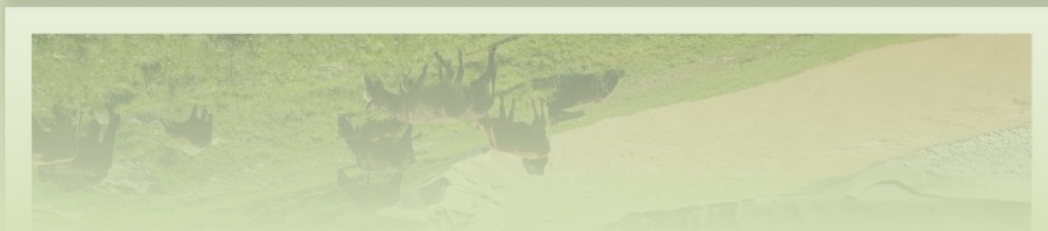




Care of Afghan Families

Annual Report 1396/2017

Dec 21, 2016 to Dec 21, 2017



Care of Afghan Families

CAF

Annual Report 1396/2017

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Message from Director General



It is my great pleasure to present you *Care of Afghan Families* (CAF) annual report for 2017 (corresponding to 1396) that reflect CAF achievements, undertakings, success and challenges. By this year; CAF completed its 15th years of experience; serving the people of Afghanistan through implementation of health, nutrition, community development, hygiene and sanitation, women and youth empowerment and researches projects. During this year, CAF provided a wide range of relevant services to our beneficiaries, through variety of channels that responded to the 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 built our future by working hard, being creative and innovative, and establishing of an organizational culture, which reward talents.

CAF extends its gratitude to, MOPH, MOE, MOF and other governmental line ministries, its donors (World Bank, MSH, Global Fund, WHO, WFP, UNICEF, UNOCHA, UNDP, AKU) its partners (Save the children, AKF, BARAN, & SHDP) and other stakeholders for their constant and continued supports in programs implementation which 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.

Futhermore, CAF extends its thanks to acknowledge the significant contribution of CAF's board of trustee and whole CAF team on all the achievements during the year 2017. My special thanks and appreciation is from the provincial staff, health facilities staff and community health workers who are at the frontline for preventing and fighting against the diseases, injustice and unawareness.

Taken as a whole, despite the continues challenging environment, I would like to request all to contribute either financially or morally to CAF so that we achieve our shared goals.

I look forward to all that we will accomplish together in 2018.

Mohammad Naim Rassa

Director General

Care of Afghan Familie

CAF, a Well Trusted Organization in Community

Care of Afghan Families (CAF) is a non-Governmental, non-political, not for profit, independent and humanitarian 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 the 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).



The organization mission is “to enable families to fight against poverty, injustice and unawareness” and its vision is “Self-reliant, aware and healthy Afghan Families”.

All functions of the organization stand on the bases of the following principles and values, which are:

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.

The organization has tremendous capacity to develop highly qualified and committed staff to ensure effectiveness, efficiency and sustainability of its projects in the country. At the end of fiscal year, CAF had a total of

1349 full time paid staff at different levels of the organization. CAF also had 936 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 HSS Steering Committee, active member in CPDS (Coordinated Procurement Drugs Supply System) forum, 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 greatly contributed in health sector policy development through participating at different forums. CAF has contributed in the finalization 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. Recently, CAF has contributed to the National Health Strategic (NHS) 2016-2020 though revision and inputs on the document. Furthermore CAF has the membership of GBV sub

clusters, Advocacy committee of AWN and National Masculinity Alliance. 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.

CAF'S MANAGEMENT BOARD:

CAF's management board is a professional forum, 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), Master of Business Administration (MBA) and PhD scholar in public health. 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.



CAF’S DONORS:

CAF is greatly indebt to all the following donors who contributed to the organization’s fund during 2017 and enabled us to implement the projects successfully.

MOPH (Trust Fund)/World Bank (WB): The World Bank (WB) through MOPH/trust fund mechanism was the main donor of CAF’s activities during 2017. WB has made 91.84% of CAF’s funds during 2017 for implementation of System Enhancement for Health Action in Transition (SEHAT) projects in Kunduz, Daikundi, Logar and Badakhshan provinces.



United States Agency for International Development (USAID): USAID funded 0.77% of CAF’s activities during 2017. USAID through MSH funded community based DOTs project in Badakhshan provinces.



United Nation Children Fund (UNICEF): UNICEF has contributed around 2.06% of CAF’s fund during 2017 for implementation of Community Led Total Sanitation (CLTS) project in Argo district of Badakhshan province.



World Food Program (WFP): WFP provided around 1.53% of CAF’s fund during 2017 for implementation of target supplementary feeding program in Badakhshan province.



World Health Organization (WHO): WHO through UNOCHA for implementation of First Aid Trauma Posts in Logar and Badakhshan provinces and through AKU for implementation of Polio Seroprevalence Survey in Kandahar province donated around 0.81% of CAF’s fund during 2017.



Global Fund (GF): GF through UNDP has contributed 1.42% of total CAF’s fund during 2017 for implementation of Malaria control programs in Badakhshan, Kunduz and Logar provinces.



Investing in our future
The Global Fund
To Fight AIDS, Tuberculosis and Malaria



Global Alliance for Vaccines and Immunization (GAVI): GAVI contributed around 1.31% of CAF's fund during 2017 to upgrade current sub health centers with vaccination services and to establish two community mobile immunization teams in Badakhshan province.



Action Contra La Faim (ACF): ACF through UNOCHA has contributed around 0.21% of CAF's fund during 2017 in partnering for conducting of a nutrition coverage assessment (SMART survey) in Logar province.



EXECUTIVE SUMMARY:

Care of Afghan Families, CAF, is honored to publish its Annual Reports for the year 1396/2017 to its donors, line ministries, partners and stakeholders who are stepping to improve health of Afghans and to achieve national objectives and goals to reduce morbidity and mortality in the country. CAF could successfully implement its projects in Kunduz, Logar, Daikundi, and Badakhshan provinces during the reporting period, which was financially supported by USAID, WB, EC, MSH, GF/UNDP, UNICEF, WFP, WHO, CDC/AKF, and GAVI. CAF had the opportunity to serve the people of Afghanistan in this year through implementing BPHS projects in Badakhshan, Kunduz and Logar provinces; EPHS project in Daikundi and Logar provinces; and other supplementary projects such as CB-DOTs, target supplementary feeding program, in Badakhshan province, basic life saving treatment of trauma cases in conflict affected areas of Logar and Badakhshan province, malaria control program in Badakhshan, Kunduz and Logar provinces, and community led total sanitation project in Argo district of Badakhshan province.

