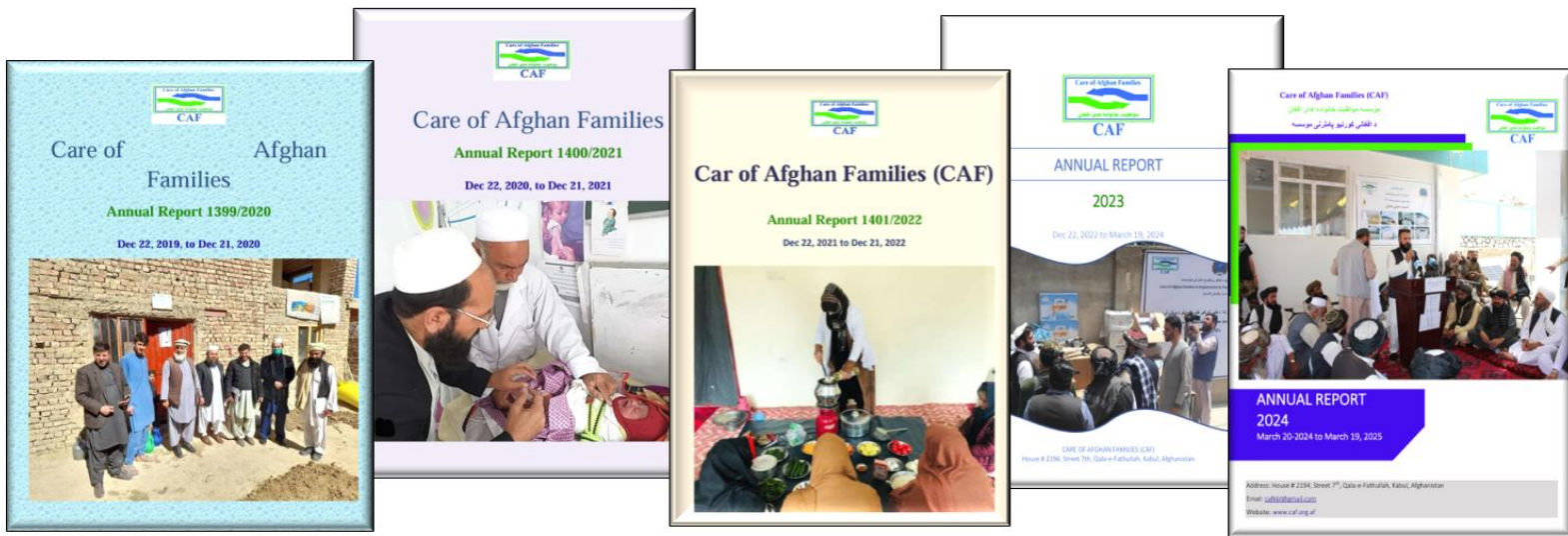




ANNUAL REPORT

2025

(Mar 20-2025 to Mar 20, 2026)



Address:
House # 2194,
Street 7th,
Qala e Fathullah,
Kabul, Afghanistan



Email:
cafkb1@gmail.com



Website:
www.caf.org.af

let's improve the quality of life among Afghan families.

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MESSAGE FROM THE DIRECTOR GENERAL

It is my profound honor to present this Annual Report for the year 2025, reflecting the collective humanitarian efforts of *Care of Afghan Families (CAF)* over the past fiscal year. CAF remains committed; serving the people of Afghanistan with dignity, compassion, and professionalism.



CAF is currently the implementer of the Basic Package of Health Services (BPHS) and Essential Package of Hospital Services (EPHS) in Logar province, funded by the World Bank and Asian Development Bank (ADB) through UNICEF. In addition, we are implementing a community-based malaria control program in Logar with financial support from UNDP/Global Fund. Our Reproductive, Maternal, Newborn, and Child Health (RMNCH) project funded by UNFPA is active in both Logar and Samangan provinces. These programs reflect our dedication to improving public health outcomes and ensuring access to essential services for all communities.

Throughout the year, CAF has continued to deliver vital services in public health, nutrition, emergency response, and community development across multiple provinces. In a country where access and utilization to basic services still remains a challenge, our commitment is clear: the people of Afghanistan deserve reliable, high-quality care. The CAF family is devoted to delivering these services now and, in the years, ahead.

This report also marks a significant milestone; the 23 years of CAF's service to the Afghan people. It documents our achievements, financial status, and our challenges. Despite the obstacles, our results speak to the strength of our teams and the trust of the communities we serve.

CAF's work is grounded in professionalism, efficiency, equity, integrity, accountability, and transparency. These values guide every project we implement and every life we touch. We take pride in our duty to improve the quality of life for the Afghan population—especially those most in need.

We extend our deepest appreciation to the Ministry of Public Health, Ministry of Economy, Ministry of Finance, and their departments at the provincial levels and other governmental bodies for their continued collaboration. We are equally grateful to our donors and partners, World Bank, UNICEF, WHO, WFP, UNDP, UNFPA, UNOCHA, UNOPS and to the community members who have been our strongest allies in the field.

I would also like to recognize the invaluable contributions of CAF's Board of Trustees, advisory board and the entire CAF team. My special thanks go to our local staff, health facility personnel, and community health workers (CHWs) who have worked tirelessly to deliver services and raise awareness across our operational areas.

Afghanistan's humanitarian needs remain significant. We welcome continued collaboration with all stakeholders committed to improving health outcomes in Afghanistan. Together, we can build a healthier, more hopeful future for the people of Afghanistan.

With deepest respect and commitment,

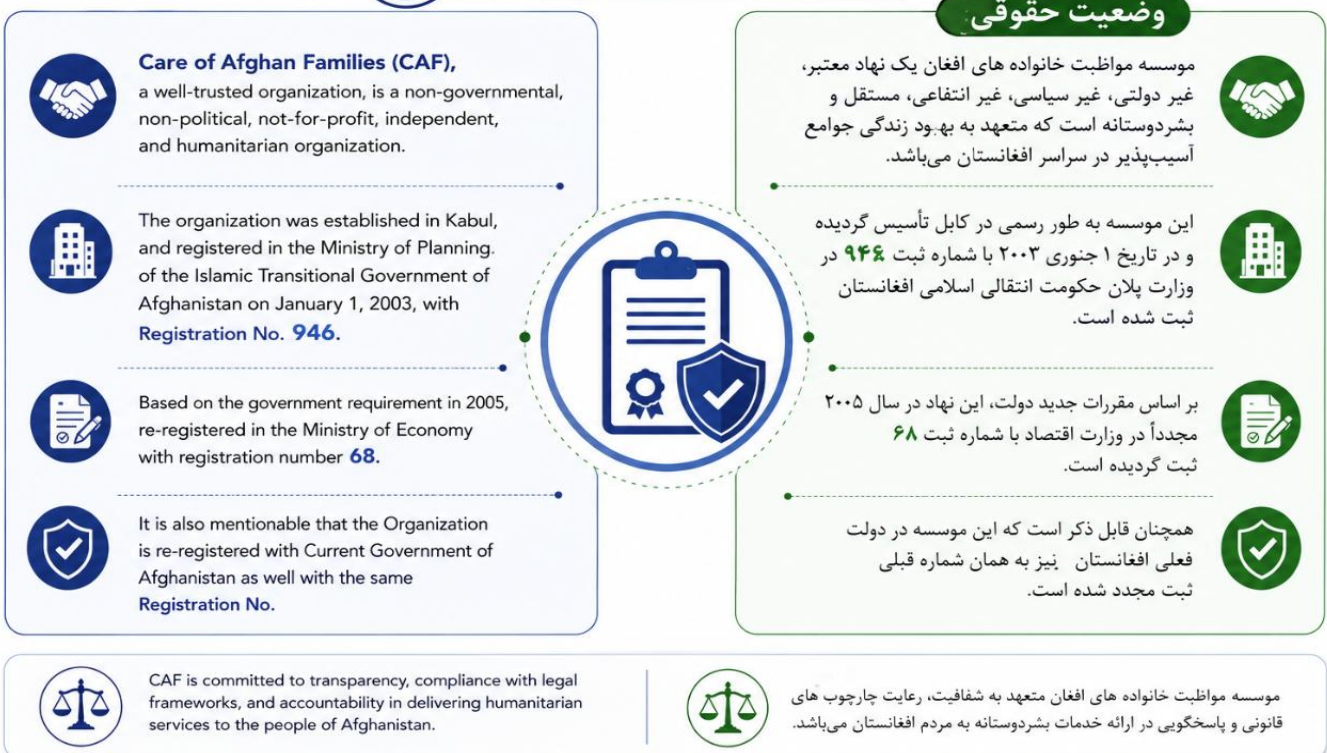
Dr. Sayed Ashuqullah Majidi
Director General,
Care of Afghan Families (CAF)

