



Care of Afghan Families

Annual Report 1397/2018

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Care of Afghan Families

CAF

Annual Report 1397/2018

Corresponding

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Message from Director General

The Year 2018 (1397) was a challenging year for Care of Afghan Families (CAF) and the overall country. These challenges were included but not limited to the financial and capacity gaps, public trust deficit on NGOs, insecurity increase, donors' fund decrease, political interferences in the operation of the NGOs, negligence of humanitarian principles by AOG as well as the government, government bureaucracy, delay in payments for running of the projects, problems with the payment of tax to Ministry of Finance etc...



In spite of all these challenges, I am proud to present you Care of Afghan Families (CAF) annual report for 2018 (corresponding to 1397) that reflect CAF achievements, undertakings and success which are the result of strong efforts and hardworking of all managerial and technical staff. By this year; CAF completed its 16th 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 and professionalism.

CAF is greatly indebted and extends its gratitude to, MOPH, MOE, MOF, MoWA and other governmental line ministries, its donors (USAID, World Bank, MSH, Global Fund, WHO, WFP, UNICEF, FHI-360, UNDP, AKUMI & KIT) 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.

Furthermore I would like to thank and acknowledge the significant contribution of CAF's board of trustee and whole CAF team on all the achievements during the year 2018. My special thanks and appreciation is from the provincial staff, health facilities staff and community health volunteer 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.

Looking forward to achieve our goals and objectives together during the coming year.

Mohammad Naim Rassa

Director General

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 on January 1, 2003, with Registration No 946 then based on the requirement of the government in 2005, re-registered 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). Founders of the organization aimed to transfer the knowledge, expertise, and experiences of international organizations into a national agency to guarantee the 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 consist of high-level staff with postgraduate-education from prestigious institutions.

CAF as an independent organization has its 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 are prepared in line with International Accounting Standards (IASs) and Generally Accepted Accounting Principles (GAAP).



Mission

The organization mission is “to enable families to fight against poverty, injustice and unawareness”

Vission

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 a 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 the fiscal year, CAF had a total of 1432 full time paid staff at different levels of the organization. CAF also had 996 Community Health Workers (CHWs) who are delivering essential health services considering the CHW guidelines and strengthening more the referral systems.

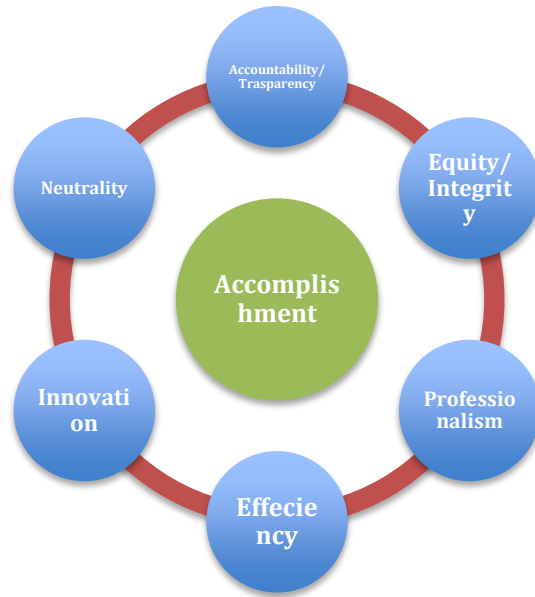


CAF is an active member of HSS Steering Committee, Country Coordination Mechanism (CCM), active member in CPDS (Coordinated Procurement Drugs Supply System) forum, and the steering committee member of Alliance of Health Organization (AHO) which is an umbrella organization of most health NGOs working in Afghanistan. CAF has contributed significantly in health sector policy development through participating in different forums. CAF has contributed to health sector policy development through participating in various forums. CAF has provided input in the finalization of National Standard Treatment Guidelines (STG) for the primary level (as a 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. CAF has contributed to the National Health Strategic (NHS) 2016-2020 through revision and inputs on the document. CAF has the membership of GBV sub-clusters, Advocacy committee of AWN and National Masculinity Alliance. Besides, CAF is a member of the 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. 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 Ph.D. empowered the board. decision-making body organization leading strategic through its experts in nutrition, community environmental health, empowerment, human resources procurement, and management.



The board is the main for the day-to-day activities. The board is organization activities public health, public development, women and youth finance and accounting, management, pharmaceutical



CAF'S DONORS:

CAF is greatly indebted to all the following donors who contributed to the organization's fund during 2018 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 leading donor of CAF's activities during 2018. WB has made 90.28% of CAF's funds during 2018 for implementation of System Enhancement for Health Action in Transition (SEHAT) and Sehatmandi projects in Daikundi, Logar, and Badakhshan provinces.



United States Agency for International Development (USAID): USAID funded 2.97% of CAF's activities during 2018. USAID through MSH funded community-based DOTs project in Badakhshan province, and through FHI360 funded community led total sanitation and community-based nutrition program in Logar province.



United Nation Children Fund (UNICEF): UNICEF has contributed around 2.05% of CAF's fund during 2018 for implementation of Community Led Total Sanitation (CLTS) project in Argo and Darayem districts of Badakhshan province.



World Food Program (WFP): WFP provided around 0.17% of CAF's fund during 2018 for implementation of target supplementary feeding program in Badakhshan province.



World Health Organization (WHO): WHO funded implementation of Trauma Center Support project in Lodin DH of Logar provinces that contributed around 1.03% of CAF's fund during 2018.



Global Fund (GF): GF through UNDP has contributed 0.79% of total CAF's fund during 2018 for implementation of Malaria control programs in Badakhshan and Logar provinces.



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



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Global Alliance for Vaccines and Immunization (GAVI): GAVI contributed around 1.04% of CAF's fund during 2018 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 0.35% of CAF's fund during 2018 in partnering for conducting a nutrition coverage assessment (SMART survey) in Badakhshan province.



Center for Diseases Control and Prevention (CDC) and Aga Khan University (AKU): CDC through AKU contributed around 0.43% of CAF's fund during 2018 for conducting of seroprevalence survey in 14 provinces of the country.



UNWOMEN: UNWOMEN contributed around 0.87% of CAF's fund during 2018 for implementation of women protection center (WPC) in Parwan province of Afghanistan.



EXECUTIVE SUMMARY:

Care of Afghan Families, CAF, is honored to publish its Annual Reports for the year 1397/2018 to its donors, line ministries, partners and stakeholders who are stepping to improve the 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 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 public health-related projects. CAF carried out BPHS in Badakhshan and Logar provinces and EPHS project in Daikundi and Logar provinces. Besides, CAF implemented CB-DOTs and target supplementary feeding program in Badakhshan province, comprehensive trauma center support in Lodin DH of Logar province, malaria control program in Badakhshan and Logar provinces, community-led total sanitation project in Argo and Darayeem districts of Badakhshan province, CLTS project in Mohammad Aga district of Logar, and community based nutrition program in Logar province.