Project Name	Province	Donor	Start Date	End Date
BPHS SEHAT II	Badakhshan	WB (ARTF)	1-Jul-15	30-Jun-18
BPHS SEHAT I	Kunduz	WB (ARTF)	1-Jan-14	30-Jun-17
BPHS SEHAT I	Logar	WB (ARTF)	1-Jan-14	30-Jun-17
EPHS SEHAT I	Daikundi	WB (ARTF)	1-Jan-14	30-Jun-17
EPHS SEHAT III	Logar	WB (ARTF)	1-Jul-17	1-Jun-18
BPHS SEHAT III	Logar	WB (ARTF)	1-Jul-17	1-Jun-18
EPHS SEHAT III	Daikundi	WB (ARTF)	1-Jul-17	1-Jun-18
CBDOTS	Badakhshan	MSH	1-Oct-16	30-Jun-18
Trauma Posts	Logar/Badakhshan	UNOCHA	1-Oct-16	30-Sep-17
Polio Sero	Kandahar	WHO/AK	25-May-	30-Aug-17

Survey		F	17	
Polio Sero Survey	14 Provinces	CDC/AKF	1-Oct-17	31-Dec-17
TSFP	Badakhshan	WFP	1-Jan-17	30-Jun-18
Malaria Control Program	Logar/Badakhshan/Kunduz	GF/UNDP	1-Apr-16	31-Dec-17
CLTS	Badakhshan	UNICEF	1-Apr-16	30-Apr-18
SMART Survey	Logar	ACF	1-Jan-17	31-Dec-17
HSS-SHCs	Badakhshan	GAVI	1-Apr-17	30-Jun-18

A total of 3,829,533 population received public health services from CAF projects in all provinces. This figure shows a significant contribution (14%) of CAF in provision of public health services to all population of Afghanistan during the year. 2767 persons including 1043 female and 1724 male staff from all provinces received training on BPHS topics during the year. 155 external and 465 internal monitoring sessions conducted in the projects by MOPH, other stakeholders and CAF management staff respectively. There is 12% increase in the number of monitoring by external parties to CAF project comparing to the last year. Quarterly project review workshops; annual review workshop; and operation workshop and training; were other outstanding

CAF honors that provided public health services to 14% population of Afghanistan including men, women, boys, and girls through implementation of BPHS and EPHS during 1396.

activities of the year performed to assess, plan and improve health services provision

in the provinces. One of the important activities of CAF is struggling to improve Gender Equality. The most important gender consideration during the year was activation of women and youth empowerment department of the organization through negotiation with UNWOMEN for establishing of a women protection center in Parwan province. CAF is an active member of national and provincial level forums. Participation in HSS forum, CCM, CBHC, IYCF, and RH task force meetings at the MOPH level; attending health and nutrition cluster meetings; and steering Alliance for Health Organizations are CAF main coordination activities in the year. Besides CAF is active member of PHCC, PHO sub committees, and EPR committee at the

provincial levels. CAF could promote the culture of volunteerism through recruiting of 42 volunteers with 22% deployment rate after their capacity building. CAF could manage 3 emergencies in Badakhshan and 2 emergencies in Logar provinces throughout the year. CAF conducted its trustee board meeting as per the organization charter during the reporting period in which strategic directions of the organization discussed. The governmental authorities and community appreciated our outstanding achievement through provision of certificates of appreciation. Our main challenges during the year were unavailability of standard buildings for some of our health facilities and insecurity in some of the districts in operating provinces.



CAF'S PROJECTS DURING 2017:

Health Projects:

Implementation of BPHS Project in Badakhshan Province: CAF is the lead BPHS implementer in a joint venture form with a local partner in Badakhshan province since July 2015. Total of 45 HF's (1 district hospital, 2 CHC+, 5 CHC, 19 BHCs, and 18 SHCs) and 290 HPs (274 female and 283 male CHWs) are functional and providing BPHS services under SEHAT II/MOPH trust fund contract in Badakhshan cluster 1. Total of 1,304,010 beneficiaries received public health services through active HF's and HPs in the province during the year.

The figure shows 13% increase in the service provision in this year comparing to the last year. Out of the total beneficiaries 95,725 women received MCH services, and 442,559 under five children screened for childhood disease and immunization services. The figures describe that 80% of all women of reproductive age received MCH services while children under five has a utilization rate of 3.64 per person during the year.



Implementation of BPHS Project in Logar province: CAF was the lead BPHS



implementer in a joint venture form with a local partner in Logar province since Jan 2014. Total of 44 HF's (2 district hospitals, 2 CHC+, 6 CHCs, 20 BHCs, 1 prison health and 13 SHCs) and 202 HPs (163 female and 202 male CHWs) are functional and providing BPHS services under SEHAT/MOPH trust fund contract in Logar province. Total of 1,386,873 beneficiaries received public health services through active HF's and HPs in the province during the year. The figure shows 16% increase in the service provision in this year comparing to the last year. Out of the total beneficiaries 96,062 women received MCH services, and 490,010 under five children screened for childhood disease. The figures describe that all women of reproductive age has attended 1.19 times the HF's and all children under five received 6.08 times services in the HF's.

Implementation of BPHS Project in Kunduz Province: CAF was the BPHS implementer in Kunduz province since 2007. CAF implemented BPHS in total of 64 HF's (1 district hospitals, 2 CHC+, 12 CHC, 28 BHCs, 1 prison health, 1 MHTs and 19 SHCs) and 468 HPs (934 CHWs) under SEHAT/MOPH trust fund contract in Kunduz province. CAF was in joint venture partnership model with SCI in this project. Total of 889,685 beneficiaries received public health services through active HF's in



the province during the reporting period (only first six months of 2017). Out of the total beneficiaries 130,918 women received MCH services, and 356,528 under five children screened for childhood disease. The figures describe that 85% of all women of reproductive age received MCH services while children under five has a utilization rate of 2.31 per person during the year.