ORGANIZATIONAL OVERVIEW

VISION, MISSION & CORE VALUES



LEGAL STATUS



Governance structure and leadership team

Care of Afghan Families (CAF) is governed through a multi-tiered structure designed to ensure strategic oversight, operational accountability, and institutional continuity. At the apex is the General Assembly, the organization's highest decision-making body, comprising members from the Trustee Board, Advisory Board, and Management Board. The Trustee Board consists of independent professionals who serve voluntarily and provide fiduciary guidance, strategic advice, and oversight on transparency and efficiency. The Advisory Board, composed of CAF's founding members, holds the highest leadership authority and plays a pivotal role in nominating the Director General, shaping strategic direction, and establishing external partnerships. The Management Board, led by the Director General and including technical, financial, and departmental managers, oversees daily operations and ensures alignment with CAF's strategic plan. Leadership appointments follow structured terms and re-election protocols, with clear mandates for performance, accountability, and neutrality. This governance model reflects CAF's commitment to professionalism, integrity, and sustainable impact across its humanitarian and development initiatives.

موسسه مواظبت خانواده های افغان از طریق یک ساختار چندسطحی اداره می‌شود که هدف آن تأمین نظارت استراتژیک، پاسخدهی به فعالیت‌ها، و تداوم نهادی می‌باشد. در رأس این ساختار، مجمع عمومی قرار دارد که عالی‌ترین مرجع تصمیم‌گیری بوده و شامل اعضای هیئت امناء، هیئت مشورتی، و هیئت اجرایی می‌باشد.

هیئت امناء متشکل از متخصصین مستقل است که به‌صورت داوطلبانه خدمت می‌کنند و مشوره‌های استراتژیک، رهنمودهای مالی، و نظارت بر شفافیت و مؤثریت را فراهم می‌نمایند.

هیئت مشورتی شامل اعضای مؤسس نهاد بوده و بالاترین صلاحیت رهبری را دارا می‌باشد. این هیئت نقش کلیدی در تعیین رئیس عمومی، شکل‌دهی جهت‌گیری استراتژیک، و ایجاد مشارکت‌های بیرونی ایفا می‌کند.

هیئت اجرایی به رهبری رئیس عمومی و با حضور مدیران تخنیک، مالی، و بخش‌های مختلف، مسئولیت نظارت بر فعالیت‌های روزمره و تطبیق برنامه استراتژیک نهاد را به‌عهده دارد.

تعیینات رهبری بر اساس دوره‌های مشخص و پروتکل‌های انتخاب مجدد صورت می‌گیرد، که شامل مکلفیت‌های واضح در زمینه عملکرد، پاسخدهی، و بی‌طرفی می‌باشد. این مدل رهبری، تعهد نهاد خانواده‌های افغان را به حرفه‌گرایی، صداقت، و تأثیر پایدار در برنامه‌های بشردوستانه و انکشافی‌اش بازتاب می‌دهد.



Working Directions



1 HEALTH & NUTRITION

Improving Health, Saving Lives

- Implement BPHS and EPHS services across supported provinces.
- Improve maternal, newborn, infant, and child health outcomes.
- Prevent and control communicable diseases.
- Strengthen nutrition services for women and children.
- Expand equitable access to quality healthcare.



2 COMMUNITY DEVELOPMENT

Building Resilient Communities

- Strengthen local resilience and self-reliance.
- Promote inclusive governance and community participation.
- Support livelihoods and economic opportunities.
- Deliver protection services for vulnerable populations.
- Enhance social cohesion and sustainable development.



3 EDUCATION & RESEARCH

Knowledge for Sustainable Development

- Promote inclusive and equitable education.
- Support operational and applied research.
- Strengthen evidence-based decision making.
- Build workforce skills and institutional capacity.
- Encourage innovation and learning.



4 WOMEN & YOUTH EMPOWERMENT

Empowering Future Leaders

- Enhance skills and leadership opportunities.
- Promote economic empowerment and entrepreneurship.
- Increase participation in social and community development.
- Support gender equality and inclusion.
- Create pathways for self-reliance and resilience.



CAF



CAF maintains its central headquarters in **Kabul**, complemented by established provincial offices in **Logar** and **Samangan**.



Building on this strong foundation, the organization is strategically positioned to expand its services into additional provinces across Afghanistan.



This expansion reflects CAF's commitment to broadening access to quality health, nutrition, and community development interventions, ensuring that more vulnerable populations benefit from its proven expertise and long-standing operational presence.



CAF is committed to improving the lives of Afghan families through **sustainable**, **inclusive**, and **quality interventions** across Afghanistan.

OUR PRESENCE 2025



Kabul
Central Headquarters

Logar
Provincial Office

Samangan
Provincial Office

Let's improve the quality of Life Among Afghan Families

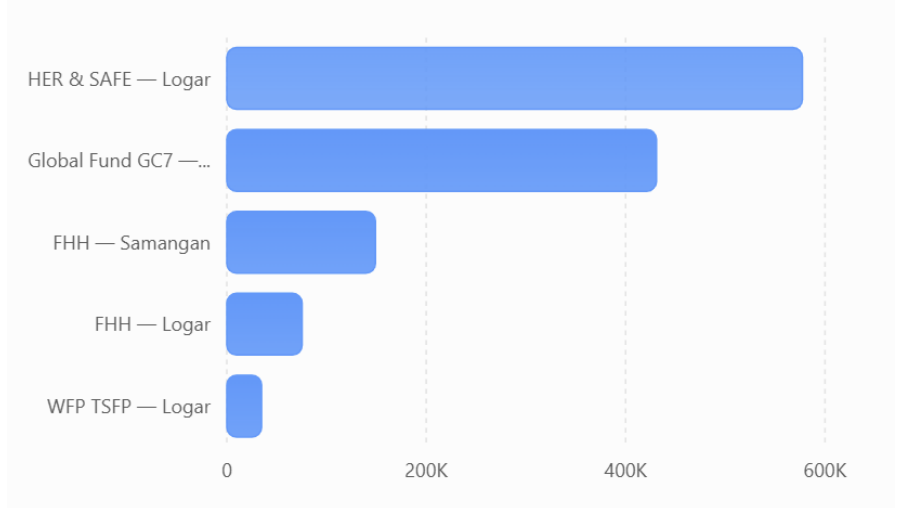
راځئ چې د افغان کورنیو ترمنځ د ژوند کیفیت ښه کړو

EXECUTIVE SUMMARY

During March 20, 2025 to March 20, 2026, Care of Afghan Families (CAF) continued to deliver essential health, nutrition, reproductive health, and communicable disease services to vulnerable communities in Afghanistan. In partnership with the World Bank, Asian Development Bank (ADB), UNICEF, UNFPA, WFP, and UNDP/Global Fund, CAF combined large-scale service delivery with health-system strengthening, community engagement, and strong accountability.

In Logar Province, CAF implemented the HER and SAFE projects, serving a catchment population of 577,418 people through 56 health facilities and 232 health posts. Major achievements included more than 80,000 antenatal care services, 44,000 postnatal care services, and nearly 22,000 institutional deliveries, while several key maternal, child health, immunization, nutrition, and disease-control indicators met or exceeded annual targets.

Programme-specific reach and beneficiary figures reported for March 2025–March 2026.



Through 45 UNFPA-supported Family Health Houses in Logar and Samangan, CAF expanded access to maternal, newborn, child health, nutrition, and family-planning services in underserved communities. In Logar, 14 FHHs served 75,506 beneficiaries and supported 665 safe deliveries, achieving 241% of the annual target. In Samangan, the programme reached 149,089 beneficiaries, with additional community outreach through CHWs.

Nutrition remained a major priority. The WFP-funded TSFP in Logar reached 34,838 beneficiaries and recorded 24,485 new admissions. Cure rates reached 95% among children with moderate acute malnutrition and 85% among pregnant and lactating women, exceeding the SPHERE minimum standard. Approximately 401.5 metric tons of specialized nutritious foods were distributed.