CAF honors that provided public health services to 11% population of Afghanistan including men, women, boys, and girls through the implementation of BPHS and EPHS during 1397.

Project Name	Province	Donor	Start Date	End Date
BPHS SEHAT II	Badakhshan	WB (ARTF)	1-Jul-15	30-Jun-18
EPHS SEHAT III	Logar	WB (ARTF)	1-Jul-17	30-Jun-18
BPHS SEHAT III	Logar	WB (ARTF)	1-Jul-17	30-Jun-18
EPHS SEHAT III	Daikundi	WB (ARTF)	1-Jul-17	30-Jun-18
BPHS Sehatmandi	Logar	WB (ARTF)	1-Jul-18	31-Dec-18
BPHS Sehatmandi	Logar EPHS	WB (ARTF)	1-Jul-18	31-Dec-18
BPHS Sehatmandi	Daikundi	WB (ARTF)	1-Jul-18	31-Dec-18
CBDOTS	Badakhshan	MSH	1-Oct-16	30-Jun-18
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
HSS-SHCs	Badakhshan	GAVI	1-Apr-17	30-Jun-18
CBNP	Logar	FHI360	1-Jan-18	30-Aug-18
CLTS	Logar	FHI360	15-Apr-18	15-Apr-19
TCS	Logar	WHO	1-Jan-18	30-Jul-18
Upgrading SHCs/MI	Badakhshan	GAVI/HSS	1-Apr-16	31-Dec-18

A total of 3,137,332 population received public health services from CAF projects in all provinces. From the figure, 639,984 male, 1,658,448 female, 431,382 boys, and 407,519 girls received the required services. This figure shows a significant contribution (11%) of CAF in the provision of public health services to all population of Afghanistan during the year. Total of

1514 persons including 391 female and 1123 male staff from all provinces received training on BPHS topics during the year. Meanwhile, 96 external and 1211 internal monitoring sessions conducted in the projects by MOPH, other stakeholders and CAF management staff respectively. There is a 1.6 folds increase in the number of monitoring by internal teams from CAF project comparing to the last year.



Quarterly project review workshops; annual review workshop; and operation workshop and training; were other outstanding activities of the year performed to assess, plan and improve health services provision in the provinces. One of the essential activities of CAF is struggling to strengthen Gender Equality. The most critical gender consideration during the year was establishing a women protection center in Parwan province in financial support of UNWOMEN under the direct management of the women and youth empowerment department of the organization.





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 an active member of PHCC, PHO subcommittees, and EPR committee at the provincial levels. CAF could promote the culture of volunteerism through recruiting of 44 volunteers with 23% deployment rate after their capacity building. CAF could manage two emergencies in Badakhshan and one emergency 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 the 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 2018:

Health Projects:

Implementation of BPHS Project in Badakhshan Province: CAF was the lead BPHS implementer in a joint venture form with a local partner in Badakhshan province since July 2015. Total of 61 HFs (1 district hospital, 2 CHC+, 5 CHC, 19 BHCs, and 34 SHCs) and 292 HPs (278 female and 287 male CHWs) are functional and providing BPHS services under SEHAT II/Sehatmandi MOPH trust fund contract in Badakhshan cluster 1. Total of 1,385,111 beneficiaries received public health services through active HFs and HPs in the province during the year.



The figure shows a 6% increase in the service provision in this year compared to the last year. Out of the total beneficiaries 204,162 women received MCH services, and 338,180 under five children screened for childhood disease and immunization services. The figures describe that all women of reproductive age received 1.7 times MCH services while children under five have a utilization rate of 3.16 per person during the year.



Implementation of BPHS Project in Logar province: CAF was the only BPHS implementer in Logar province during the reporting period. Total of 49 HF's (2 district hospitals, 3 CHC+, 7 CHCs, 20 BHCs, one prison health, 13 SHCs, and 3 FHHs) and 232 HPs (181 female and 231 male CHWs) are functional and providing BPHS services under SEHAT/Sehatmandi MOPH trust fund contract in Logar province. Total of 1,422,913 beneficiaries received public health services through active HF's and HPs in the area during the year. The figure shows a 3% increase in the service provision in this year compared to the last year. Out of the total beneficiaries 179,832 women received MCH services, and 376,944 under five children screened for childhood disease. The figures describe that all women of reproductive age have attended 2.23 times the HF's and all children under five received 4.68 times services in the HF's.



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/Sehatmandi WB/MOPH contract in Daikundi province. Total of 98,661 beneficiaries received hospital services through Nilli provincial hospital in the area during the year. Besides, a total of 10,151 patients admitted to the hospital, which is 12% of all outpatients' beneficiaries. There is a 20% increase in admissions during this year comparing to the last year. Among these figures, 310 women with major obstetric complications admitted in the hospital. Out of the total beneficiaries 13,293 women received MCH services, and 17,014 under five children screened for childhood disease. During the year, a total of 2,549 major and minor surgeries performed in the hospital.



Implementation of EPHS Project in Logar Province: CAF is the lead EPHS implementer in Logar province since July 2017. CAF implemented EPHS in Naib Aminullah Khan (NAK) provincial hospital under SEHAT/Sehatmandi WB/MOPH contract in Logar province. Total of 230,647 beneficiaries received hospital services through NAK hospital in the area during the year. Besides, a total of 16,027 patients admitted to the hospital, which is 8% of all outpatients' beneficiaries. There is a 10% increase in admissions during this year comparing to the last year. Among these figures, 2,131 women with major obstetric complications admitted in the hospital. Out of the total beneficiaries 30,614 women received MCH services, and 60,383 under five children screened for childhood disease. During the year, a total of 7,144 major and minor surgeries performed in the hospital.



Establishing Comprehensive Trauma Center in Lodin DH of Logar: This project started from Jan 2018 in Lodin district hospital of Logar province funded by WHO. The project ended in July 2018. Under this project, CAF established a comprehensive trauma center including the building, equipment, and supplies for Lodin DH to cover trauma and emergency cases in the district.

Health System Strengthening (HSS) Project in Badakhshan Province:

CAF with support of MOPH and financial contribution of GAVI-HSS continued 17 upgraded sub-health centers in cluster 1 Badakhshan province. Also, three community mobile immunization teams worked in very hard to reach areas of the cluster to ensure the 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 the underserved population. Total of 26462 clients (2887 women and 23575 children) received vaccination services by mobile immunization teams (MI), and 73382 clients (9261 women and 64121 children) vaccinated by 17 upgraded SHCs in the province during the reporting period.