Implementation of EPHS Project in Daikundi Province: CAF is the lead EPHS implementer in Daikundi province since Jan 2014. CAF implemented EPHS in Nilli provincial hospital and community based health programs in 13 HPs (26 CHWs) under SEHAT/WB/MOPH contract in Daikundi province. Total of 107,764 beneficiaries received hospital services through Nilli provincial hospital in the province during the year. In addition, total of 849,0 patients admitted in the hospital, which is 8% of all outpatients' beneficiaries. There is 12% increase in the admission during this year comparing to the last year. Among these figures 253 women with major obstetric complications admitted in the hospital. Out of the total beneficiaries 9,247 women received MCH services, and 24,981 under five children screened for childhood disease. During the year, total of 1,993 major and minor surgeries performed in the hospital.

Establish First Aid Trauma Posts in Conflict-Affected Areas in Logar and Badakhshan: This project started from Oct

2016 in Mohammad Aga district of Logar province funded by WHO/UNOCHA through health cluster mechanism. The project ended on Sep 2017. CAF was a sub partner of SCI in this project. One stand alone FATP has been established in conflict-affected areas of Logar province and two stand alone FATPs has been established in conflict-affected areas of Badakhshan province with the aim to provide basic life saving trauma treatment and referral to male and female conflict-affected population of the district. The FATPs served for 2116 men, 710 women, 398 boys, and 323 girls beneficiary during the project.

Health System Strengthening (HSS) Project in Badakhshan Province:

CAF with support of MOPH and financial contribution of GAVI-HSS started to upgrade 17 sub health centers in cluster 1 Badakhshan province. Also, three community mobile immunization teams established in very hard to reach areas of the cluster to ensure regular provision of vaccination services to the children and women. The overall objective of the project is to enhance equitable access and improve coverage of immunization services through integrated public health care system with more focus on underserved population. Total of 12167 clients (915 women and 11252 children) received vaccination



services by mobile immunization teams (MIs) and 46193 clients (20681 women and 25512 children) received vaccination services by 17 upgraded SHCs in the province during the reporting period.

Nutrition Activities:

Implementation of Target Supplementary Feeding Program in Badakhshan Provinces:

CAF implemented target supplementary feeding program (TSFP) program in 19 HF's of Badakhshan provinces under financial support of WFP. The project started on first of January 2017 and ended on Dec 2017. During the reporting period 7,967 children under the age of five with moderate acute malnutrition (MAM) and 6,166 acute malnourished

pregnant and lactating women (AM PLW) were registered and received food rations according to protocol in Badakhshan provinces. The performance indicators for Supplementary Feeding program reported as following: SFP children under 5 - (cure rate 98%, Death rate 0.0% and defaulter rate 2.0%), SFP PLWs - (cure rate 100%, Death rate 0.0% and defaulter rate 0.0 %). This indicates performance on SFP indicator are over the SPHERE standards limit which are cure rate >75%, death rate <3%, and defaulter rate <15%.



Community Development Activities:

Implementation of Community Based DOTs in Badakhshan Province:

This project is implemented by the financial support of MSH/USAID under Challenge TB project in 56 health facilities (HF's) and 639 community health workers (CHWs) in Badakhshan province. The project is the continuation of the same contract, which was ended in Sep 2016 and its new phase, which started from Oct 2016 and will continue to June 2018. The project aims to

increase TB case detection at the community level and to improve treatment and management of TB patients by CHWs. During the reporting period, total of 9,743 suspected cases identified in the province. Among all suspected cases 3,266 cases (34% of all) have been detected and referred by CHWs. Totally, 280 TB smear positives identified, which make 3% of suspected cases identified. Among all smear positives case 158 cases (56%) were referred by CHWs. There is a 26% increase in the detection of smear positives by CHW in this year comparing to the last year. At the end of the year total of 419 patients (55% of patients) receives DOTs treatment from

CHWs and 336 patients receives DOTs treatment in health facilities. 10 installed billboards maintained in the crowded areas of the province presenting key TB messages from NTP. TB key messages broadcasted through local media to increase awareness about TB-DOTs. During the project 10 established TB association maintained active and functional. The association purposed to increase awareness and TB case detection at the community level.

Implementation of Community Based Management of Malaria in Badakhshan, Kunduz and Logar Provinces: This project is implemented by the financial support of GF/UNDP in 84 health facilities (Badakhshan 29, Kunduz 27, and Logar 28) and 956 health posts (Badakhshan 290, Kunduz 468, and Logar 198) in Badakhshan, Kunduz, and Logar provinces. The project started from April 2016 and continued to Dec 2017. The project aims to increase malarial case detection at the community level and to improve diagnosis, treatment, and management of malaria patients by CHWs and HFs without lab facilities.

During the reporting period, total of 9,805 suspected cases received parasitological test at all provinces. Totally, 1510 cases confirmed at HPs and HFs level. In addition, during the reporting year two LLIN mass campaigns conducted in Logar and Badakhshan provinces. Total of 110,346 LLIN distributed during the campaign for the purpose of preventing people living in endemic areas against malarial diseases.

Implementation of Community Led Total Sanitation Project in Badakhshan Province:

UNICEF awarded CAF the contract for implementation of CLTS project in Argo district of Badakhshan province. The project will cover 120 villages of the districts with the aim to create an open defecation free environment. Totally, 210 villages triggered where 210 FHAGs and 210 community committees established to follow hygiene and sanitation standards in the 120 villages. Among these villages 120 villages are open defecation free and external team certified 100 villages so far.



Training of CHWs in Badakhshan Province:

Total of 100 female CHWs received training on family planning (FP) during the reporting period. The activity financially supported by UNICEF through ACTD. 100 family planning flip charts distributed to 100 HPs for proper counseling to the clients during family visit.



Education/Research Activities:

Implementation of Community Health Nursing Education (CHNE) Program in Badakhshan Province: CAF is implementing CHNE program in Badakhshan province under financial support of WB through MOPH SEHAT-II project. Total of 24 female students are under the training and expected to be graduated on April 2018. The graduated nurses will be deployed in the needy health facilities of the province. Deployment of the trained community nurses in the province will further support availability of female health workers in the province. The program is carrying out through qualified and expert trainers using CHNE and AMNEAB principles and standards.

SMART Survey in Logar:

CAF signed an agreement with ACF to conduct a Standardized Monitoring and Assessment of Relief and Transition (SMART) nutrition survey of children under five in all districts of Logar province. Total of 776 children enrolled in the survey. The survey shows a GAM of 7.1% and SAM of 1.1% based on weight for height z-score. Prevalence of chronic malnutrition (Stunting) calculated 30.7% based on height for age z-score.

