additional to that different capacity building sessions conducted in CAF main and provincial offices as well.

#### On the job training, conferences and seminars

Beside that CAF has its own capacity building programs for management staff. In addition, the organization has training programs for project staff at the office and health facilities level. Weekly technical conference at the health facilities level, annual





workshops at the main office, monthly training sessions at HQ level, Monthly coordination meeting in Kabul with participation of CAF partners, quarterly technical review workshops in Kabul, trainings and on job trainings in both levels supported and



enhanced the knowledge and skills of the staffs. We tried to build the capacity of HF's staff as well as management staff of CAF, we focused on regular supportive supervision of health facilities by trained and expert supervisors in order to ensure in service training.

### Training and workshops outside the country

CAF encouraged its staff in order to attend post graduate degrees such as Master and Doctoral (PHD) programs inside and outside of the country. During the reporting period, two members of CAF have completed the Master degree in prestigious universities outside of the country, one in MA program who is working at head quarter and another in MPH program who is working in Badakhshan province. Furthermore, other three staff members of CAF have started post graduate degree in Master of Public

Health during the reporting year and currently working at head quarter office. Subsequently, CAF is committed to build the

capacity of its staff members through short and medium term programs and workshops inside and outside of the Afghanistan.



### Partnerships:

CAF works in partnership with various actors – community, government, national and international agencies.



Coordination with our partners and stakeholder such as SHDP, BARAN, Merlin, Aga Khan Health Services (AKHS), WHO, UNICEF, MSH, WFP Women Affair Department, UNFPA, TDH, Provincial council and governmental agencies at the national and provincial level was the key intervention of the organization which was made through joint ventures, partnership, meetings, workshops and joint supervision-monitoring of projects in the covering provinces.



### Monitoring and Supervision:

132 external monitoring visits (25 in Takhar, 86 in Badakhshan, 17 in Logar and 4 in Daikundi) conducted by GCMU-MOPH, HEFD-MOPH, Tech-Serve, WHO, PPHD, M&E-MOPH, NTP-MOPH, PLO MOPH, MSH TB-CARE, GDPA MOPH, RBF-MOPH, CCM/MOPH and Ministry of Labor & Social Affairs. There



is 13% increment in the frequency of monitoring visits by MOPH and other stakeholders during 1393 comparing to 1392.

514 internal monitoring visits (244 in Takhar, 182 in Badakhshan, 83 in Logar, 4 in Kunduz and 4 in Daikundi) conducted by CAF HQ and provincial management team.

Action plans have been prepared addressing the findings of the visits and regular follow up is made during the course of the projects. During the year, CAF management focused on quality of visits in order to further improve the quality of health services in the operating provinces.

## Quarterly Review workshop

CAF and its partner NGOs conducted the quarterly review workshop of PCH and SEHAT projects in Kabul. CAF, BARAN and SHDP field offices staff and staff of main office

participated actively in the workshop. The workshop lasted for 3 days. Review of last quarters' performance, lessons learned, plan for the next year and assessment of projects activities were the agendas discussed during the workshop.



female staff, conducting regular meeting about gender awareness, celebration of 8 March/ national woman days at the office level, establishing/maintaining of kindergarten for children of staff and recruitment of a female teacher in kindergarten. The most important gender consideration during the year was increment in the number of female staff in the organization which shows an increase of 178 female staff during the year due to startup of SEHAT projects.

## Emergency response:

Badakhshan, Daikundi and Takhar are the provinces where the people suffer from natural disasters and disease outbreaks.

## Gender activities:

One of the important activities of CAF is struggling to improve Gender equality. Some main activities on improving gender balance during the year were: recruitment of





Being one of the main implementers of health projects in Takhar, Badakhshan, Logar, Daikundi and Kunduz provinces, CAF has actively contributed in response to the emergencies in these provinces. CAF is an active member of Emergency preparedness and Response (EPR) committee at mentioned provinces and managed to respond effectively and timely in 18 events (7 outbreak and 2 disaster in Takhar and 9 outbreak in Badakhshan) during the year. Furthermore, CAF staff members have contributed amount of 195,000 AFS to the people of Argo district of Badakhshan affected by a land slid tsunami.