CAF supported outreach activities in Badakhshan province through purchasing of new motorcycles for vaccinators of SHCs under GAVI-HSS



Nutrition Activities:

Implementation of Target Supplementary Feeding Program in Badakhshan Provinces:

CAF implemented target supplementary feeding program (TSFP) program in 19 HFs of Badakhshan provinces under financial support of WFP. The project ended on June 2018. At the end of June 1121 children under the age of five with moderate acute malnutrition (MAM) and 1703 acute malnourished pregnant and lactating women (AM PLW) were registered and received food rations according to the protocol in Badakhshan province. The performance indicators for Supplementary Feeding program reported as following: SFP children under 5 - (cure rate 99%, Death rate 0.0% and defaulter rate 1.0%), SFP PLWs - (cure rate 97%, Death rate 0.0% and defaulter rate 3.0 %). The project performance shows a good achievement compared to the SPHERE standards limit which states cure rate >75%, death rate <3%, and defaulter rate <15%.





CAF implemented PND-Supported Community Based Nutrition Package (CBNP) in Logar with pre and post evaluation of its impact on the knowledge, attitude, and practice (KAP) of community health workers, and caregivers of children under two years.



Community Development Activities:

Implementation of Community Based DOTs in Badakhshan Province: CAF implemented the project with the financial support of MSH/USAID under Challenge TB project in 48 health facilities (HFs) and 557 community health workers (CHWs) in Badakhshan province. The project is the continuation of the same contract, which ended in Sep 2017 and its new phase, which started from Oct 2017 and will continue to June 2018. The project aims to increase TB case detection at the community level and to improve the treatment and management of TB patients by CHWs. During the reporting period, a total of 4,691 suspected cases identified in the province. Among all suspected cases 710 cases (15% of all) have been detected and referred by CHWs. 164 TB smear positives identified, which make 3% of suspected cases identified. Among all smear positives case, 21 cases (13%) referred by CHWs. During the reporting period, a total of 40 patients (15% of patients) receives DOTs treatment from CHWs, and 263 patients received DOTs treatment in health facilities. Ten 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, ten established TB association maintained active and functional. The association purposed to raise awareness and TB case detection at the community level.



Implementation of Community Based Management of Malaria in Badakhshan and Logar Provinces: CAF implemented the project by the financial support of GF/UNDP in 107 health facilities (Badakhshan 61 and Logar 46) and 939 CHWs (Badakhshan 549 and Logar 390) in Badakhshan and Logar provinces. The project started from Jan 2017 and continued to end of Dec 2018. 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, 116 HF in charges (67 in Badakhshan and 49 in Logar), 60 community health supervisors (28 in BDK and 32 in LOG), and 939 females and males community health workers (549 in BDK and 390 in LOG) received training on NTG,RDT and reporting, according to the training plan in both provinces. Total of 4071 malaria suspected cases (2109 in BDK and 1962 in LOG) examined by RDT and, 580 malaria confirmed case (79 in BDK and 501), were treated in health facilities with no diagnostic services (BHC, SHC, and MHT) in both provinces. Total of 10518 malaria suspected cases examined by RDT (3298 in BDK and 7220 in LOG) and 864 malaria confirmed cases (168 in BDK and 553 in LOG) treated in health posts during 2018 in both provinces.



Implementation of Community Led Total Sanitation Project in Badakhshan Province:

UNICEF awarded CAF the contract for the implementation of CLTS project in Darayem district of Badakhshan province. The program will cover 146 villages in the areas for two years to create an open defecation free environment. Total of 73 villages triggered where 73 FHAGs and 73 community committees established to follow hygiene and sanitation standards in the 73 villages during the reporting period. Among 146 villages 73 villages are open defecation free and external team certified the communities so far.



Implementation of Community Led Total Sanitation Project in Logar Province:

CAF implemented CLTS project in Mohammad Aga district of Logar province under financial support of USAID through FHI360. The program covers 180 villages in the areas during one year intending to create an open defecation free environment. Total of 180 villages triggered where 180 FHAGs and 180 community committees established to follow hygiene and sanitation standards in the 180 villages during the reporting period.

**Implementation of Community Based Nutrition Package Project in Logar Province:**

CAF implemented CBNP project in all districts of Logar province under financial support of USAID through FHI360. The initiative covered all 202 active HPs and 30 HFs in the areas for eight months to institutionalize growth monitoring at the community level through trained CHWs and community volunteers. Total of 374 CHW and 419 community volunteers received CBNP training and committed to providing growth monitoring services for the children under two years old at the community level. The baseline and end line surveys assessed the IYCF interventions among caregivers of children less than two years in all seven districts of the province. Generally, the result in the end line survey shows improvement in all CBNP indicators compared to the baseline data of the project. The increase in the children and women related indicators shows the successful implementation of the CBNP program at the community level. Therefore, CBNP could be a promising initiative for improvement of maternal and child nutrition at the community level and a supplement project to the BPHS.



Education/Research Activities:

Implementation of Community Health Nursing Education (CHNE) Program in Badakhshan Province: CAF implemented CHNE program in Badakhshan province under financial support of WB through the MOPH SEHAT-II project. Total of 24 female students graduated from CHNE school in April 2018. We introduced the graduated nurses to the needy health facilities of the province. Deployment of the trained community nurses in the area further supported the availability of female health workers in the province. The program is carried out through qualified and expert trainers using CHNE and AMNEAB principles and standards.



SMART Survey in Badakhshan:

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 cluster 1 of Badakhshan province. The project jointly implemented by ACF and CAF provincial team that ended on Oct 2018. It was a cross-sectional survey following the two-stage cluster sampling method, based on standardized Monitoring and Assessment of Relief and Transition (SMART) methodology. The survey result showed that GAM rate among children 6-59 months is 12.6% based on WHZ while the percentage of SAM among children 6-59 months is 3.0%.



Baseline and Endline Survey of Community Based Nutrition Package:

A baseline and end line surveys assessed the IYCF interventions among caregivers of children less than two years, child and maternal nutrition in all seven districts of the province. All IYCF indicators improved in the end line survey compared to the baseline data. Among them, early initiation of breastfeeding, use of colostrum, and ever breastfeeding have a slight improvement in end line data compared to the baseline. While exclusive breastfeeding, the continuation of breastfeeding, and early initiation of complementary feeding have significant improvement in end line compared to the baseline data respectively (17.7% to 39.5%, 12.2% to 19.6%, & 24.6% to 68.2%).