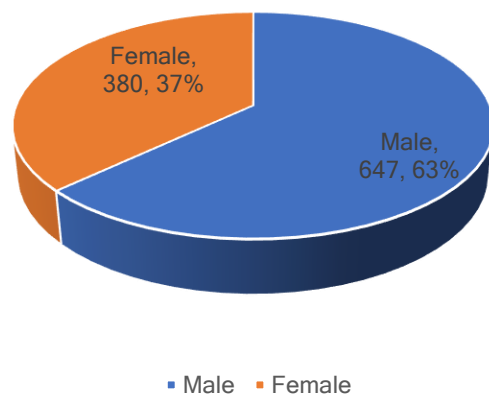
Under the UNDP/Global Fund TB, Malaria and RSSH programme, CAF strengthened facility- and community-based disease prevention, diagnosis and treatment in Logar. The programme supported 415 Community Health Workers, while maintaining strong TB treatment outcomes, malaria testing and treatment, supervision, monitoring, and timely reporting.

CAF also continued investing in the systems behind quality service delivery—human resources, capacity building, infrastructure, medical supplies, monitoring, community participation and coordination with government

authorities and partners. These investments helped sustain essential services despite access constraints, supply shortages, funding limitations, and other operational challenges.

CAF maintained strong financial accountability throughout the year. The report records approximately 6.21 million in organizational expenditure/turnover, with funding from World Bank/UNICEF, ADB/UNICEF, UNFPA, WFP and UNDP. while projects remained subject to independent external audits to promote transparency, accountability, and donor compliance.

CAF Number of Employees during Year 1404 (March 20, 2026)



Overall, 2025 reflected CAF's continued ability to translate donor partnerships into measurable results for Afghan families. Through committed staff, strong community engagement, effective partnerships and accountable management, CAF continued advancing its vision of self-reliant, aware and healthy Afghan families while strengthening access to quality services for communities most in need

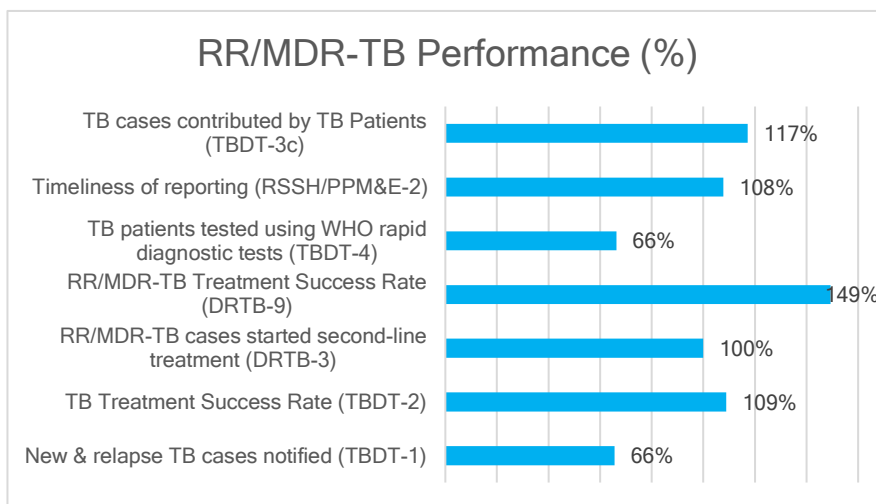


PROGRAMMATIC HIGHLIGHTS

Global Fund GC7 TB, Malaria and RSSH Program:

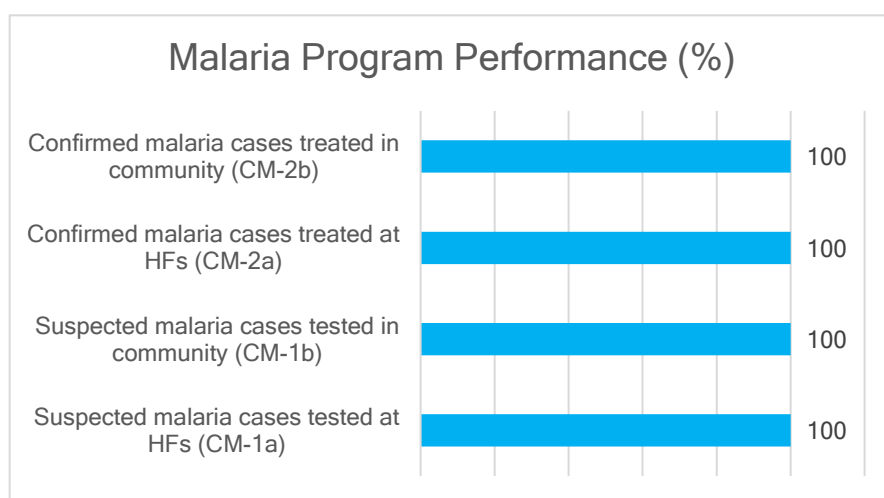
During 2025, Care of Afghan Families (CAF), as a Sub-Recipient of the United Nations Development Programme (UNDP) under the Global Fund GC7 Grant, successfully implemented Tuberculosis (TB), Malaria, and Resilient and Sustainable Systems for Health (RSSH) interventions across Logar Province. Through 19 supported health facilities and community-based networks, the project reached an estimated 430,917 people, strengthening access to essential health services and improving health outcomes.

Under the TB component, CAF notified and treated 563 new and relapse TB cases, achieving 66% of the annual target. The program attained a TB treatment success rate of 98%, representing 109% performance against the target of 90%. A total of 386 TB patients received WHO-recommended rapid diagnostic testing at the time of diagnosis, while 569 household contacts were initiated on TB Preventive



Therapy (TPT). All three identified RR/MDR-TB patients were successfully enrolled on second-line treatment, resulting in 100% treatment initiation and 100% treatment success rates. In addition, TB patients contributed to the identification of 34 TB cases, exceeding the annual target and achieving 117% performance.

Under the malaria component, CAF ensured uninterrupted malaria diagnosis and treatment services through health facilities and community-based platforms. A total of 4,750 suspected malaria cases at public health facilities and 934 suspected malaria cases at community level received parasitological testing. Furthermore, 748 confirmed malaria cases at public health facilities and 10 confirmed malaria cases at



community level received timely first-line antimalarial treatment in accordance with national treatment guidelines.

Through the RSSH component, CAF strengthened monitoring systems, disease surveillance, reporting quality, and coordination mechanisms. The project achieved a reporting timeliness rate of 97%, equivalent to 108%

performance against the target. CAF also supported 415 Community Health Workers (CHWs) and conducted 47 supportive supervision visits, including 19 joint monitoring visits with provincial TB and malaria authorities, contributing to improved service quality and health system performance across Logar Province.

Despite challenges including budget limitations, suspension of selected program activities, shortages of diagnostic supplies, limited access to GeneXpert services, and

low community awareness, CAF maintained strong coordination with UNDP, NTP, MVDP, provincial health authorities, and community networks to sustain service delivery and strengthen disease control efforts.

Overall, the project made a significant contribution to improving health outcomes and strengthening health system resilience in Logar Province, demonstrating CAF's capacity to deliver high-quality, community-centered health interventions under the Global Fund GC7 Program.



Health Emergency Response (HER) & Strengthening Access to Essential Food Security and Health Services (SAFE) Project Logar Province

During the reporting period from March 2025 to March 2026, Care of Afghan Families (CAF) continued its mission of improving the quality of life among Afghan families through the successful implementation of the Health Emergency Response (HER) Project and the Strengthening Access to Essential Food Security and Health Services (SAFE) Project in Logar Province. These projects were implemented under the stewardship of UNICEF and financed by the World Bank and the Asian Development Bank (ADB), ensuring uninterrupted delivery of the Basic Package of Health Services (BPHS) and Essential Package of Hospital Services (EPHS) to vulnerable communities across the province.

The projects served a catchment population of **577,418** people, including 162,017 boys, 151,122 girls, 132,253 men, and 132,026 women. Particular emphasis was placed on reaching vulnerable groups, including pregnant and lactating women, women of reproductive age, children under five years of age, persons with disabilities, internally displaced persons, returnees, and communities living in hard-to-reach areas. Through these interventions, CAF continued to ensure equitable access to quality healthcare services while contributing to the reduction of maternal, newborn, infant, and child mortality, strengthening disease prevention and control efforts, and improving nutrition outcomes throughout Logar Province.