**Appreciation and certificates:**

During the reporting period, CAF was recognized and appreciated by MSH for the successful implementation of CB-DOTs project in Takhar and Badakhshan provinces. In addition, Kunduz governmental authorities, Imam Sahib District governor, and Kunduz provincial counsel has appreciated CAFs for proper implementation of BPHS services in the province. Meanwhile, Logar governor and public health director has appreciated CAF's effort in implementation of BPHS project in Logar province. Also, provincial counsel and public health director of Daikundi



has appreciated faithful and quality provincial hospital. Moreover, CAF's Takhar and Logar project managers have been awarded with certificate of appreciation by Takhar governor office, Takhar different authorities and Logar public health directorate respectively. Badakhshan governor and provincial counsel have appreciated CAF's activities in all districts of cluster 1 of Badakhshan through awarding a certificate. In addition, Argo district community and health shura members has appreciated Hafiz Mughul BHC





staffs for their hard working and provision of BPHS services to the needy people of the Argo district. Moreover, Faizia Midwife of Farkhar DH, Firoza Midwife of Chaab CHC, Humaira Midwife of Samti BHC, Rokhshana Midwife of Rustaq DH, Safar Gul Midwife of Darqad CHC and Zainab Midwife of Kafter Ali BHC have been appreciated for their valuable MCH service delivery at the health facilities level by Takhar public health directorate and MOPH, Reproductive Health Directorate through awarding appreciation certificates. Furthermore, Zamanudin EPI officer, Miss Sediqa RH officer, and Hayatuallah Hayat CBHC officer of Takhar province have been appreciated for their rigorous follow up of service delivery in the province by different governmental authorities and have been awarded appreciation certificates.

### **Our challenges:**

CAF's major challenges during the year were:

Having a standard building and infrastructure is a main factor for standardization of

health services. Still some of the infrastructures in the operating provinces are not standardized. 29 HF's out of 57 HF's in Takhar, 17 HF's out of 34 HF's in Badakhshan, Daikundi provincial hospital and 28 HF's out of 40 HF's in Logar provinces do not have standard infrastructures. This problem regularly shared with related stakeholder to find a solution. In the result, currently a new building are in process of construction for Daikundi PH by two private companies through Afghanistan Governmental fund.

Shortage of female professional staff in remote areas of the provinces is a general challenge in the country. Although Ministry of public health has started community

midwifery education and community nursing, the two community based programs, in most of the provinces shortage of female doctors and specialists is still a challenges toward ministry of public health to achieve Millennium Development Goals set for Afghanistan. CAF has taken different approaches to fill this gap through exploring qualified female staff abroad the boundaries of Afghanistan such as Tajikistan to overcome this challenge in its operating area and to contribute to goals of ministry of public health. As a bench-mark from most of the developing countries we recommend the ministry of



public health of the government to apply a post graduate mandatory services of medical graduates (both MDs and specialists) in the remote areas of the country as a long term solution for unavailability of female professional staff in these areas.

Insecurity in some of the area is a big challenge which needs effort of multi sectorial teams to reduce its effect on the route of health service provision.

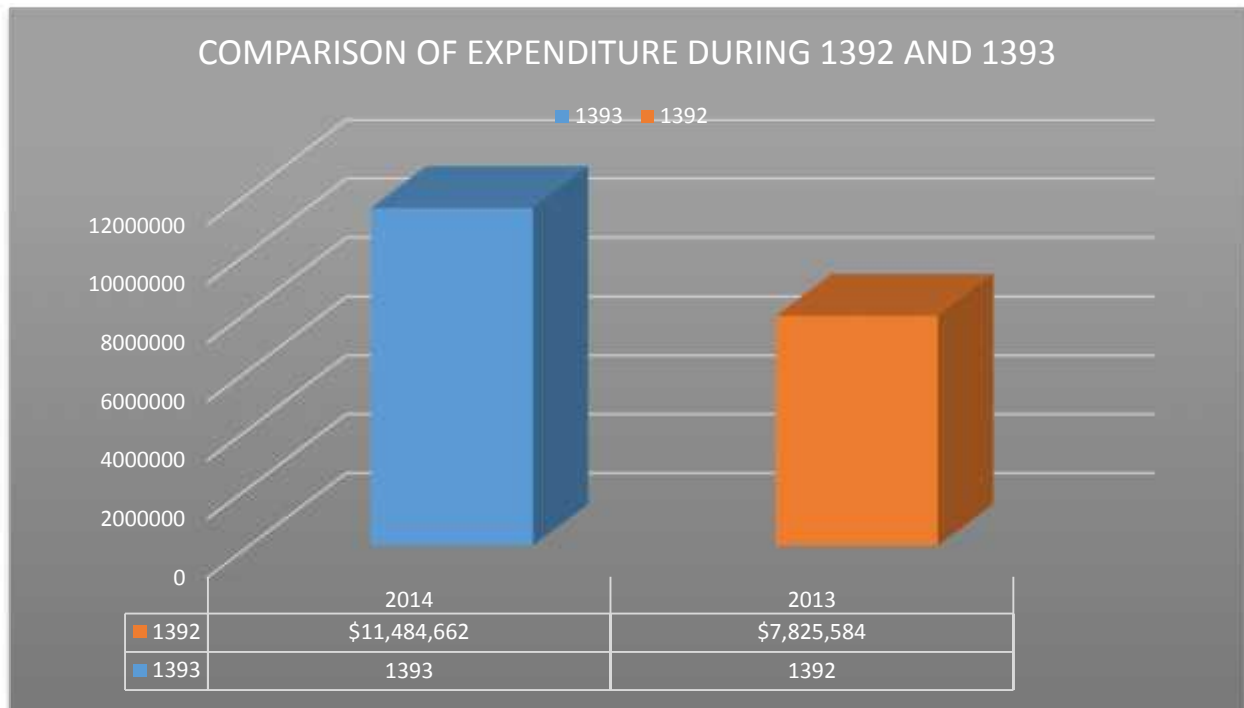
CAF as non-political and community based organization provided uninterrupted services to the needy population of the operating insecure areas such as Logar and Kunduz provinces regardless of their political sides.