The end line survey result shows that almost all indicators related to pregnant women and nutrition specific interventions during pregnancy are significantly improved compared to the baseline data. The improvement in all indicators is statistically significant in the end line survey with a p-value of less than 0.05. Interestingly, the numbers of women who reasoned unavailability of iodized salt for not using it in the households are significantly lower in the end line data (N=99) compared to the baseline data (N=15).

Iron and folic acid supplementation, knowledge about fortified food, utilization of fortified food by households, knowledge about iodized salt, and utilization of iodized salt by families are among the indicators have significant improvement respectively (30.3% to 50.5%, 25.0% to 45.7%, 23.4% to 31.1%, 77.4% to 88.3%, and 67.4% to 79.1%).

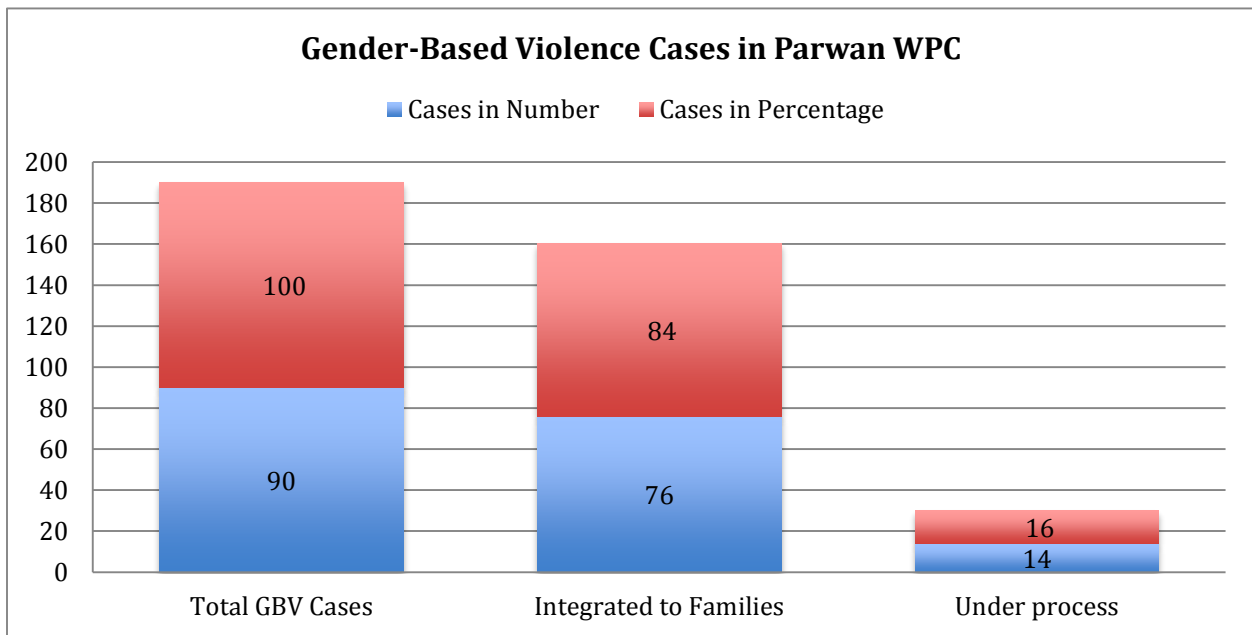


Generally, the result in the end line survey shows improvement in all indicators stated above compared to the baseline data of the project. The increase in the children and women related indicators shows the successful implementation of the CBNP program at the community level. We can infer that CBNP could be a promising initiative for improvement of maternal and child nutrition at the community level and a supplementary project to the BPHS. Therefore, CAF recommends its implementation in all BPHS projects either through vertical or integrated manner with the BPHS.

Women and Youth Empowering Activities:

Implementation of Women Protection Center in Parwan Province:

CAF with financial support of UNWOMEN started implementation of women protection center in Parwan province. Since its startup, the center served a total of 90 clients (83 new and 7 old) cases along with their 21 accompanying children. During the reporting period, (27 new and 4 old) cases were provided legal services and a total of 90 (83 new and 7 old) cases were provided counseling and mediation services. Additionally, 54 cases were resolved through counseling and 22 through legal services. The WPC in Parwan province works to increase the protection of Afghan women and girls from violence, sexual exploitation, other human rights and gender-based violence and abuses with the objective to provide WPC social protection services, and access to justice to women and girls in the province.



MAJOR ACHIVEMENTS:

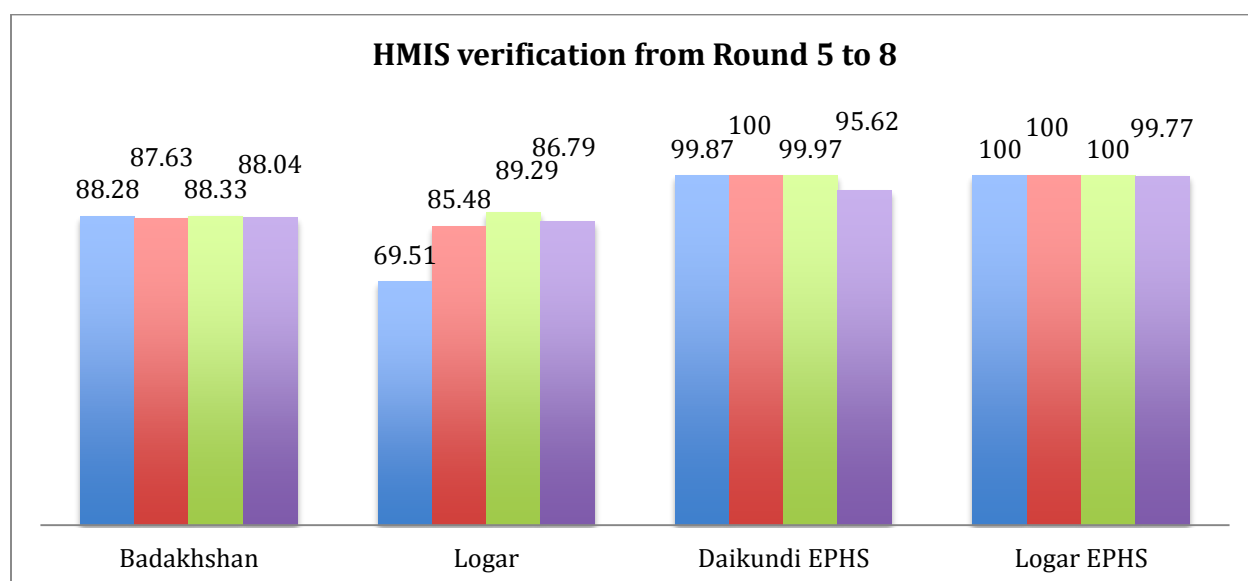
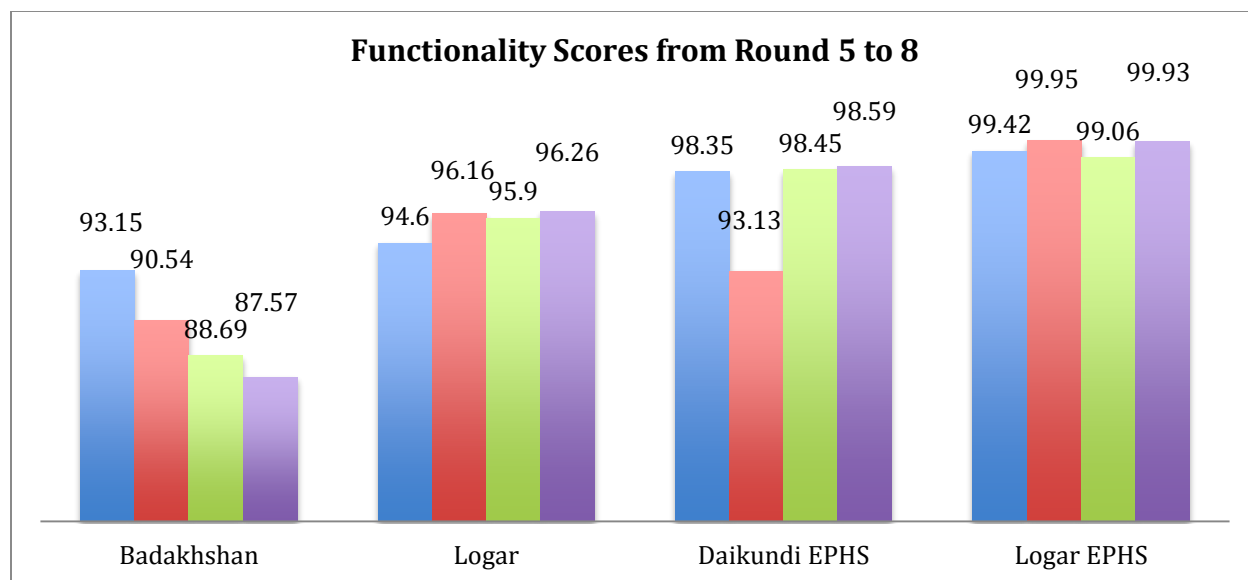
BPMS and EPMS Projects under Sehatmandi

In response to the RFP that was issued by MOPH for implementation of BPMS and EPMS projects under Sehatmandi, CAF has the honors of implementing combined BPMS and EPMS project in Logar province from Jan 2019 for 30 months. Under the Sehatmandi project, CAF will support 46 HF, 3 FHH, 232 HP, and one provincial hospital.



Third Party Verification Reports: During the reporting period, the third party evaluated two times all BPMS and EPMS projects in the country in which CAF received an excellent report of the evaluation. The verification report of the third party indicates a mean score of 88.04% in Badakhshan, 86.79% in Logar BPMS, 95.62% in Daikundi EPMS, and 99.77 in Logar EPMS for HMIS composite score. Also, for functionality index, it shows a mean score of 87.57% in Badakhshan, 96.26% in Logar BPMS, 98.59% in Daikundi EPMS, and 99.93% in Logar EPMS.

The balance scored card for 2018 shows a decline in a mean composite score at overall the country. The number for Logar BPMS decreased from 72.4 to 58.6 while it slightly decreased in Badakhshan from 58.4 to 57.5. The hospital scorecard for Logar hospitals decreased from 93.2 to 84.1 while it increased in Daikundi hospital from 75.1 to 75.3. Logar hospitals remained at the 4th position among all the hospitals in the country.



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, 1,514 persons including 391 female and 1123 male staff (177 in Daikundi, 787 in Logar BPHS, 92 in Logar EPHS, and 458 in Badakhshan) received training sessions through MOPH, PEMT, PND, CAF, and other stakeholders. 32 CHWs received initial, and 995 CHWs received refresher training. Additionally, different capacity building sessions conducted in CAF main and provincial offices.



On the Job Training, Conference and Seminars

Beside that CAF has its capacity building programs for management staff. Besides, 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 health workers 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.



Contribution in MIYCN strategy 2019-2025

CAF contributed in formulation of MOPH-MIYCN strategy 2019-2025 through participating in conduction of focus group discussion and in-depth interview with the community member, health facility staff, and related authorities to receive their viewpoint for proper addressing nutrition problems for the mothers and infant and children in the country. To this end, CAF senior nutrition representative supported the MOPH and UNICEF team, as per the request of MOPH leadership, in Kandahar, Herat, and Kabul provinces.



Training and Workshops Outside the Country

CAF encourages its staff to attend postgraduate degrees such as Master and Doctoral (Ph.D.) programs inside and outside of the country. One of CAF director board is Ph.D. scholar in public health during the reporting year and currently working at the headquarter office. Subsequently, CAF is committed to building the capacity of its staff members through short and medium-term programs and workshops inside and outside of Afghanistan. CAF operation director participated jointly a technical seminar in CDC main office at Atlanta, United States with the financial support of AKF to discuss polio seroprevalence survey findings and results.



Also, two management staff attended the International Financial Reporting Standards (IFRS) training in Turkey, the finance controller attended the operation and administrative skills and project management training, the logistic manager attended procurement, contract management, and negotiation skill training in Turkey, and the monitoring and evaluation manager participated in the M&E and SPSS training in Dubai during the reporting period.

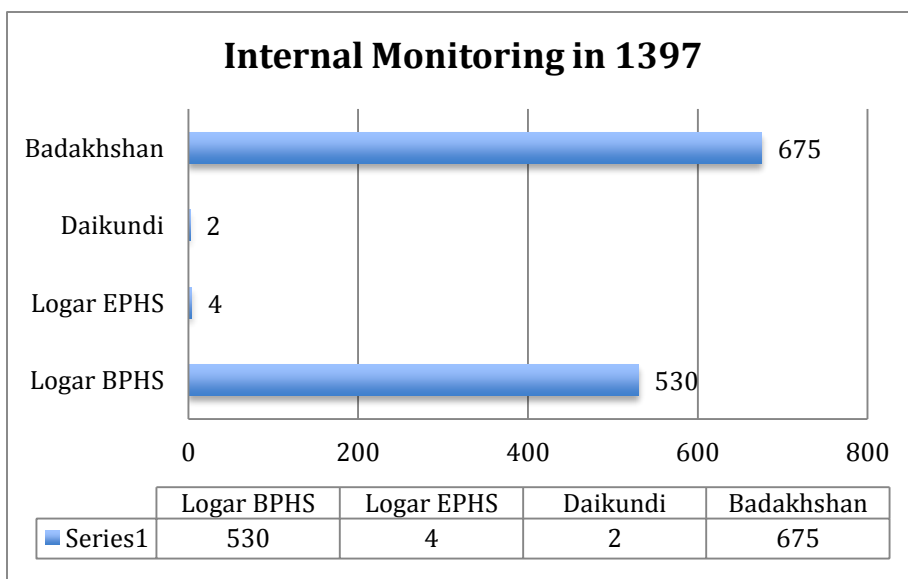
Partnerships:

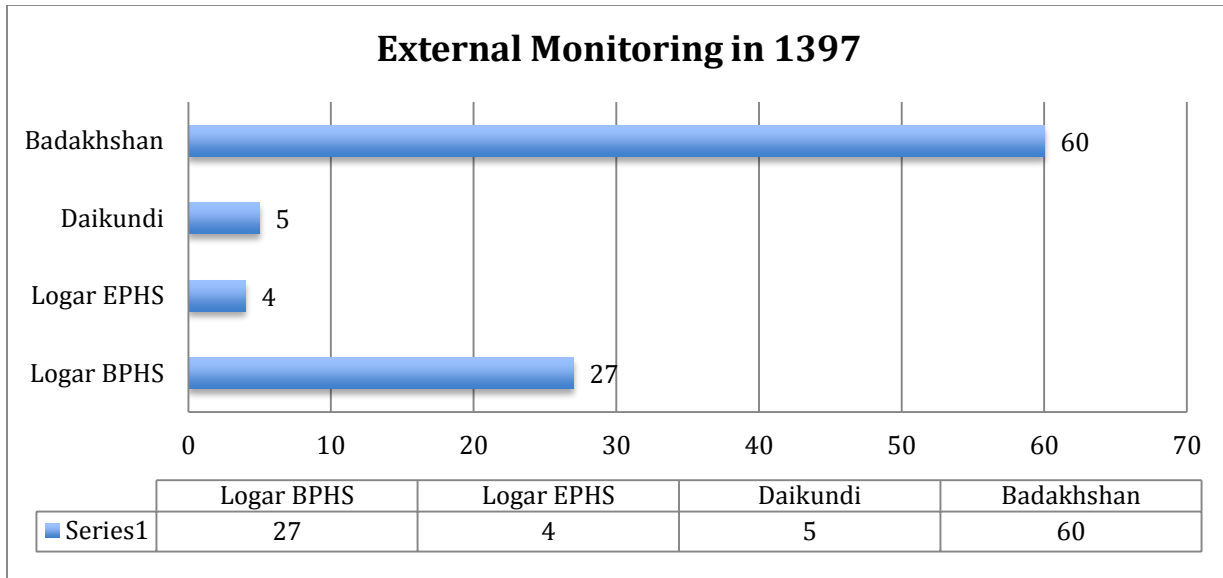
CAF works in partnership with various actors such as community, government, national and international agencies. CAF always received advice and technical assistance of UN agencies in the implementation of health and nutrition services that resulted in quality service provision in the country. Coordination with our partners and stakeholder such as MOPH, WB, WHO, UNICEF, MSH, WFP, UNDP, Aga Khan Health Services, BARAN, Women Affair Department, Provincial Council and other governmental agencies at the national and provincial level was the essential 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:

Total of 96 external monitoring visits (27 in Logar BPHS, 60 in Badakhshan, 4 in Logar EPHS and 5 in Daikundi) conducted from CAF operating areas by GCMU-MOPH, MSH, WHO, PPHD, and M&E-MOPH. There is a 38% decrease in the frequency of monitoring visits by MOPH and other stakeholders during 1397 compared to 1396. Total of 1211 internal monitoring visits (675 in Badakhshan, 530 in Logar BPHS, 2 in Daikundi, and 4 in Logar EPHS provinces) conducted by CAF HQ and provincial management team. There is a 160% increase in the frequency of internal monitoring visits during 1397 compared to 1396. Action plans have been prepared to address the findings of the mission and regular follow up is made during the projects.





Quarterly Review Workshops

CAF conducted regular quarterly review workshops of SEHAT/Sehatmandi 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 activity for the year was the annual review workshop of SEHAT projects. The workshop held in Kabul and Badakhshan in which key staff of projects participated, presented their yearly achievements, compared achievements with the annual work plan, and planned for the next year. CAF directors and managers attended the workshops and provided constructive feedback and comment for effectiveness and efficiency aspects of the projects.



Gender Activities:

One of the essential activities of CAF is struggling to improve Gender equality. Some main activities on improving gender balance during the year were: conducting a regular meeting about gender awareness, the celebration of 8th March/ international woman days at the office level, and start-up of women protection center in Parwan province under financial support of UNWOMEN. The most critical gender consideration during the year was maintaining of women and youth empowerment department of the organization. CAF participated in a workshop held in the ministry of women affairs for the celebration of national women day. CAF is committed to contributing to the empowerment of women and girls as a primary objective of the ministry of women affairs.



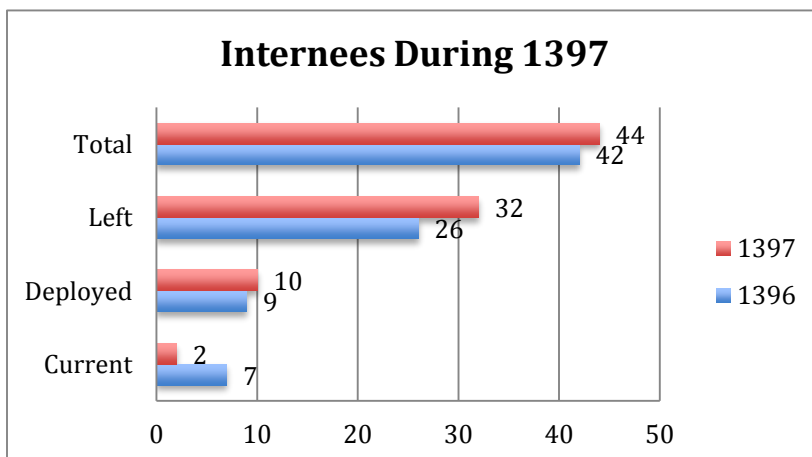
Coordination and Communication:

CAF is an active member of national and provincial level forums. Our staff participated in health system strengthening (HSS) meetings regularly during the year. CAF is a member of CCM forum, CBHC, HMIS, IYCF, and RH taskforce meeting at the MOPH level. Besides, 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 the 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 subcommittees – 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 the provision of an internship program in its central and provincial offices. Total of 44 male and female interns started work in different departments of the organization so far. From all, CAF could deploy 23% of them in its central and provincial offices, and 77% of volunteers obtained necessary knowledge and skills during their stay in CAF and left for joining other organizations.