Polio Seroprevalence Survey in Kandahar Province:

CAF with technical assistance of AKU and financial support of WHO conducted a seroprevalence study in Kandahar province. The study is conducted to quantify level of serological protection (seroprevalance) against poliovirus types 1, 2 and 3 in children from province Kandahar Afghanistan. The health facility based study intended to target children aged 6-11 months and 36-48 months. The study was designed to collect data from Mirwais Regional Hospital of Kandahar province with convenience sampling approach. After obtaining informed consent, basic demographic and



vaccination history data were collected, peripheral venipuncture was obtained, and assays to detect poliovirus (PV)–neutralizing antibodies were performed. In total 420 children were consented and enrolled for the participation in study at health facility level. However, 409 children’s data was analyzed. The analysis of the sampled children showed that 20.3% (N=83) of the children are seronegative for at least one PV serotype. Among 20.3% of seronegative children 77.1% (N=64) are aged from 6-11 months, and 22.9% (N=19) aged from 36-48 months. Seroprevalence to PV1 in the 6–11 months old age group is 96.5% and 99.5 in the 36-48 months old age group. Similarly for seroprevalence to PV3 is 93.0% and 98.1% in the 6-11 months and 36-48 months old age group respectively. However, seroprevalence to PV2 among 6-11 months old age group is considerably low of 70.5% and 90.9% in 36-48 months old age group. Further segregation of data demonstrates that seroprevalence to PV1, PV2 and PV3 is 98.2%, 82.9%, and 95.9% in boys respectively while 97.8%, 79.0%, and 94.9% in girls. The commitment of Afghanistan government towards eradicating polio is commendable and they have been able to achieve high seroprevalence of PV antibodies in most children. However, after developing National Emergency Action Plan for Polio Eradication, the government can now focus on the underline causes as well to completely eradicate the polio from the country.



SQUEC Survey in Badakhshan Province:

CAF in partnership with ACF conducted a coverage assessment, boosters, and barriers to access of both OPD-SAM and OPD-MAM services in four districts of Badakhshan province using SQUEAC (Semi-Quantitative Evaluation of Access and Coverage) methodology. The assessment estimates that coverage of SAM treatment (OPD SAM) in Badakhshan province is 30.3% and coverage of MAM treatment (OPD MAM) is 35.8%. The assessment revealed a series of boosters and barriers for the program that suggested recommendations for further improvement.

Polio Seroprevalence Survey in 14 Provinces of Afghanistan:

CAF with technical assistance of AKU and financial support of CDC conducted a seroprevalence study in 14 provinces of Afghanistan. The study is conducted to quantify level of serological protection (seroprevalence) against poliovirus types 1, 2 and 3 in children from target provinces. The health facility based study intended to target children aged 6-11 months and 36-48 months. The study was designed to collect data from Provincial and Regional Hospitals

of target provinces with convenience sampling approach. After obtaining informed consent, basic demographic and vaccination history data were collected, peripheral venipuncture was obtained, and assays to detect poliovirus (PV)–neutralizing

antibodies were performed. In total 2100 children were enrolled for the participation in study at health facility level. The collected data and blood samples transferred to AKU at Karachi and then to CDC office for further analysis and findings.



MAJOR ACHIVEMENTS:

BPHS and EPHS Projects under SEHAT III

In response to the RFP that was issued by MOPH for implementation of BPHS and EPHS projects under SEHAT III, CAF received the honors of implementing BPHS project in Logar province and EPHS project in Daikundi Nilli

hospital and Logar Naib Aminullah Khan hospital from July 2017 for a period of one year. Under the BPHS project, CAF will support 46 HF, 3 FHHs, 232 HPs, and 2 community mobile immunization teams. Under the EPHS project CAF will support Logar provincial hospital with maintaining of 100 beds function hospital and establishing of orthopedic ward. Also, CAF upgraded Daikundi hospital from 82 beds to 100 beds and established a functional orthopedic ward.

Third Party Verification Reports: During the reporting period, the third party evaluated two times

all BPHS and EPHS projects in the country in which CAF received an excellent report of the evaluation. The verification report of third party indicates average of



90% score in HMIS verification and 96% score in HF functionality indicators.

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, 2,767 persons including 1,043 female and 1,724 male staff (191 in Daikundi, 1362 in Logar BPHS, 63 in Logar EPHS, and 1214 in Badakhshan) received training sessions through MOPH, PEMT, PND, CAF and other

stakeholders. Among this figure 966 persons received training sessions under cascading plan in Logar, Daikundi, and Badakhshan provinces. 955 CHWs received initial and refresher trainings, and 846 persons received training from other training providers. Additionally, different capacity building sessions conducted in

CAF main and provincial offices as well.

On the Job Training, Conference 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 meeting at HQ level, Monthly coordination meeting in Kabul with participation of CAF partners, quarterly technical review workshops in Kabul,



trainings, mentoring, coaching 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, mentoring, and coaching of health facilities by trained and expert supervisors to ensure quality service provision.

Training and Workshops Outside the Country

CAF encourage its staff in order to attend postgraduate degrees such as Master and Doctoral (PhD) programs inside and outside of the country. One of CAF director board received his master degree in Master of Public Health

from an Indian Institute, three staff are studying post graduate degree in Master of Business Administration and another one staff is PhD scholar in 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 Afghanistan. CAF has supported and celebrated the master graduate ceremony of one of its main office staff during the reporting period. CAF director general participated in a leadership development workshop in United States during the reporting period. Also, CAF operation director joint a technical workshop in WHO main office at Genva, Switzerland with financial support of AKF to discuss about polio seroprevalence survey findings and results. The organization selected by MOPH to be the CSO representative in Global Financing Facilities (GFF) program for Afghanistan. The organization development director of CAF participated in its central level meeting at Kenya during the year.