Lack of skill and knowledge in medical engineering and shortage of qualified staff for this purpose is another major challenge in BPHS and EPHS projects of CAF in the operating provinces. Acquiring medical engineering knowledge requires long term capacity building programs which the government, ministry of public health, is requested to consider such need of the country in its educational programs.



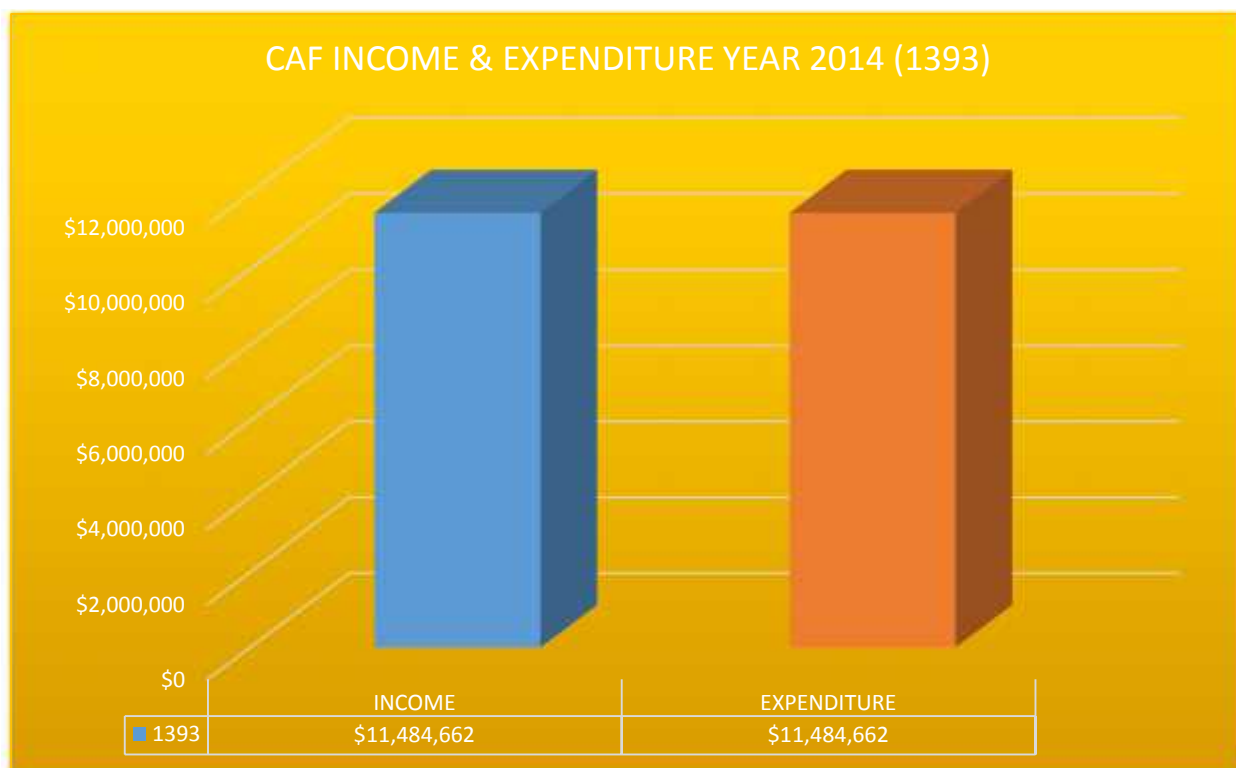
## FINANCIAL SUMMARY:

CAF financial status was satisfactory during the reporting period. CAF could receive grants for its two BPHS and one EPHS projects under SEHAT projects from MOPH (Trust Fund)/World Bank. In addition, CAF signed partnership with some other international NGOs such as SCI for target supplementary feeding program in Takhar and Badakhshan provinces and Chemonics a US based NGO for health resiliency project.



The total Income of CAF for the year 1393/2014 was \$ 11,487,008 USD which is 46% more than its income in 1392 and the total expenditure of CAF for the year 1393/2014 is increased by 47% comparing with the last year. CAF indirect cost rate remained around 10% for the fiscal year 1393/2014 audited by an independent external audit.





In total CAF could collect amount of 22,981,799 AFS withholding Tax from its operation as per Afghanistan income tax law and amount of 22,975,496 AFS paid to government account during the year.

**Care of Afghan Families (CAF)**  
Kabul - Afghanistan

**TAX REPORT FOR THE PERIOD FROM DECEMBER 22, 2013 TO DECEMBER 21, 2014**  
Afghani (AFN)

S/No	Description	Dec 2013 to December 2014			Dec 2012 to Dec 2013		
		Amount Collected	Amount Paid to Government	Balance with CAF	Amount Collected	Amount Paid to Government	Balance with CAF
1	Payroll Tax	16,731,029	16,728,525	2,504	12,660,896	12,663,363	(2,467)
2	Vehicle Tax	2,678,621	2,675,622	2,999	2,149,141	2,149,141	-
3	Purchase Tax	2,571,795	2,570,995	800	1,755,062	1,755,062	-
4	House Tax	1,000,354	1,000,354	-	676,754	676,754	-
<b>GRAND TOTAL</b>		<b>22,981,799</b>	<b>22,975,496</b>	<b>6,303</b>	<b>17,241,853</b>	<b>17,244,320</b>	<b>(2,467)</b>

# FINANCIAL STATEMENTS:

## Statement of Financial Position:

Care of Afghan Families (CAF)

Kabul, Afghanistan

Statement of financial position as at December 21, 2014

	1393 21 December 2014	1393 21 December 2014	1392 21 December 2013	1392 21 December 2013
<u>Note</u>	AFN	US\$	AFN	US\$
<b>ASSETS</b>				
<b>TOTAL ASSETS</b>	<b>166,517,217</b>	<b>2,872,472</b>	95,359,020	1,686,576
<b>LIABILITIES AND FUNDS</b>				
<b>TOTAL LIABILITIES AND FUNDS</b>	<b>166,517,217</b>	<b>2,872,472</b>	95,359,020	1,686,576

## Statement of Comprehensive Income (Profits and Losses):

Care of Afghan Families

Kabul - Afghanistan

Income Statement for the year ended December 21, 2014

	1393 21 December 2014	1393 21 December 2014	1392 21 December 2013	1392 21 December 2013
<u>Note</u>	AFN	US\$	AFN	US\$
<b>INCOME</b>				
	<b>665,901,823</b>	<b>11,487,008</b>	446,385,952	7,866,489
<b>EXPENDITURE</b>				
	<b>665,901,823</b>	<b>11,487,008</b>	446,385,953	7,866,489

## Independent Auditor's Report:

**SMM**

Member Firm  
ACIA International



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### **SAEED METHANI MUSHTAQ AND COMPANY**

**CHARTERED ACCOUNTANTS**

Members of the Institute of Chartered Accountants of Pakistan

#### **INDEPENDENT AUDITORS' REPORT TO BOARD OF GENERAL DIRECTOR**

We have audited the accompanying financial statements of **Care of Afghan Families (CAF)** ("the organization") which comprise the statement of financial position as at **December 21, 2014**, income statement, for the year then ended statement of core fund and a summary of significant accounting policies and other explanatory notes.