General Assembly and Trusty Board Meeting:

As per the organization charter, CAF conducted its trustee board meeting with the presence of members of the trustee board and members of directors in CAF Kabul office during the reporting period. During the meeting, an annual technical report, highlights of the year, and yearly financial plan presented to the members of the meeting.



Emergency Response:

Badakhshan, Logar, and Daikundi are the provinces where people suffer from natural disasters and disease outbreaks. Being one of the leading implementers of health projects in Badakhshan, Logar, and Daikundi provinces, CAF has actively contributed in response to the emergencies in these provinces. CAF is an active member of the Emergency Preparedness and Response (EPR) committee at mentioned provinces and managed to respond effectively and timely in 3 events during the year. During the reporting period, two emergencies reported from Badakhshan province and one emergency notified from Logar province, which responded adequately.

Appreciation and Recognition:

During the reporting period, CAF was recognized and appreciated by Daikundi, Logar and Badakhshan governmental authorities. Badakhshan provincial public health directorate (PPHD) awarded CAF with an appreciation letter for quality and successful implementation of BPHS project in the province. Also, Badakhshan provincial governor and Mustawfiat awarded CAF with an appreciation letter for quality implementation of BPHS project in Badakhshan province.



Daikundi provincial public health directorate (PPHD) awarded CAF with an appreciation letter for quality and successful implementation of EPHS project in the province. The provincial council and Mustawfiat of Daikundi province issued certificates of appreciation to CAF for its successful and quality execution of EPHS in the area. Also, the hospital community board provided a certificate of appreciation to CAF and presented their satisfaction from the hospital services during the reporting period.

The Mustawfiat of Logar province issued certificates of appreciation to CAF for its successful and quality implementation of BPHS and EPHS project in the area.

National Assembly, the Upper House of the Islamic Republic of Afghanistan awarded CAF directors and provincial managers with a certificate of appreciation for quality and successful implementation of BPHS and EPHS projects in Logar and Badakhshan provinces. Meanwhile, the Ministry of Rural Rehabilitation and Development awarded CAF with a certificate of achievement for successful open defecation of free of Argo district of Badakhshan province under CLTS program.

Our Challenges:

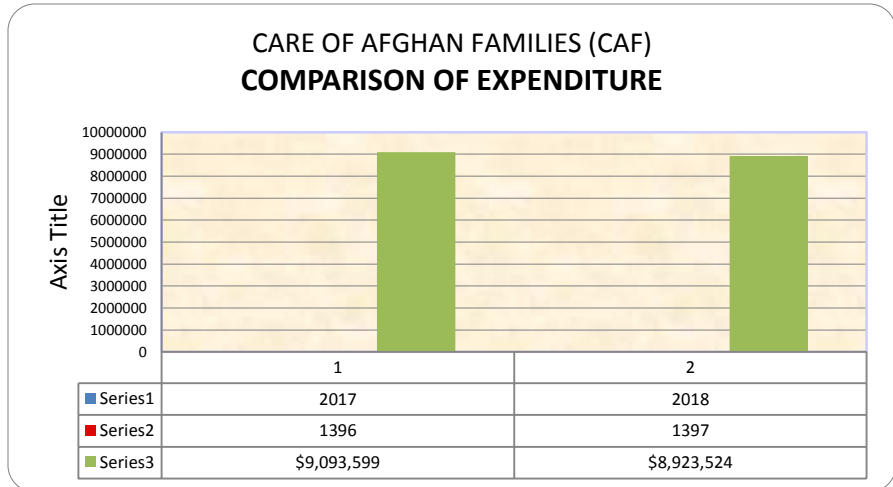
Availability of old and non-standard buildings for HFs in the operating provinces is a challenge to quality implementation of health services. 20 HFs in Logar and 23 HFs in Badakhshan provinces do not have a standard building. Also, the Logar provincial hospital building is not appropriate and do not 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 the effort of multi-sectoral 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 insecure operating areas such as Logar and Badakhshan provinces regardless of their political sides. Total of 61 health facilities in Badakhshan, 46 health facilities in Logar, 1 PH in Daikundi and 1 PH in Logar province were functional and providing un-interrupting services to the needy population of the regions.

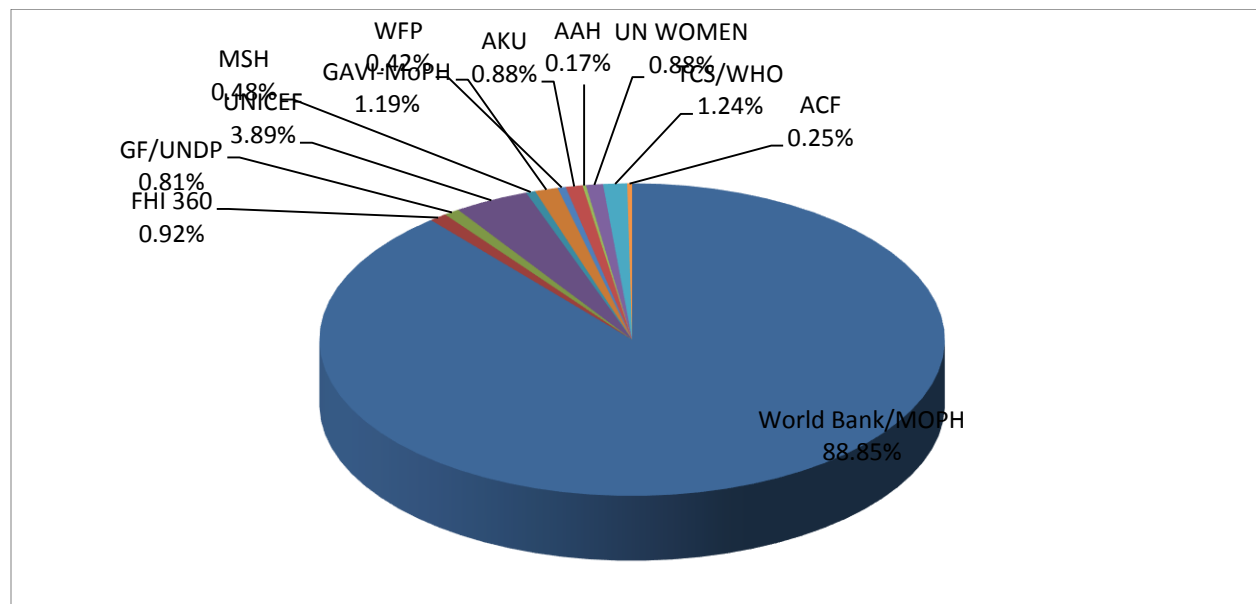
FINANCIAL SUMMARY:

CAF turnover was 2% in 2018 while it was 8.1% in 2017. However, during the year CAF had a total of 17 active projects that 11 projects completed during the year 2018. The total turnover of CAF for the year 1397/2018 was \$8,923,524 that is 1.9% less than the turnover in 1396/2017.