Partnerships:

CAF works in partnership with various actors such as community, government, national and international agencies. CAF always received advice and technical assistance of UN agencies in implementation of health and nutrition services that resulted to quality service provision in the country. Coordination with our partners and stakeholder such as MOPH, WHO, UNICEF, MSH, WFP, UNDP, Aga



Khan Health Services (AKHS), SHDP, BARAN, Women Affair Department, Provincial council and other governmental agencies at the national and provincial level was the key

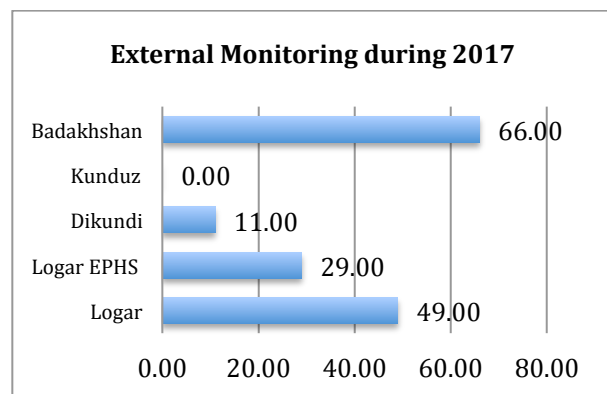
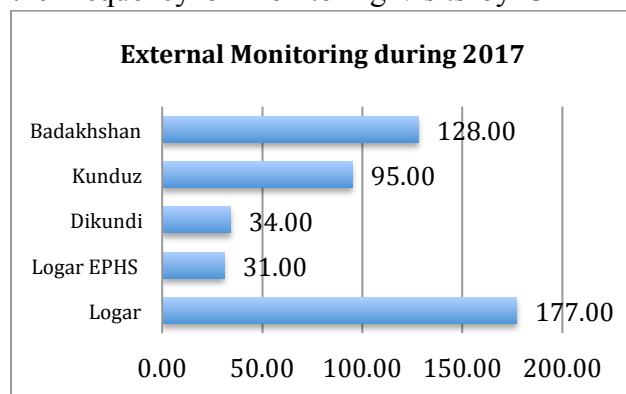
intervention of the organization which made through joint ventures, partnership, meetings, workshops and joint supervision-monitoring of projects during the reporting period.

Monitoring and Supervision:

155 external monitoring visits (49 in Logar BPHS, 66 in Badakhshan, 29 in Logar EPHS and 11 in Daikundi) conducted by GCMU-MOPH, MSH, WHO, PPHD, and M&E-MOPH. There is 12% increment in the frequency of monitoring visits by MOPH and other stakeholders during 1396 compared to 1395. Total of 465 internal monitoring visits (128 in Badakhshan, 177 in Logar BPHS, 34 in Daikundi, 31 in Logar EPHS, and 95 in Kunduz provinces) conducted by CAF HQ and provincial management team. There is 30% decrease in the frequency of monitoring visits by CAF



and its partners during 1396 compared to 1395. Action plans have been prepared addressing the findings of the visits and regular follow up is made during the course of the projects.



Quarterly Review Workshops

CAF and its partner NGOs conducted regular quarterly review workshops of SEHAT projects in Kabul. Review of quarters' performance, lessons learned; plan for the next quarter and assessment of projects activities were the agendas discussed during the workshops.

Annual Review Workshop

Another outstanding activity for the year was annual review workshop of SEHAT projects. The workshop held in Kabul and Badakhshan in which key staff of projects participated, presented their annual achievements, compared achievements with the annual work plan, and planned for the next year. CAF directors and managers participated in the workshop and provided constructive feedbacks and comments for effectiveness and efficiency aspects of the projects.

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 female staff (6 Tajik Female MD in Badakhshan), conducting regular meeting about gender awareness, celebration of 8th March/ international woman days at the office level, and

women and youth empowerment department of the organization. CAF participated in a workshop, which was held in the ministry of women affairs for celebration of national women day. CAF is committed to contribute in the empowerment of



negotiation with UNWOMEN for start up of women protection center in Parwan province. The most important gender consideration during the year was maintaining of

women and girls as a main objective of the ministry of women affairs.

Coordination and Communication:

CAF is an active member



of national and provincial level forums. Our staff participated in health system strengthening (HSS) forums regularly during the year. CAF is a member of CCM forum, CBHC, HMIS, IYCF and RH taskforce meeting at the MOPH level. In addition, CAF is a member of nutrition and health clusters at the national level. CAF leadership and provincial staff participated regularly and actively in quarterly BPHS and EPHS review meetings during the reporting period. Also CAF is among steering committee members of Alliance for Health Organizations (AHO). Besides, CAF is an active member of PHCC meetings at the provincial levels where CAF is operating. CAF staff is members of PHO sub committees – such as RH, CBHC, EPI, and IMCI –

and the EPR committee at the provincial levels.

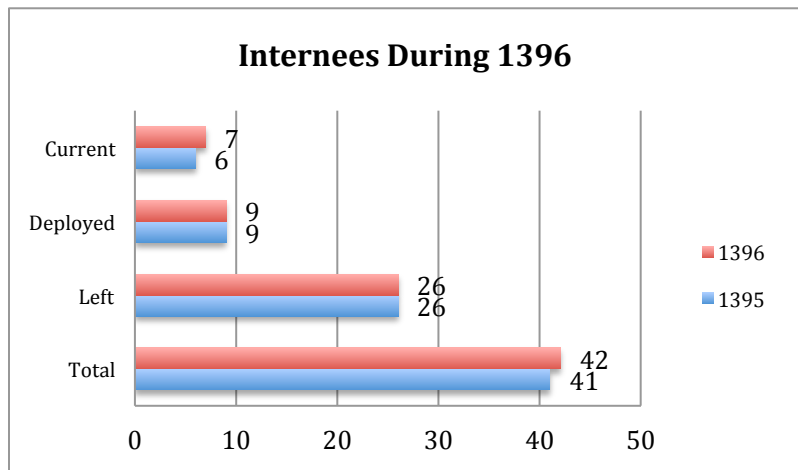
Interenship Program:

Since its establishment, CAF tried to build the capacity of Afghan youths through provision of interenship program in its main and provincial offices. Total of 42 male and female youths employed as volunteer in

necessary knowledge and skills during their stay in CAF and left for joining other organizations.

Trusty Board Meeting:

As per the organization charter, CAF conducted its trustee board meeting with presence of members of trustee board and members of directors in CAF Kabul office during the reporting



different departments of the organization. From all, CAF could deploy 22% of volunteers in its main and provincial offices and 78% of volunteers obtained

period. During the meeting, annual technical report, highlights of the year, and annual financial plan presented to the members of the meeting. The members of the general assembly reviewed and approved CAF strategic plan for 2016-2020 and revised charter of the organization.

Emergency Response:

Badakhshan, Logar, Daikundi and Kunduz are the provinces where the people suffer from natural disasters and disease



outbreaks. Being one of the main implementers of health projects in 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 5 events during the year. During the reporting period, 3 emergencies reported from Badakhshan province and 2 emergencies reported from Logar province, which responded properly.