#### *Management's Responsibility for the Financial Statements*

Management is responsible for the preparation and fair presentation of these financial statements in accordance with International Financial Reporting Standards. This responsibility includes: designing, implementing and maintaining internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies and making accounting estimates that are reasonable in the circumstances.

#### *Auditor's Responsibility*

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with International Standards on Auditing. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance, whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on our judgement, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error.

In making those risk assessments, we consider internal control relevant to the Organization's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control. An audit also includes evaluating the appropriateness of accounting policies & principles used and reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

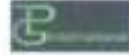




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## SAEED METHANI MUSHTAQ AND COMPANY

CHARTERED ACCOUNTANTS

Members of the Institute of Chartered Accountants of Pakistan

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### *Opinion*

In our opinion, the financial statements give a true and fair view of the state of the Organization's affairs as at **December 21, 2014** and of its surplus for the year then ended in accordance with International Financial Reporting Standards.

In our opinion and to the best of our information and according to the explanations given to us, the statement of financial position and the income statement confirms to the approved accounting standards.

Saeed Methani Mushtaq & Co.,  
Chartered Accountants  
Kabul,  
March 11, 2015.



**Care of Afghan Families (CAF)**  
Kabul, Afghanistan

Statement of financial position as at December 21, 2014

		1393	1393	1392	1392
	Note	21 December 2014	21 December 2014	December 2013	21 December 2013
		AFN	US\$	AFN	US\$
<b>ASSETS</b>					
<i>Current assets</i>					
Receivable from donors	3	54,720,320	938,882	37,840,904	669,277
Security deposits	4	105,626	1,822	104,876	1,855
Other assets	5	6,668,321	120,090	2,564,601	45,359
Cash and cash equivalents	6	101,837,169	1,756,722	51,382,988	908,790
		<u>163,331,436</u>	<u>2,817,517</u>	<u>91,893,369</u>	<u>1,625,280</u>
<i>Non - Current assets</i>					
Operating fixed assets	7	3,185,781	54,956	3,465,651	61,296
<b>TOTAL ASSETS</b>		<u>166,517,217</u>	<u>2,872,472</u>	<u>95,359,020</u>	<u>1,686,576</u>
<b>LIABILITIES AND FUNDS</b>					
<i>Current liabilities</i>					
Deferred grant income - Restricted	8	92,243,544	1,591,229	26,657,656	464,475
Other payables	9	47,729,229	823,344	42,301,569	748,171
		<u>139,972,774</u>	<u>2,414,573</u>	<u>68,959,225</u>	<u>1,212,645</u>
<i>Funds</i>					
Accumulated Core Fund		<u>26,544,443</u>	<u>457,900</u>	<u>26,399,795</u>	<u>473,931</u>
Contingencies & Commitments	10				
<b>TOTAL LIABILITIES AND FUNDS</b>		<u>166,517,217</u>	<u>2,872,472</u>	<u>95,359,020</u>	<u>1,686,576</u>

The annexed notes form an integral part of these financial statements.

Director General  
M.Naim.Rassa



Operation Director  
Dr.Nasir Ahmad Hamid



Care of Afghan Families (CAF)  
Kabul - Afghanistan

Statement of Income and Expenditure for the year ended December 21, 2014

		1393	1393	1392	1392
	Note	21 December 2014	21 December 2014	21 December 2013	21 December 2013
		AFN	US\$	AFN	US\$
<b>INCOME</b>					
Amortization of deferred grant	11	662,049,008	11,420,565	444,348,990	7,830,462
Other income	12	3,852,815	66,442	2,036,962	36,027
		<u>665,901,823</u>	<u>11,487,008</u>	<u>446,385,952</u>	<u>7,866,489</u>
<b>EXPENDITURE</b>					
Direct operating cost	13	377,682,622	6,515,139	344,347,796	6,090,340
Indirect operating cost	14	45,893,636	791,679	34,816,252	615,781
Expenses of sub-grant	15	65,276,044	1,126,031	62,072,373	1,097,849
Expenses of SEHAT projects	16	176,904,873	3,051,662	1,222,075	21,614
		<u>665,757,175</u>	<u>11,484,512</u>	<u>442,458,496</u>	<u>7,825,584</u>
Surplus of income over expenditure for the year		144,648	2,495	3,927,457	40,906
Accumulated Core Fund brought forward		26,399,795	473,931	22,472,338	433,025
Foreign Exchange Translation reserve		-	(18,526)	-	-
Accumulated Core Funds carried forward		<u>26,544,443</u>	<u>457,900</u>	<u>26,399,795</u>	<u>473,931</u>

The annexed notes form an integral part of these financial statements.