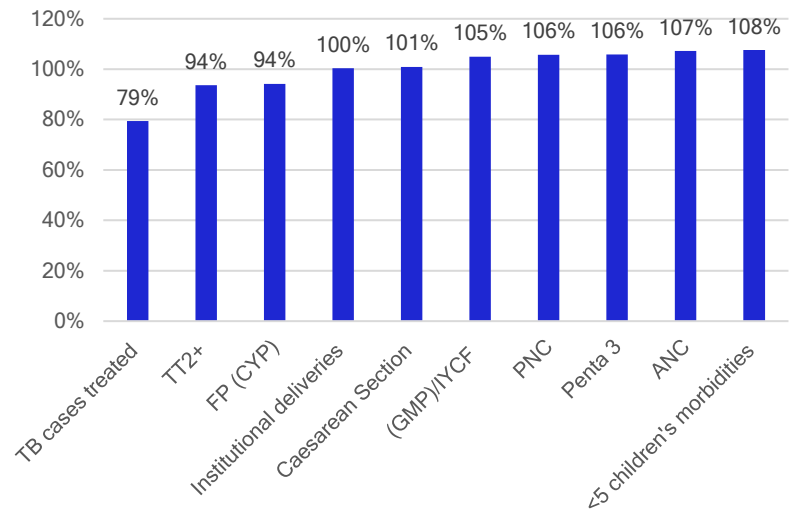
Healthcare services were delivered through an extensive network of 56 health facilities and 232 health posts. The facility network included 1 Provincial Hospital, 3 District Hospitals, 2 Comprehensive Health Center Plus (CHC+) facilities, 8 Comprehensive Health Centers (CHCs), 19 Basic Health Centers (BHCs), 13 Sub Health Centers (SHCs), 8 Family Health Houses (FHHs), 1 Mobile Health Team (MHT), and 1 Prison Health Facility. Together, these 288 service delivery points formed one of the largest healthcare delivery networks in the province, ensuring continuity of care from community level through referral hospitals and enabling access to essential health services for both urban and rural populations.

Throughout the year, CAF achieved remarkable progress across maternal, newborn, child health, nutrition, communicable disease control, and hospital services. Maternal health indicators consistently exceeded annual targets, demonstrating increased utilization of skilled healthcare services and growing community confidence in health facilities. More than 80,000 women received antenatal care services, while over 44,000 mothers benefited from postnatal care. Health facilities supported nearly 22,000 institutional deliveries, ensuring that thousands of mothers gave birth under the supervision of skilled health professionals. Family planning services exceeded planned targets, while TT2+ vaccination coverage achieved one of the highest performance levels of all key indicators, contributing significantly to the prevention of maternal and neonatal tetanus and supporting safer pregnancies and childbirth.

Child health and nutrition services remained at the center of CAF's programming. Hundreds of thousands of children received outpatient consultations, treatment for common childhood illnesses, immunization services, nutrition screening, growth monitoring, and counseling. Child morbidity management exceeded annual targets, reflecting both high service utilization and improved access to treatment for children. Nutrition interventions, including Growth Monitoring Program (GMP) and Infant and Young Child Feeding (IYCF) services, reached more than 130,000 children and caregivers. Immunization performance remained strong, with PENTA3 coverage significantly surpassing annual targets, contributing to improved protection against vaccine-preventable diseases and strengthening community immunity.

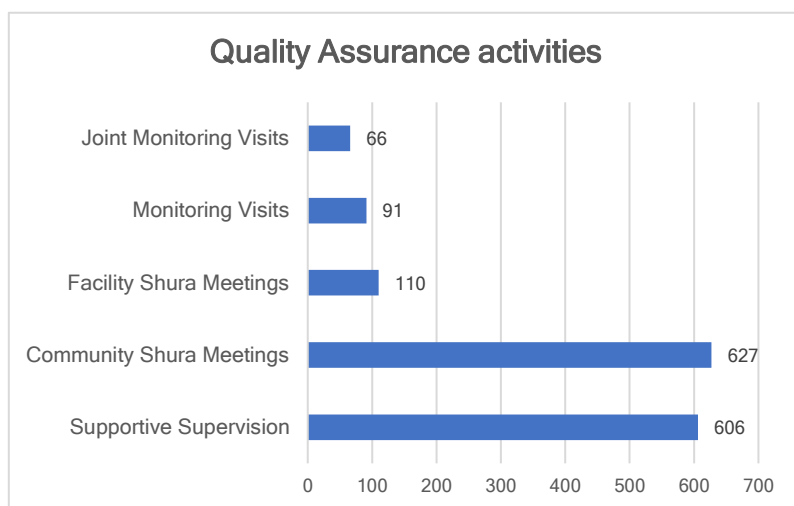
CAF also maintained a strong focus on communicable disease prevention and control. Tuberculosis case detection, treatment, and follow-up services exceeded annual targets, reflecting effective coordination between health facilities, community health workers, and disease surveillance systems.

**UNICEF HER & SAFE Project Logar
Performance Vs Targets Indicators
Apr 2025 to Mar 2026**



During the reporting period, CAF rapidly responded to outbreaks of measles, scabies, and dog bites through coordinated emergency response mechanisms, distribution of emergency supplies, community awareness activities, and strengthened surveillance systems. These efforts contributed to reducing disease transmission risks and improving public health preparedness across the province.

Quality improvement and health system strengthening remained core priorities throughout implementation. CAF conducted 606 supportive supervision visits across BPHS and EPHS facilities, providing technical guidance, mentoring, and on-the-job coaching to healthcare workers and facility managers. In addition, 91 monitoring visits were undertaken by UNICEF extenders and CAF technical teams to assess service quality and compliance with national standards. Strong collaboration with the Provincial Public Health Directorate (PPHD) resulted in 66 joint monitoring visits, enabling timely identification and resolution of operational challenges. Community engagement remained equally important, with 110 facility health shura meetings and 627 community health shura meetings conducted during the year, strengthening accountability, community ownership, and participation in health service delivery.



Pharmaceutical and supply chain management systems remained robust throughout the reporting period. CAF ensured the timely distribution of medicines, medical consumables, laboratory reagents, family planning commodities, pneumonia kits, and other essential supplies to all supported facilities. Monthly stock monitoring and consistent utilization of the mSupply system strengthened transparency, accountability, and forecasting accuracy. Strategic redistribution of short-expiry medicines prevented wastage while ensuring uninterrupted availability of critical commodities across the health network.

Significant investments were also made in logistics, infrastructure, and operational support. Health facilities received oxygen supplies, fuel, gas, hygiene materials, stationery, and patient food on a regular basis. CAF repaired ambulances, generators, water systems, solar systems, and medical equipment in more than 30 facilities. Winterization activities were completed before the onset of winter, while nine motorcycles were distributed to strengthen immunization outreach activities. Infrastructure improvements included installation of fire extinguishers, facility electrical upgrades, and construction of partitions for nutrition counseling services, all contributing to safer and more functional healthcare environments.



Human resource development remained a major pillar of CAF's health programming. During the year, CAF recruited 103 additional field-level personnel, including doctors, specialists, midwives, vaccinators, psychosocial counselors, community health supervisors, guards, cleaners, and other support staff. By the end of the reporting period, CAF maintained a workforce of 727 personnel across BPHS and EPHS facilities, including 476 male and 251 female staff members. This strong workforce enabled the organization to maintain service continuity and respond effectively to evolving community needs.

Capacity building initiatives were implemented on an unprecedented scale. More than 1,000 health workers and community-based personnel participated in training programs covering Infection Prevention and Control (IPC), Gender-Based Violence (GBV), Maternal Infant and Young Child Nutrition (MIYCN), Tuberculosis DOTS management, Vaccination, Child Safeguarding, Mental Health, Psychosocial Support, Cold Chain Management, Rational Use of Drugs (RUD), Emergency Care, gender sensitivity, clinical quality improvement, and orthopedic

specialization. Furthermore, all 415 Community Health Workers serving 231 health posts received two rounds of refresher training during the year, significantly strengthening community-based service delivery, disease surveillance, referral systems, and health promotion activities.