Appreciation and Recognition:

During the reporting period, CAF was recognized and appreciated by Daikundi, Logar and Badakhshan governmental authorities. Badakhshan provincial rural and rehabilitation directorate (PRRD) awarded CAF CLTS project manager with an appreciation letter for quality and successful implementation of CLTS project in Argo district. Also, Badakhshan provincial council awarded CAF with an appreciation



letter for quality implementation of BPHS project in Badakhshan province. The provincial governor and provincial council of Daikundi province issued certificates of appreciation to CAF for its successful and quality implementation of EPHS in the province.

Our Challenges:

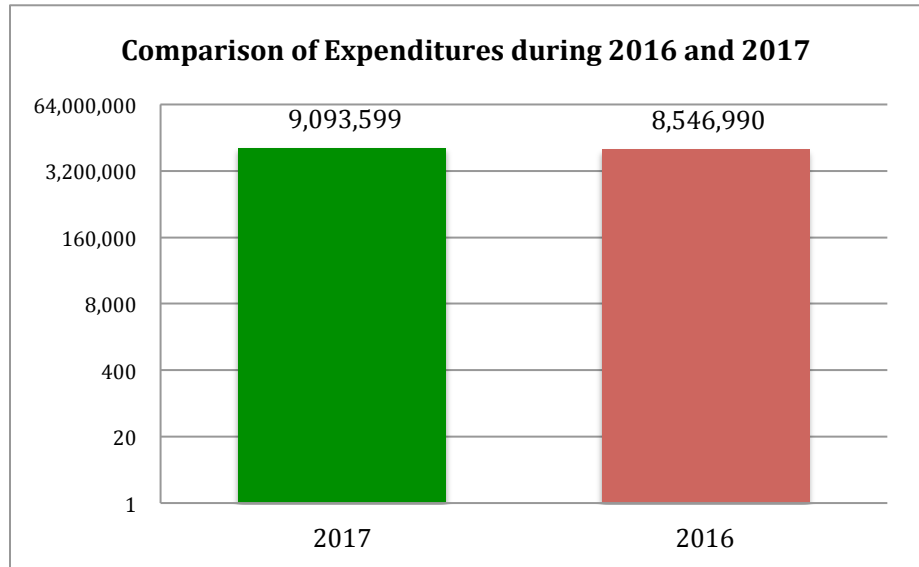
Availability of old and non-standard buildings for HFs in the operating provinces is a challenge to quality implementation of health services. 20 HFs in Logar and 23 HFs in Badakhshan provinces do not have standard building. Also, Daikundi provincial hospital building is not standard and do not have adequate space for proper service delivery as a PH in the province. This problem regularly shared with

related stakeholder to find a solution.

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. 64 health facilities in Kunduz, 45 health facilities in Badakhshan, 1 PH in Daikundi and 46 health facilities in Logar provinces were functional and providing uninterrupted services to the needy population of the provinces.

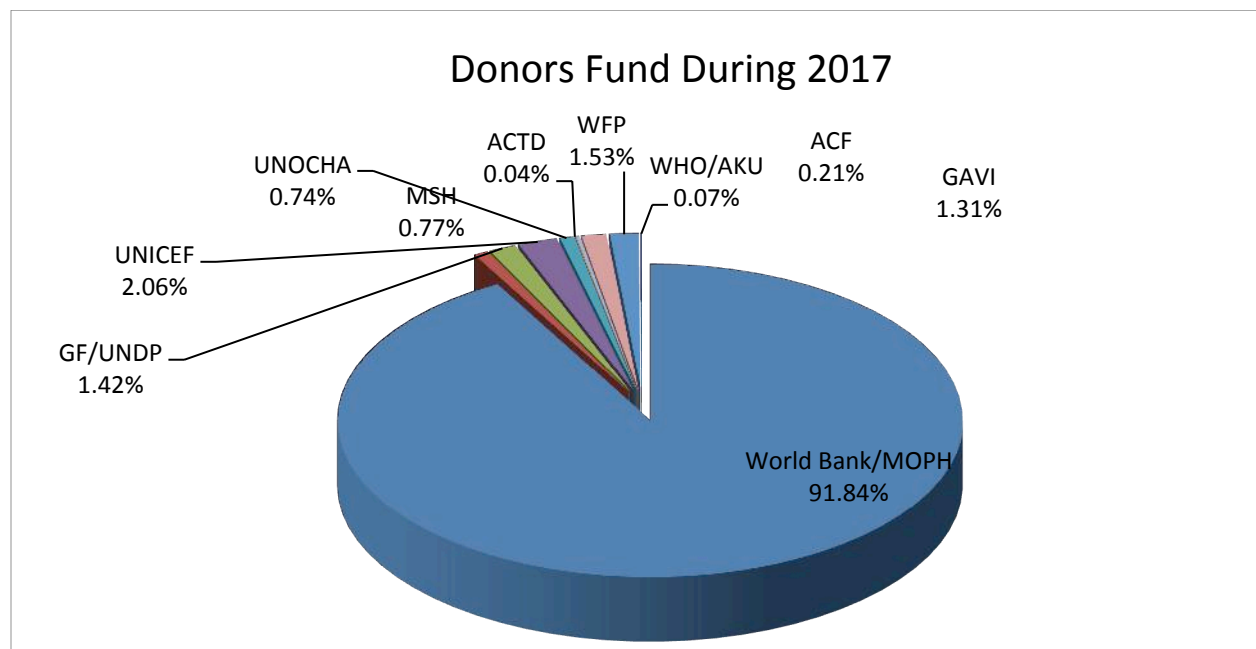
FINANCIAL SUMMARY:

CAF turnover has 6% increased in 2017 comparing to 2016. However, during the year CAF had total of 15 active projects from which 7 projects successfully completed during the year 2017. The total turnover of CAF for the year 1396/2017 was \$ 9,093,599 USD that is 6% more than the turnover in 1395/2016.



CAF’s donors during the period are the World Bank, USAID, MOPH, and the UN agencies. The core donors contributed to the organization projects with 91.84% WB, 2.06% UNICEF, 1.53% WFP, 1.42% GF/UNDP, 1.31% GAVI, 1.31% GAVI, 0.77% MSH, 0.74% UNOCHA, 0.07% WHO/AKU, and 0.25% others respectively during the year.