Director General  
M.Naim.Rassa



Operation Director  
Dr. Nasir Ahmad Hamid



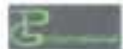




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## SAEED METHANI MUSHTAQ AND COMPANY

CHARTERED ACCOUNTANTS

Members of the Institute of Chartered Accountants of Pakistan

### INDEPENDENT AUDITORS' REPORT ON COMPUTATION OF TAX CALCULATION

Director General  
Care of Afghan Families (CAF)  
Kabul  
Afghanistan

Our audit was conducted for the purpose of forming an opinion on the financial statements taken as a whole. The schedule of computation of tax contained that the organization collected tax is AFN 24,507,434/- and paid tax is AFN 24,501,131/- presented for the purpose of additional analysis and is not required part of the financial statements. Such information has been subjected to the auditing procedures applied in the audit of financial statements and, in our opinion, is fairly stated in all material respects in relation to the financial statements taken as a whole.

Saeed Methani Mushtaq & Co.,  
Chartered Accountants  
March 11, 2015  
Kabul



Care of Afghan Families (CAF)  
Kabul - Afghanistan

**TAX REPORT FOR THE PERIOD FROM DECEMBER 22, 2013 TO DECEMBER 21, 2014**  
Afghani (AFN)

S/No	Description	Dec 2013 to December 2014			Dec 2012 to Dec 2013		
		Amount Collected	Amount Paid to Government	Balance with CAF	Amount Collected	Amount Paid to Government	Balance with CAF
1	Payroll Tax	17,814,538	17,812,034	2,504	12,660,896	12,663,363	(2,467)
	Kabul	4,459,518	4,457,014	2,504	3,986,104	3,986,104	-
	Takhar	5,236,766	5,236,766	-	4,761,191	4,761,191	-
	Badakhshan	3,558,506	3,558,506	-	3,038,904	3,041,371	(2,467)
	Kunduz	977,632	977,632	-	874,697	874,697	-
	Diakundi	1,419,425	1,419,425	-	-	-	-
	Logar	2,162,691	2,162,691	-	-	-	-
2	Vehicle Tax	2,849,132	2,846,133	2,999	2,149,141	2,149,141	-
	Kabul	237,434	237,434	-	152,435	152,435	-
	Takhar	1,588,887	1,585,888	2,999	1,641,726	1,641,726	-
	Badakhshan	459,664	459,664	-	340,430	340,430	-
	Kunduz	-	-	-	14,550	14,550	-
	Diakundi	101,853	101,853	-	-	-	-
	Logar	461,294	461,294	-	-	-	-
3	Purchase Tax	2,803,277	2,802,477	800	1,755,062	1,755,062	-
	Kabul	1,431,688	1,431,688	-	431,474	431,474	-
	Takhar	464,773	464,773	-	720,867	720,867	-
	Badakhshan	200,314	200,314	-	489,294	489,294	-
	Kunduz	-	-	-	113,427	113,427	-
	Diakundi	482,832	482,032	800	-	-	-
	Logar	223,670	223,670	-	-	-	-
4	House Tax	1,040,487	1,040,487	-	676,754	676,754	-
	Kabul	397,306	397,306	-	204,610	204,610	-
	Takhar	261,548	261,548	-	158,434	158,434	-
	Badakhshan	284,250	284,250	-	278,143	278,143	-
	Kunduz	-	-	-	35,567	35,567	-
	Diakundi	26,389	26,389	-	-	-	-
	Logar	70,994	70,994	-	-	-	-
<b>GRAND TOTAL</b>		<b>24,507,434</b>	<b>24,501,151</b>	<b>6,303</b>	<b>17,241,853</b>	<b>17,244,320</b>	<b>(2,467)</b>

AFS 2504 represent Payroll Tax of Kabul staff which were collected but not paid and will be paid in the next period.

AFS 2999 represent Vehicle transportation Tax in Takhar province which were collected but not paid and will be paid in the next period.

AFS 800 represent purchase tax of Diakundi which were collected but not paid and will be paid in the next period.