CAF also maintained active participation in national and provincial coordination mechanisms, including PHCC, ACCASUS, PPMU, GDP, PQA, UNICEF technical forums, and other health sector platforms. These engagements ensured alignment with national priorities, strengthened collaboration among stakeholders, facilitated knowledge sharing, and enhanced accountability to both communities and development partners.

The achievements realized through the HER and SAFE projects demonstrate CAF's strong institutional capacity and long-standing commitment to improving health outcomes for Afghan families. Through effective partnerships with UNICEF, the World Bank, ADB, the Ministry of Public Health, the Provincial Public Health Directorate, community leaders, and local stakeholders, CAF contributed significantly to strengthening the health system in Logar Province, expanding access to quality healthcare services, improving maternal and child health outcomes, enhancing nutrition services, controlling communicable diseases, and building healthier, more resilient communities. These accomplishments reflect CAF's vision of self-reliant, aware, and healthy Afghan families and its enduring commitment to delivering equitable, high-quality, and sustainable healthcare services across Afghanistan.



CAF *delivers lifesaving healthcare to vulnerable communities.*

Ensuring that women, children, and underserved populations access quality care when they need it most.

Surkhab CHC, Logar Province



د CAF مؤسسې له خوا د HER او SAFE پروژه د لوگر په ولایت کې تطبیق شوه، چې د نړیوال بانک له خوا د یونیسف له لارې تمویل شوې وه. موږ د ۵۷۷'۴۱۸ وګړو روغتیايي خدمات وړاندې کړي (چې پکې ۱۶۲'۰۱۷ هلکان، ۱۵۱'۱۲۲ نجونې، ۱۳۲'۲۵۳ نارینه، او ۱۳۲'۰۲۶ ښځې شاملې وې). دا پروژه ۵۶ د روغتیايي مرکزونو ملاتړ کوي، چې پکې ۳ دولسوالي روغتونونه، ۲ CHC+ مرکزونه، ۸ CHC مرکزونه، ۱۹ BHC مرکزونه، ۱۳ SHC مرکزونه، ۱ ګرځنده روغتیايي ټیم (MHT)، ۸ کورنۍ روغتیايي ځای (FHH)، او ۱ دمحبس روغتیايي مرکز به کې شامل وو، سربېره پر دې ۲۳۲ دجامعي روغتیايي پوستې او ۱ ولایتي روغتون د EPHS تر چتر لاندې شامل دی.



د راپور ورکولو مودې په جریان کې، د لوگر ولایت د BPHS او EPHS پروژه د ټولو څارل شویو شاخصونو له مخې د پام وړ بریا ترلاسه کړې ده. د میندو روغتیايي خدمتونو په ځانګړې ډول لور کارول شوي، د امیندواری پاملرنه (ANC) د ټاکل شوي 81,688 هدف پر ځای 87,547 ته رسېدلې چې 107% لاسته راوړنه ښیي. روغتون کې زیږونونه د 22,148 هدف پر ځای 22,242 ته رسېدلي، چې 100% لاسته راوړنه ده. د زېږون وروسته پاملرنه (PNC) د 44,688 هدف پر ځای 47,242 ته رسېدلې، چې 106% ښیي. د TT2+ پوښښ د 70,264 هدف پر ځای 65,789 ته رسېدلی، چې 94% لاسته راوړنه ده.



د کورنۍ پلان جوړونې هڅې هم اغېزمنې وې، CYP شاخص د 12,908 هدف پر ځای 12,145 ته رسېدلی، چې 94% ښیي. د واکسین تطبیق قوي پاتې شوی، د PENTA3 پوښښ د 22,036 هدف پر ځای 23,318 ته رسېدلی، چې 106% لاسته راوړنه ده. جراحي خدمات د تیر کال په پرتله ثابته پاتې شوې، د سیزارین عملیاتو شمېر د 1,344 هدف پر ځای 1,356 ته رسېدلی، چې 101% ښیي.

د ماشوم روغتیا شاخصونه هم ښه فعالیت درلود، د ماشومانو د ناروغیو مدیریت د 434,480 هدف پر ځای 467,338 ته رسېدلی، چې 108% ښیي. د ودې څارنې پروګرام GMP/IYCF د 133,020 هدف پر ځای 139,574 ته رسېدلی، چې 105% لاسته راوړنه ده. د توبرکلوز ناروغانو درملنه د 432 هدف پر ځای 343 ته رسېدلې، چې 79% ښیي.



دا پایلې په ټوله کې د پروژې د عملیاتي اغېزمنتیا، د ټولې ښکېلتیا، او د CAF مهم رول په ګوته کوي، چې د لوگر ولایت د روغتیايي سیستم ځواب ویلو وړتیا یې پیاوړې کړې ده.

FHH Project Logar and Samangan Province



FHH Project Performance Logar Province:

During 2025, Care of Afghan Families (CAF), with support from the United Nations Population Fund (UNFPA), successfully operated 14 Family Health Houses (FHHs) across Logar Province, providing essential maternal, newborn, child health, nutrition, and family planning services to underserved and hard-to-reach populations.

Maternal health services remained a core component of project implementation. During the year, 1,865 women received their first antenatal care (ANC) visit, while 747 women completed their fourth ANC visit. A total of 678 women received their first postnatal care (PNC) visit and 828 women completed their third PNC visit. Skilled birth attendants conducted 665 safe deliveries, achieving 241% of the annual target and contributing to improved maternal and newborn health outcomes.

The referral system played a vital role in managing obstetric complications. During the reporting period, 204 complicated maternal health cases were referred to Emergency Obstetric and Newborn Care (EmONC) facilities, substantially exceeding planned targets and ensuring timely access to specialized healthcare services. However, no UNFPA-supported ambulance services were available in Logar Province during 2025, requiring alternative referral arrangements when emergency transportation was needed.

Child health services demonstrated strong performance, with 21,983 outpatient consultations provided to children under five years of age. Family Health Action Groups (FHAGs) reached 5,155 beneficiaries through health promotion and awareness activities, strengthening community understanding of maternal health, child health, nutrition, and preventive healthcare practices.

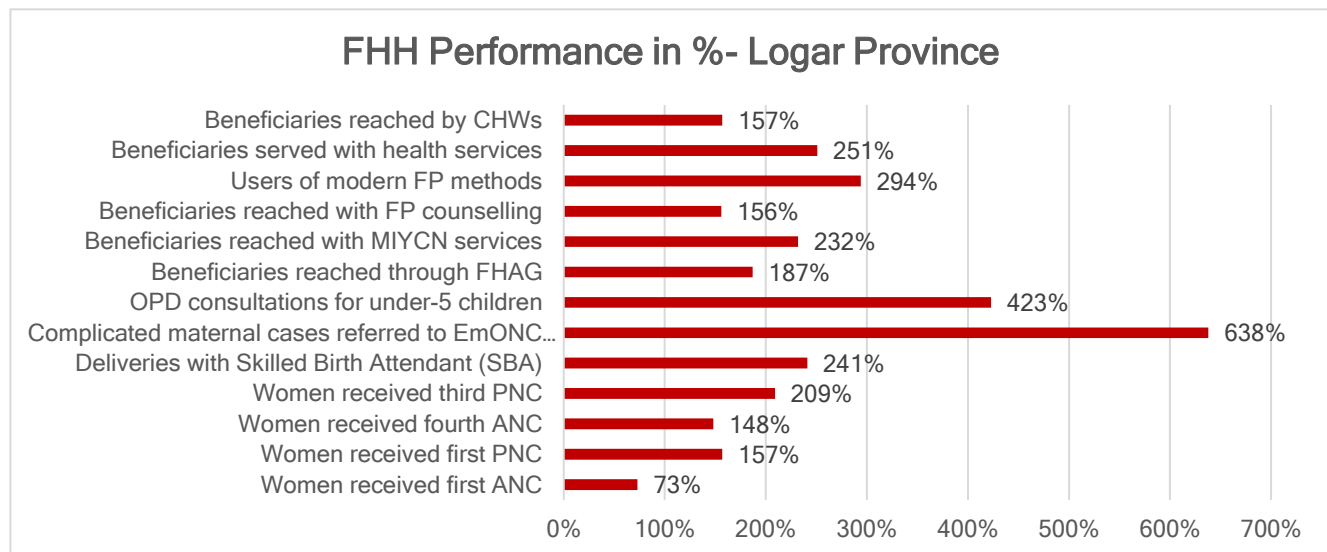
Nutrition interventions remained a key area of support. A total of 11,579 beneficiaries received Maternal, Infant and Young Child Nutrition (MIYCN) services, while 459 malnutrition cases were identified and referred to Therapeutic Feeding Units (TFUs) for specialized care. Community outreach activities further enhanced awareness of nutrition and healthy childcare practices.