In total CAF could collect amount of 26,988,803 AFS withholding Tax from its operation as per Afghanistan income tax law and amount of 26,676,676 AFS paid to government account during the year. The collected amount of tax relates to payroll tax, vehicle tax, purchase tax and house rental taxes in the provincial offices and main premises of CAF. CAF as always, paid its monthly collected amount of tax to the government timely.



FINANCIAL STATEMENTS:

Statement of Financial Position:

CARE OF AFGHAN FAMILIES (CAF)
STATEMENT OF FINANCIAL POSITION
AS AT 21 DECEMBER 2017

Note	1396		1395 Restated		
	21 December 2017		20 December 2016		
	AFN	US\$	AFN	US\$	
ASSETS					
<i>Current assets</i>					
Receivable from donors	3	19,590,321	284,124	7,701,427	115,222
Security deposits	4	666,189	9,662	763,690	11,426
Cash and cash equivalents	5	102,239,686	1,482,809	160,136,171	2,395,813
		<u>122,496,196</u>	<u>1,776,595</u>	<u>168,601,288</u>	<u>2,522,461</u>
<i>Non - Current assets</i>					
Operating fixed assets	6	2,245,058	32,560	3,248,319	48,598
TOTAL ASSETS		<u>124,741,254</u>	<u>1,809,155</u>	<u>171,849,607</u>	<u>2,571,059</u>
LIABILITIES AND FUNDS					
<i>Current liabilities</i>					
Deferred grant income - Restricted	7	42,719,412	619,571	92,790,941	1,388,255
Other payables	8	67,576,880	980,085	63,669,294	952,563
		<u>110,296,292</u>	<u>1,599,656</u>	<u>156,460,235</u>	<u>2,340,817</u>
<i>Funds</i>					
Accumulated Core Fund		<u>14,444,962</u>	<u>209,499</u>	<u>15,389,372</u>	<u>230,242</u>
Contingencies & Commitments		-	-	-	-
TOTAL LIABILITIES AND FUNDS		<u>124,741,254</u>	<u>1,809,155</u>	<u>171,849,607</u>	<u>2,571,059</u>

The annexed notes form 1 to 14 are an integral part of these financial statements.

Director General
M.Naim Rassa



Operation Director
Dr.Nasir Ahmad Hamid

CAA

Statement of Comprehensive Income (Profits and Losses):

**CARE OF AFGHAN FAMILIES (CAF)
STATEMENT OF INCOME AND EXPENDITURE
FOR THE YEAR ENDED 21 DECEMBER 2017**

	Note	1396		1395 Restated	
		21 December 2017		20 December 2016	
		AFN	US\$	AFN	US\$
INCOME					
Amortization of deferred grant	9	625,145,253	9,066,646	571,268,774	8,546,810
Other income	10	913,984	13,256	798,356	11,944
		<u>626,059,237</u>	<u>9,079,902</u>	<u>572,067,131</u>	<u>8,558,754</u>
EXPENDITURE					
Direct operating cost	11	564,064,552	8,180,777	521,970,445	7,809,253
Indirect operating cost	12	62,939,096	912,822	49,310,368	737,737
		<u>627,003,648</u>	<u>9,093,599</u>	<u>571,280,813</u>	<u>8,546,990</u>
Deficit of income over expenditure		(944,411)	(13,697)	786,317	11,764
Accumulated Core Fund brought forward		15,389,372	230,242	14,603,055	282,162
Exchange Loss on Core Fund brought forward		-	(7,046)	-	(63,684)
Accumulated Core Funds carried forward		<u>14,444,962</u>	<u>209,499</u>	<u>15,389,372</u>	<u>230,242</u>

The annexed notes form 1 to 14 are an integral part of these financial statements.

Director General
M. Naim Rassa



Operation Director
Dr. Nasir Ahmad Hamid

CAA

Independent Auditor's Report:



4th Floor, Mirwais Plaza,
Near Etisalat Building,
Haji Yaqoob Square,
ShahreNaw,
Kabul, Afghanistan.
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Website: www.caa.af

INDEPENDENT AUDITORS' REPORT TO BOARD OF DIRECTORS

We have audited the financial statements of **Care of Afghan Families** ("the Organization"), which comprise the statement of financial position as at 21 December 2017, statement of income and expenditure, statement of changes in funds and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

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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Opinion

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Organization as at 21 December 2017, and of its financial performance and its cash flows for the year then ended in accordance with International Financial Reporting Standards for Small and Medium-sized Entities (IFRSs for SMEs).

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 statement of income and expenditure confirms to the approved accounting standards.



Credence Auditors & Advisors
Credence Auditors & Advisors
Kabul, Afghanistan.

Dated: 27 March 2018



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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 26,988,803 and paid tax is AFN 26,676,676 /- presented for the purpose of additional analysis and is not required as 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.



Credence Auditors & Advisors
Credence Auditors & Advisors
Kabul, Afghanistan.

Dated: 27 March 2018



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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 general purpose financial statements taken as a whole. The schedule of computation of indirect cost rate is presented for the purpose of additional analysis and is not a requirement of the general purpose financial statements. Such information has been subjected to the auditing procedures applied in the audit of general purpose financial statements and, in our opinion, is fairly stated in all material respects in relation to the purpose financial statements taken as a whole.



Credence Auditors & Advisors
Credence Auditors & Advisors
Kabul, Afghanistan.

Dated: 27 March 2018


CARE OF AFGHAN FAMILIES (CAF)
 SCHEDULE OF COMPUTATION OF INDIRECT COST RATE
 FOR THE PERIOD ENDED DECEMBER 21, 2017

PARTICULARS	AMOUNTS IN AFS			
	DIRECT COST	CAPITAL COST	SUB-GRANTEE COST	INDIRECT COST
SALARIES AND BENEFITS	309,984,265	-	-	44,974,551
GOOD AND SERVICES	245,950,638	-	-	17,964,545
ASSETS	-	8,149,649	-	-
TOTAL	555,914,903	8,149,649	-	62,939,096

INDIRECT COST RATE (RATIO) = $\frac{\text{Indirect Cost}}{\text{Direct Cost}} = \frac{62,939,096}{555,914,903} = 11\%$

CAA


 Director General
 M. Naim Rassa



 Operation Director
 Dr. Nasir Ahmad Hamid



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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 1.1 to Annexure 16.2 for the period from 21 December 2016 to 21 December 2017 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 reported here under international Auditing standards.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the International Standards on Auditing (ISAs). Accordingly, this report is not suitable for any other purpose.