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## SAEED METHANI MUSHTAQ AND COMPANY

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### INDEPENDENT AUDITORS' REPORT ON THE SCHEDULE OF COMPUTATION OF INDIRECT COST RATE

Director General  
Care of Afghan Families (CAF)  
Kabul  
Afghanistan

Our audit was conducted for the purpose of forming an opinion on the basic financial statements taken as a whole. The schedule of computation of indirect cost rate contained on page 60 is presented for the purpose of additional analysis and is not a required of the basic financial statements. Such information has been subjected to the auditing procedures applied in the audit of basic financial statements and, in our opinion, is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

Saeed Methani Mushtaq & Co.,  
Chartered Accountants  
March 11, 2015  
Kabul






Care of Afghan Families (CAF)  
Kabul - Afghanistan

**SCHEDULE OF COMPUTATION OF INDIRECT COST RATE  
FOR THE PERIOD ENDED DECEMBER 31, 2014**

PARTICULARS	AMOUNTS IN AFS			
	DIRECT COST	CAPITAL COST	SUB-GRANTEE COST	INDIRECT COST
SALARIES AND BENEFITS	233,692,689	-	-	33,305,594
GOOD AND SERVICES	143,302,433	-	-	12,513,782
ASSETS	-	687,500	-	74,260
SUB-GRANT EXPENSES BARAN	-	-	22,409,840	-
SUB-GRANT EXPENSES SHDP	-	-	39,496,132	-
CAF-BARAN CONSORTIUM EXPENSES	-	-	3,370,072	-
CAF DIRECT EXPENSES PORTION DAIKUNDI	35,766,243	-	-	-
CAF DIRECT EXPENSES PORTION LOGAR	38,647,234	-	-	-
DIRECT EXPENSE FIXED ASSET	-	-	-	-
<b>TOTAL:</b>	<b>471,408,600</b>	<b>687,500</b>	<b>65,276,044</b>	<b>45,893,636</b>

$$\text{INDIRECT COST RATE (RATIO)} = \frac{\text{Indirect Cost}}{\text{Direct Cost}} = \frac{45,893,636}{471,408,600} = 10\%$$

  
  
**Director General**  
 M.Naim.Rassa

  
**Operation Director**  
 Dr.Nasir Ahmad Hamid

**SMMCO**



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## SAEED METHANI MUSHTAQ AND COMPANY

CHARTERED ACCOUNTANTS

Members of the Institute of Chartered Accountants of Pakistan

### INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE

Director General  
Care of Afghanistan Families (CAF)  
Kabul, Afghanistan.

We are engaged to conduct the Audit of the financial statements of CAF for implementations of various project states under activities description from Annexure 1 to Annexure 26 for the period from 22 December 2013 to December 21, 2014 funded by different donors. The financial statements are the responsibility of the CAF's management. Our responsibility is to express an opinion on the financial statements based on our audit.

We conducted our audit in accordance with International Standards on Auditing. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement resulting from violations of agreement terms, laws and regulations that have a direct and material effect on the financial statements.

Compliance with agreement terms, laws and regulations applicable to CAF is the responsibility of CAF's management. As part of obtaining reasonable assurance about whether the financial statements are free of material misstatement, we performed tests of CAF's compliance with certain provisions of agreement terms, laws and regulations. However, our objective was not to provide an opinion on overall compliance with such provisions. Accordingly, we do not express such an opinion.

The result of our tests disclosed no instances of non-compliance that are required to be report to be reported here under international Auditing standards.

This report is intended for the information of CAF and its stakeholders. However, upon release by CAF this report is a matter of public record and its distribution is not limited.

Saeed Methani Mushtaq & Co  
Chartered Accountants,  
March 11, 2015,  
Kabul.



**Certificates:**





**تحسين نامه**

شماره: ۱۳۹۳/۱۳۹۳

برپاس شایستگی و در انجامی امورات محوله بالاض توجیه جدی بخت بوده بخت و مسنویت مادران این ولایت، ریاست صحت عامه ولایت تماره ساجت تمجیل از روزی بادی مسنون از شما ساجداری نموده و با اعطای این تسنیم همه از خدمات شانه درانی میاید

  
 Dr. Sadiq Pappu - Deputy  
 Reproductive Health Directorate

وزارت صحت عامه  
Ministry of Public Health  
Deputy Minister for Healthcare Services Provision  
ریاست صحت باروری  
Reproductive Health Directorate

The Reproductive Health Directorate, hereby appreciate and praise to Mrs. Humaira for Her active contribution re provision of quality of services for the needy and vulnerable Mothers and Children. And wish her more successes in the future.