The project also strengthened reproductive health services. A total of 5,256 beneficiaries received family planning information and counselling, while 1,974 clients adopted modern family planning methods. These achievements contributed to improved reproductive health awareness and increased utilization of family planning services.

Overall, the project provided health services to 75,506 beneficiaries throughout the year. Community Health Workers (CHWs) reached an additional 3,020 beneficiaries through health education and community mobilization activities, supporting increased awareness and healthcare utilization.

Several challenges affected implementation during the reporting period, including geographical barriers, limited referral transportation, cultural constraints affecting healthcare-seeking behavior, and the absence of immunization services within the FHH project. Nevertheless, CAF maintained uninterrupted service delivery through effective coordination with provincial health authorities, regular supportive supervision, community engagement, and continuous monitoring of service quality.

Through the operation of 14 Family Health Houses, CAF significantly improved access to quality healthcare services and strengthened maternal, newborn, child health, nutrition, and family planning outcomes across Logar Province.



په ۲۰۲۵ کال کې د افغان کورنیو د پاملرنې مؤسسه (CAF) د UNFPA په مالي ملاتړ د لوگر ولایت په ۱۴ کورنیو روغتیايي مرکزونو (FHHs) کې د مور، ماشوم، واکسين د SAFE پروژې په مرسته، تغذي او کورنۍ تنظيم خدمات په برياليتوب سره وړاندې کړل. د پروژې له لارې ۱,۸۶۵ ميندو ته د اميندواری لومړنۍ معاینې، ۷۴۷ ميندو ته څلورمې ANC او ۶۷۸ ميندو ته لومړنۍ PNC خدمات وړاندې شول. همدارنگه ۸۲۸ ميندو درېيم PNC روغتیايي خدمات تر لاسه کړل او ۶۶۵ خوندي ولادتونه د مسلکي قابلو تر څارنې لاندې ترسره شول.

پروژې روغتیايي کارکونکو ۲۰۴ پېچلې مورنې قضیې د تخصصي درملنې لپاره EmONC روغتیايي مرکزونو ته راجع کړې. د ماشومانو روغتیايي خدمتونو په برخه کې ۲۱,۹۸۳ د پنځو کلونو څخه کم عمره ماشومانو ته د OPD خدمات وړاندې شول. د تغذي پروگرام له لارې ۱۱,۵۷۹ کسانو ته د مور او ماشوم د تغذي خدمتونه ورسول شول او ۴۵۹ د خوارځواکۍ پېښې د درملنې ځانگړو مرکزونو ته راجع شوې.

همدارنگه ۵,۲۵۶ کسانو ته د کورنۍ تنظيم مشورې ورکړل شوې او ۱,۹۷۴ کسانو د عصري کورنۍ تنظيم له لارو چارو څخه گټه واخيسته. په ټوليز ډول ۷۵,۵۰۶ کسانو روغتیايي خدمات تر لاسه کړل او ۳,۰۲۰ نور کسان د ټولنې روغتیايي کارکونکو له لارې تر پوهاوي او خدمتونو لاندې راغلل. سره له دې چې د ترانسپورت، جغرافيايي لاسرسي او واکسيناسيون د خدمتونو نشتون په بعضو مراکزو کې ځينې ننګونې موجودې وې، CAF ولايتي ټيم وټوانيد چې په لوگر ولايت کې د باکيفيته روغتیايي خدمتونو دوام او پراختيا يقيني کړي.

FHH Project Performance Samangan Province:

During 2025, Care of Afghan Families (CAF), with support from the United Nations Population Fund (UNFPA), successfully operated 31 Family Health Houses (FHHs) across Samangan Province, providing comprehensive maternal, newborn, child health, nutrition, immunization, and family planning services to rural and underserved communities.

The project achieved remarkable results in maternal

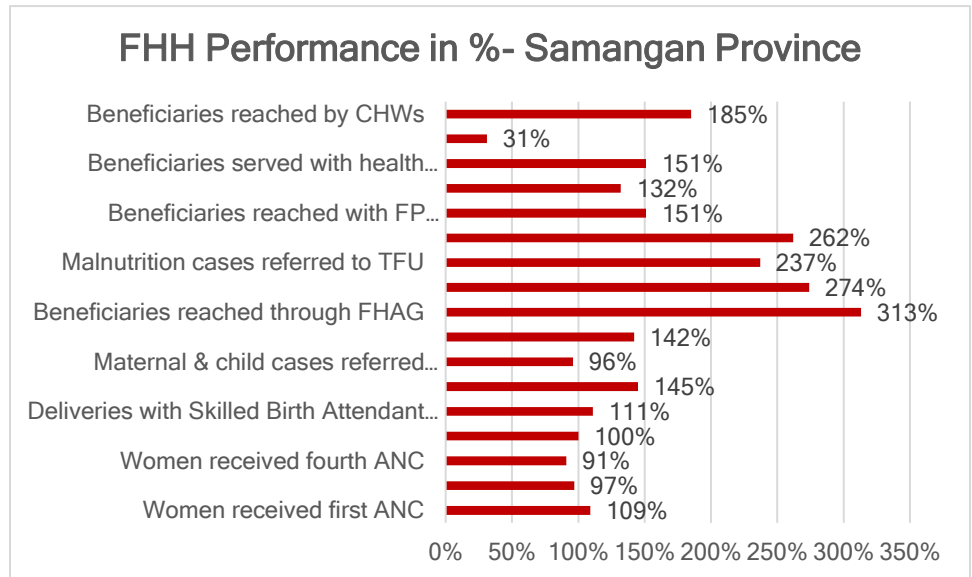
health service delivery. A total of 3,428 women received their first antenatal care (ANC) visit, achieving 109% of the annual target, while 1,461 women completed their fourth ANC visit. Furthermore, 1,514 women received their first postnatal care (PNC) visit and 1,373 women completed their third PNC visit. Skilled birth attendants supported 1,474 safe deliveries, exceeding annual targets and contributing significantly to safer motherhood and improved newborn health outcomes.

Referral mechanisms remained effective throughout the year. A total of 157 complicated maternal health cases were referred to higher-level Emergency Obstetric and Newborn Care (EmONC) facilities, while 115 maternal and child health emergencies were transported through UNFPA-supported ambulances. These referrals ensured timely access to lifesaving care for women and children requiring specialized services.

Child health services recorded strong performance, with 46,861 outpatient consultations provided to children under five years of age. Community engagement activities conducted through Family Health Action Groups (FHAGs) reached 21,094 beneficiaries, significantly increasing awareness of maternal health, child health, nutrition, hygiene, and preventive healthcare practices.

Nutrition interventions contributed substantially to improved child and maternal health. A total of 41,034 beneficiaries received Maternal, Infant and Young Child Nutrition (MIYCN) services, while 883 malnutrition cases were identified and referred to Therapeutic Feeding Units (TFUs) for specialized treatment and follow-up care.

Preventive and reproductive health services also demonstrated strong achievements. The project reached 7,252 beneficiaries with immunization services through 13 FHHs providing EPI services, while 11,289 individuals received family planning information and counselling. Additionally, 4,746 clients adopted modern family planning methods, supporting informed reproductive health decisions and healthy birth spacing.



Overall, the project delivered health services to 149,089 beneficiaries during the reporting period. Community Health Workers (CHWs) reached an additional 4,266 beneficiaries through health promotion and awareness activities, strengthening community engagement and service utilization.

Despite challenges such as transportation constraints for some FHAG members, difficult geographical access, and increasing demand for health services, CAF maintained uninterrupted service delivery through regular monitoring, supportive supervision, continuous coordination with provincial health authorities, and strong community participation. These achievements demonstrate CAF's commitment to improving maternal and child health outcomes and expanding access to quality healthcare services throughout Samangan Province.