For and on behalf of

Credence Auditors & Advisors
Credence Auditors & Advisors
Kabul, Afghanistan.



Dated: 27 March 2018

Registrations

Islamic Republic of Afghanistan
Ministry of Economy
Directorate of Non-Governmental Organizations



جمهوری اسلامی افغانستان
وزارت اقتصاد
نهالت انسجام مؤسسات غیر دولتی

Certificate of Registration

جواز نامه

(CAF)

Registration No. 68
Date: 29/09/2005

شماره ثبت 68
تاریخ 1384/07/07

Care of Afghan Families

مؤسسه مواظبت خانواده های افغان

According to the decision No.68 dated 29/09/2005 of the Evaluation High Commission of NGO's, this organization is entitled to operate as an NGO in Afghanistan. The NGO shall respect and observe Afghanistan Constitution, NGO's law and the rest of the enforced rules and regulations of the Islamic Republic of Afghanistan.

بر اساس تصویب کمیسیون عالی ارزیابی مؤسسات غیر دولتی تحت فیصله شماره 68 مورخ 1384/07/07، به مؤسسه مذکور اجازه فعالیت در افغانستان منظور گردید. مؤسسه مکلف است که در اجراءات خویش تمام مواد مندرج قانون اساسی، قانون مؤسسات غیر دولتی و سایر قوانین و مقررات نافذه جمهوری اسلامی افغانستان را رعایت نماید.



وزیر اقتصاد
Minister of Economy

تصدیقنامه ثبت مؤسسات غیر دولتی بخش زنان CERTIFICATE OF REGISTRATION FOR WOMEN'S AFFAIRS NGOS

Islamic Republic of Afghanistan
Ministry of women's Affairs

دولت جمهوری اسلامی افغانستان
وزارت امور زنان

S/N: (117)
Date:

شماره مسلسل: (117) ثبت مجدد

تاریخ: ۱۳/۲/۱۳۹۶

Based on the decision of the NGOs Registration Commission, the Ministry of Women's Affairs (MOWA) agreed to register (CAF) as an NGO that performs its activities for women's development and empowerment at central and provincial levels. This NGO is mandated to implement its activities according to the NGOs legislation and under supervision of MOWA. In case of any violation or unsatisfactory performance, the above mentioned NGO will no longer receive MOWA's support. This certificate is awarded for one year and is valid from (1396/2/3) to (1397/2/3)

به اسس فیصله کمیسیون ثبت انجیوها وزارت امور زنان جمهوری اسلامی افغانستان به ثبت مؤسسه محترم (مواظبت خانواده های افغان) منحیت یک انجیو که به منظور رشد و انکشاف زنان در مرکز و ولایات فعالیت دارند موافقت می نماید.

مؤسسه محترم مکلف است تا تمام فعالیت های خویش را طبق قانون مؤسسات غیر دولتی تحت نظر این وزارت به پیش برده در صورت تخلف از مواد متذکره از حمایت این وزارت در بخش های کاریشان مستفید نگردیده و تصدیقنامه برای یک سال از تاریخ (1396/2/3) الی (1397/2/3) مدار اعتبار میبایند.

Ministry of Women's Affairs



Appreciations





جمهوری اسلامی افغانستان
وزارت احیاء و انکشاف دهات
ریاست احیاء و انکشاف دهات ولایت بدخشان
مدیریت اداری

تاریخ: ۱۳۹۶/۰۸/۱۴

تقدیر نامه

ریاست احیاء و انکشاف دهات ولایت بدخشان سیمي ونلاس همای خستگي ناپذیر محترم
داکتر محمد سلیم؛ مصمم؛ مسول پروژہ CLTS دفتر محترم مواظبت خانوادہ همای افغان
(CAF) در این ولایت را بپہ دیدہ قدر نگرینستہ بہ اساس شایستگی و مدیریت خوب کاری
اش در تطبیق موفقاتہ پروگرام CLTS؛ سہولت آوری مسوولدر جلسات ہماہنگی
ماہوار در سطح ولایت؛ صداقت؛ لیاقت و درایت کاری کہہ از خود نشان دادہ اجراءات
موصوف از طرف تیم ولایتی (کمیتہ WASH/CLTS) مورد ستائش قرار گرفتہ وبہ
اعطای این تقدیر نامہ مقرر میگردد. ریاست احیاء و انکشاف دهات موفقت همای مزید
ایشان را در راستای خدمت گزاری بیشتر بہ وطن و ملت افغانستان از بارگاہ خداوند (ج)
استدعا می نمائیم۔



انجیر حیات اللہ "قرمگ"
رئیس احیاء و انکشاف دهات



جمهوری اسلامی افغانستان
اداره مستقل ارگانهای مرکزی
شورای ولایتی بدخشان
دارالامنا

د افغانستان اسلامي جمهوریت
شمیره بیزارگانو ترخونو بانک اداره
د بدخشان ولایتی شورا
دارالامنا

*Ethnic Republic Of Afghanistan
Independent Directorate of Local Governance
Bдахкshtaan Provincial Council*

تاریخ: 1396/07/05

شماره ثبت: (481)

تقدیر نامه

دفتر محترم کف باران مقیم ولایت بدخشان !

شورای ولایتی بدخشان به پاس خدمات شایسته دفتر محترم کف باران در عرصه خدمات بشری، تهیه ادویه برای مراکز صحتی ولسوالی ها، تعلیمات حفظ الصحوی و ظرفیت سازی مسولین مراکز صحتی ولسوالی ها درین ولایت تقدیر نموده .
ما آرزو مندیم همکاری های مثر و تداوم تک های بشر دوستانه شما در این ولایت میباشیم. شورای ولایتی بدخشان از هیچ نوع مساعدت غرض تطبیق موثقاته پروگرام های شما دریغ نخواهد نمود.

با احترام
میرالدین خان
مدیر امور سرپرستی شورای ولایتی بدخشان



Let's improve the quality of life among Afghan families

Care of Afghan Families

CAF

Annual Report 1396



Kabul office Address:

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سرډا: يزكرم رتفد

كرس، مهد ميخاد 7 معلق ن اخ الله جتف

رېمډ مخاد 2194 ن اتسناغفا، لپاك،

ي: كينورتكلا تسوپ cafkl@gmail.com

ي تسوپ و دنص يزكرم مخاد تسوپ 5515