  
 Dr. Sadiq Pappu - Deputy  
 Reproductive Health Directorate

**تحسين نامه**

شماره: ۱۳۹۳/۱۳۹۳

برپاس شایستگی و در انجامی امورات محوله بالاض توجیه جدی بخت بوده بخت و مسنویت مادران این ولایت، ریاست صحت عامه ولایت تماره ساجت تمجیل از روزی بادی مسنون از شما ساجداری نموده و با اعطای این تسنیم همه از خدمات شانه درانی میاید

  
 Dr. Sadiq Pappu - Deputy  
 Reproductive Health Directorate

وزارت صحت عامه  
Ministry of Public Health  
Deputy Minister for Healthcare Services Provision  
ریاست صحت باروری  
Reproductive Health Directorate

The Reproductive Health Directorate, hereby appreciate and praise to Mrs. Safargul for Her active contribution re provision of quality of services for the needy and vulnerable Mothers and Children. And wish her more successes in the future.

  
 Dr. Sadiq Pappu - Deputy  
 Reproductive Health Directorate

وزارت صحت عامه  
Ministry of Public Health  
Deputy Minister for Healthcare Services Provision  
ریاست صحت باروری  
Reproductive Health Directorate

The Reproductive Health Directorate, hereby appreciate and praise to Mrs. Zahrah for Her active contribution re provision of quality of services for the needy and vulnerable Mothers and Children. And wish her more successes in the future.

  
 Dr. Sadiq Pappu - Deputy  
 Reproductive Health Directorate

**تحسين نامه**

محترم حيات الله حيات مسول بخش خدمات صحتی متکی به جامعه یا CBHC دفتر CAF-SHDP بخارا

تلاش های شبانه روزی شما برای عرضه خدمات صحتی با کیفیت برای هموطنان عزیز به خصوص مادران و اطفال این ولایت از طریق انتخاب، تربیه، تجهیز و نظارت کارکنان صحتی جامعه یا CHW ها و تقویه خدمات صحتی متکی به جامعه، قابل قدر بوده رهبری ریاست صحت عامه بخارا از طریق اعطای این تسنیم نامه از شما قدردانی نموده و موفقیت های هرچه بیشتر شما را از خداوند متعال خواهانیم.

  
 Dr. Sadiq Pappu - Deputy  
 Reproductive Health Directorate

## تحسين نامه

اداره ولسوالي، تمام اعضاي شوراي صحي وملت ولسوالي ارگو از كار كرد پرسونل كلنيك حافظه مغل به حمايت دفتر محترم كف خدمات شبانه روزي رابراي ملت ارگو انجام داده اند و از هيچ نوع فداكاري در راستاي خدمت به مردم دريغ نتموده اند اظهار سپاس و شكران مينمايند

با احترام

رئيس شوراي انگشافي

رئيس شوراي صحي

اداره ولسوالي







جمهوری اسلامی افغانستان

وزارت اقتصاد

ریاست مؤسسات غیر دولتی

جواز نامه فعالیت

Islamic Republic of Afghanistan  
Ministry of Economy  
NGOs Department  
Certificate of Registration

Former Registration No: ( ۹۴۶ ) Date / /

New Registration Number: ( ۶۸ ) Date 29/09/2005

To: Care... of... Afghan... Families.....

According to the final decision No: ( 68 ) Dated 29/09/05 of High Evaluation commission of NGOs your Organization is entitled to work in Afghanistan as an NGO.

You shall respect and observe the Afghanistan Constitution, NGO law and the rest of laws and regulations enforced in the Islamic Republic of Afghanistan.

شماره ثبت قبل (۹۴۶) تاریخ / /

شماره ثبت جدید (۶۸) تاریخ ۲۹/۰۹/۰۵

به مؤسسه محترم (رابطت خاڑاره رضوان CAFE)

با اساسی تصویب کمیسیون عالی ارزیابی مؤسسات غیر دولتی

تحت فیصله شماره (۶۸) مورخ ۲۹/۰۹/۰۵ برای مؤسسه شما

اجازه فعالیت در افغانستان منظور است. مؤسسه مکلف است در اجراءات

خویش تمام مواد مندرج قانون اساسی، قانون مؤسسات غیر دولتی

و سایر قوانین و مقررات نافذہ جمهوری اسلامی افغانستان را رعایت نماید.

با احترام

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