در سال ۲۰۲۵، مؤسسه مراقبت از خانواده‌های افغان (CAF) با حمایت مالی صندوق جمعیت سازمان ملل متحد (UNFPA)، از طریق ۳۱ آشیانه های صبحی (FHH) در ولایت سمنگان خدمات جامع صحت مادر و طفل، تغذیه، واکسیناسیون و تنظیم خانواده را به جوامع روستایی و محروم ارائه نمود.

در جریان سال، ۳۴۲۸ مادر از خدمات اولین مراقبت‌های قبل از ولادت (ANC) و ۱۴۶۱ مادر از چهارمین از خدمات اولین مراقبت‌های قبل از ولادت ANC بهره مند شدند. همچنان ۱۵۱۴ مادر خدمات اولین مراقبت‌های بعد از ولادت (PNC) و ۱۳۷۳ مادر سومین مراقبت‌های بعد از ولادت PNC را دریافت کردند. قابله‌های مسلکی ۱۴۷۴ ولادت مصئون را مدیریت نمودند که نقش مهمی در بهبود صحت مادران و نوزادان داشت.

در بخش رجعت دهی صبحی، ۱۵۷ واقعه پیچیده صبحی مادران به مراکز تخصصی EmONC راجع گردید و ۱۱۵ واقعه اضطراری مادر و طفل از طریق آمبولانس‌های حمایت‌شده توسط UNFPA انتقال داده شد. همچنان ۴۶۸۶۱ طفل زیر پنج سال از خدمات سرپایی (OPD) مستفید شدند.

در بخش تغذیه، ۴۱۰۳۴ تن خدمات تغذیه مادر، طفل و شیرخوار دریافت نمودند و ۸۸۳ واقعه سوءتغذی به مراکز درمانی تخصصی رجعت دهی گردید. علاوه بر آن، ۲۵۲۷ تن از خدمات واکسیناسیون بهره‌مند شدند، ۱۱۲۸۹ نفر مشوره تنظیم خانواده دریافت کردند و ۴۷۴۶ تن از روش‌های مدرن تنظیم خانواده استفاده نمودند.

در مجموع ۱۴۹۰۸۹ نفر از خدمات صبحی پروژه مستفید شدند و ۴۲۶۶ نفر دیگر از طریق فعالیت‌های آگاهی‌دهی کارکنان صبحی جامعه (CHWs) تحت پوشش قرار گرفتند. با وجود چالش‌هایی چون مشکلات ترانسپورتی، دشواری دسترسی به برخی مناطق و افزایش



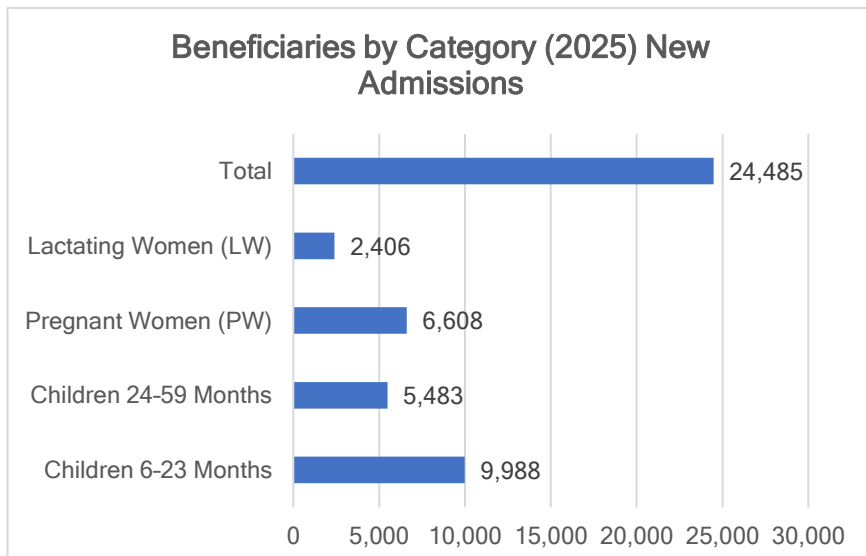
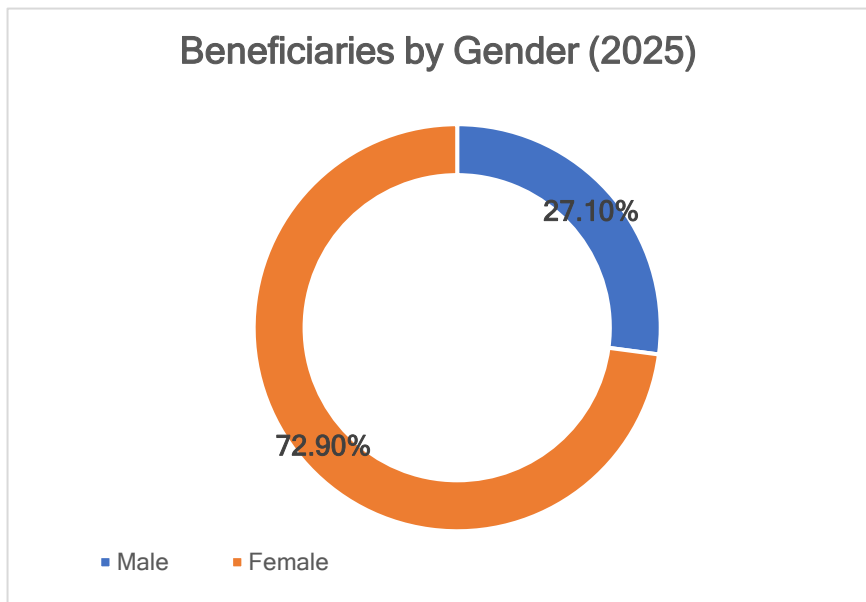
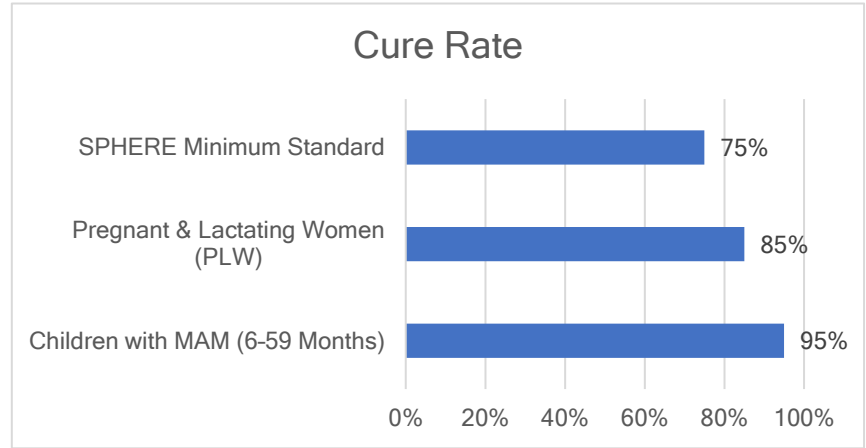
تقاضا برای خدمات صحتی، CAF توانست با نظارت دوامدار، هماهنگی مؤثر با مسئولین صحتی ولایت و مشارکت فعال جامعه، خدمات صحتی را بدون وقفه ادامه داده و دسترسی مردم به خدمات باکیفیت صحتی را در سراسر ولایت سمنگان بهبود بخشد.

Logar Targeted Supplementary Feeding Program (TSFP)

During the 2025, the Targeted Supplementary Feeding Program (TSFP) in Logar Province, funded by the World Food Programme (WFP) and implemented by Care of Afghan Families (CAF), provided life-saving nutritional support to 34,838 beneficiaries, including 26,095 pregnant women and 8,743 lactating women, as well as children aged 6–59 months suffering from moderate acute malnutrition (MAM).