CAF’s donors during the period are the World Bank, USAID, MOPH, and UN agencies. The core donors contributed to the organization projects with 90.28% WB, 2.97% USAID, 2.05% UNICEF, 0.17% WFP, 0.79% GF/UNDP, 1.04% GAVI, 1.03% WHO, 0.35% ACF, 0.43% CDC/AKU, and 0.87% UNWOMEN respectively during the year.



In total, CAF could collect an amount of 26,861,047 AFS withholding tax from its operation as per Afghanistan income tax law and amount of 27,173,174 AFS paid to government account during the year. The collected amount of tax relates to the 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 tax to the government timely.

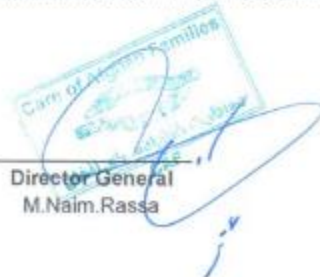


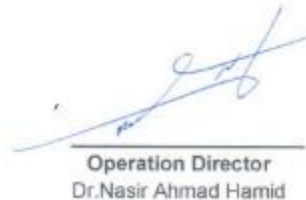
FINANCIAL STATEMENTS:**Statement of Financial Position:**

**CARE OF AFGHAN FAMILIES (CAF)
STATEMENT OF FINANCIAL POSITION
AS AT 21 DECEMBER 2018**

Note	1397		1396		
	21 December 2018		21 December 2017		
	AFN	US\$	AFN	US\$	
ASSETS					
<i>Current assets</i>					
Receivable from donors	3	83,854,677	1,109,676	19,590,321	284,124
Security deposits	4	516,216	6,831	666,189	9,662
Cash and cash equivalents	5	85,583,350	1,132,552	102,239,686	1,482,809
		<u>169,954,243</u>	<u>2,249,059</u>	<u>122,496,196</u>	<u>1,776,595</u>
<i>Non - Current assets</i>					
Operating fixed assets	6	1,546,173	20,461	2,245,058	32,560
TOTAL ASSETS		<u>171,500,416</u>	<u>2,269,520</u>	<u>124,741,254</u>	<u>1,809,155</u>
LIABILITIES AND FUNDS					
<i>Current liabilities</i>					
Deferred grant income - Restricted	7	9,179,002	121,469	42,719,412	619,571
Other payables	8	153,214,625	2,027,538	67,576,880	980,085
		<u>162,393,627</u>	<u>2,149,007</u>	<u>110,296,292</u>	<u>1,599,656</u>
<i>Funds</i>					
Accumulated Core Fund		<u>9,106,789</u>	<u>120,513</u>	<u>14,444,961</u>	<u>209,499</u>
Contingencies & Commitments					
TOTAL LIABILITIES AND FUNDS		<u>171,500,416</u>	<u>2,269,520</u>	<u>124,741,254</u>	<u>1,809,155</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

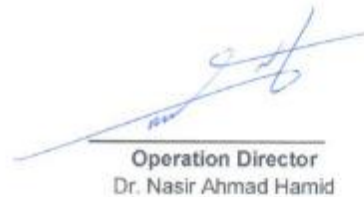
Statement of Comprehensive Income (Profits and Losses):

**CARE OF AFGHAN FAMILIES (CAF)
STATEMENT OF INCOME AND EXPENDITURE
FOR THE YEAR ENDED 21 DECEMBER 2018**

	Note	1397		1396	
		21 December 2018		21 December 2017	
		AFN	US\$	AFN	US\$
INCOME					
Amortization of deferred grant	9	673,284,206	8,909,788	625,145,253	9,066,646
Other income	10	1,037,976	13,736	913,984	13,256
		<u>674,322,182</u>	<u>8,923,524</u>	<u>626,059,237</u>	<u>9,079,902</u>
EXPENDITURE					
Direct operating cost	11	616,561,130	8,159,154	564,064,552	8,180,777
Indirect operating cost	12	63,099,223	835,013	62,939,096	912,822
		<u>679,660,353</u>	<u>8,994,167</u>	<u>627,003,648</u>	<u>9,093,599</u>
Deficit of income over expenditure		(5,338,171)	(70,642)	(944,411)	(13,697)
Accumulated Core Fund brought forward		14,444,961	209,499	15,389,372	230,242
Exchange Loss on Core Fund brought forward		-	(18,344)	-	(7,046)
Accumulated Core Funds carried forward		<u>9,106,789</u>	<u>120,513</u>	<u>14,444,961</u>	<u>209,499</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:



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Kabul, Afghanistan.
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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 2018, 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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Tel: +93 (0)744704436
Email: audit@caa.af
Website: www.caa.af

Opinion

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Organization as at 21 December 2018, 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
Kabul, Afghanistan.

Dated: 11 March 2019

Registrations

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



جمهوری اسلامی افغانستان
وزارت اقتصاد
ریاست 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

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.

مؤسسه مواظبت خانواده های افغان

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.



زیر 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 : (150)
Date:

شماره مسلسل : (150) ثبت مجدد
تاریخ : ۱۳۹۷/۹/۱۴
۱۳۵

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 (2018/10/27)to (2019/10/27).

به اساس فیصله کمیسیون ثبت انجیروها وزارت امور زنان جمهوری اسلامی افغانستان به ثبت مجدد مؤسسه محترم (مواظبت خانواده های افغان) منجیب یک انجیرو که به منظور رشد و انکشاف زنان در مرکز و ولایات فعالیت دارد؛ 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 موااد متذکره از حمایت این وزارت در بخش های کاری شان مستبعد نگردیده و این تصدیق نامه برای یک سال از تاریخ (1397/8/5) الی (1398/8/5) مدار اعتبار می باشد.



Ministry of Women's Affairs

وزارت امور زنان

Appreciations











Care of Afghan Families

CAF

Annual Report 1397



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خانه نمبر 2194 ، کابل، افغانستان

پوست الکترونیکی: cafkb1@gmail.com

پوسټه خانه مرکزی صندوق پوسټی # 5515