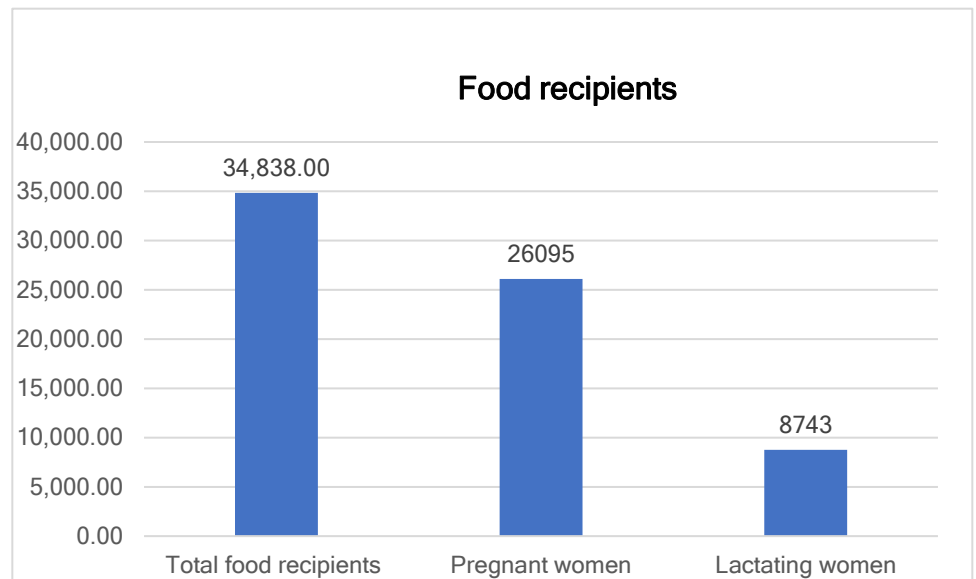
At the beginning of the reporting period, 5,044 beneficiaries were enrolled in the program. During the year, 24,485 new admissions were recorded, comprising 6,556 males (27.1%) and 17,638 females (72.9%), reflecting the program's strong focus on nutritionally vulnerable women and young children. By the end of December 2025, the program maintained 7,107 active beneficiaries. A total of 22,422 beneficiaries exited the program, including 20,501 cured cases, 1,587 defaulters, 235 referrals, and only 2 deaths, demonstrating strong treatment outcomes and effective case management.

Among children aged 6–23 months, 9,988 new admissions were recorded, with 9,463 exits and 2,273 children remaining in treatment at the end of the reporting period. Children aged 24–59 months accounted for 5,483 new admissions, with 5,234 exits and 805 remaining active cases. The program also supported 6,608 pregnant women and 2,406 lactating women, of whom 5,658 and 2,067,



respectively, successfully exited the program, leaving 3,185 pregnant women and 844 lactating women actively enrolled at year-end.

Program performance remained well above international standards. The MAM cure rate among children reached 95%, while the acute malnutrition cure rate among pregnant and lactating women reached 85%, both exceeding the SPHERE minimum standard of 75%. Mortality remained negligible throughout the reporting period, reflecting timely screening, quality nutritional counseling, effective referral systems, and continuous follow-up by health facility and community-based teams.



To support treatment and recovery, the program distributed approximately 401.5 metric tons of specialized nutritious foods, including 283.9 metric tons of Super Cereal WSB and 117.6 metric tons of Ready-to-Use Supplementary Food (RUSF). These commodities played a critical role in improving nutritional status among vulnerable children and women across Logar Province.

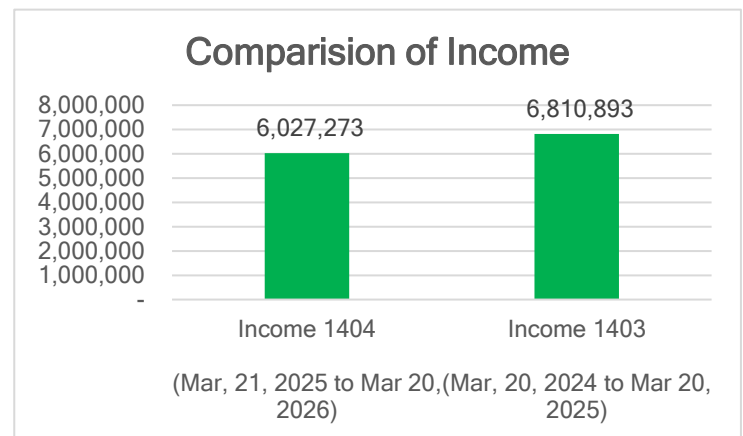
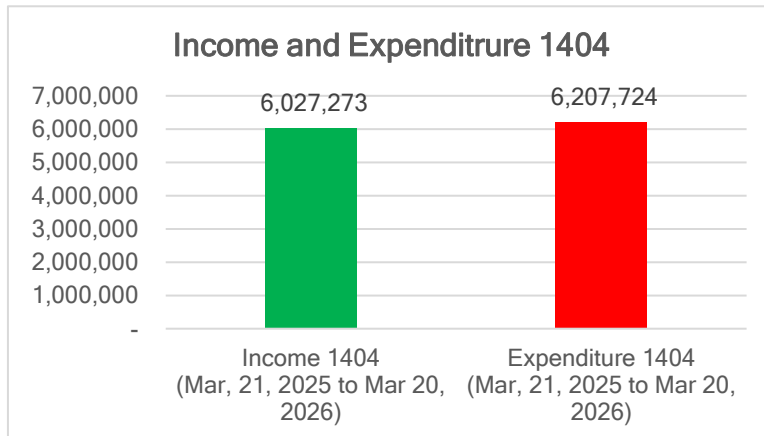
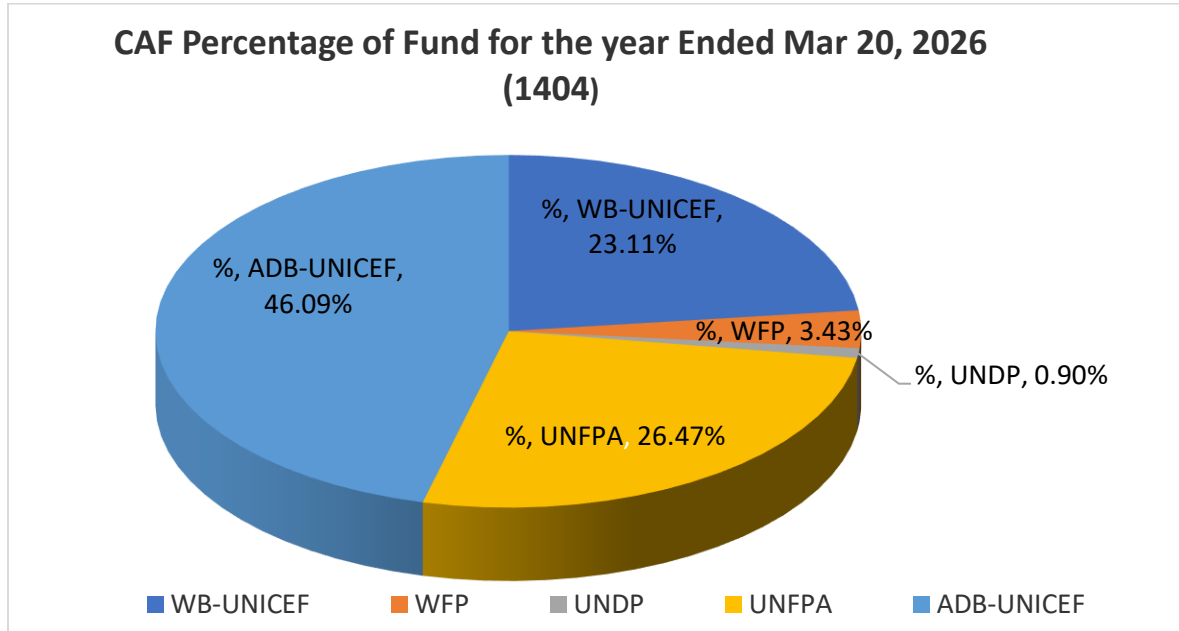
The achievements of the TSFP demonstrate strong collaboration between health facilities, community health workers, nutrition counselors, and WFP-supported supply chain systems. Continued investment in community outreach, nutrition screening, behavior change communication, and timely commodity supply will be essential to sustain these gains and further reduce malnutrition among vulnerable populations in Logar Province.



FINANCIAL HIGHLIGHTS:

The Total Financial Turnover of the Organization was 6,207,724 for this reporting Period. CAF's donors during the period are the World Bank/UNICEF, ADB/UNICEF, UNFPA, WFP and UNDP.

In total, CAF paid an amount of 19,832,210 AFS withholding tax as per Afghanistan income tax law to the government account during the year end on March 20, 2026. The collected tax includes the payroll tax, vehicle tax, purchase tax, and house rental taxes in the provincial offices and main premises of CAF. CAF has always paid its monthly collected tax to the government timely.



All projects are audited through independent and external audit firms appointed by both the donor agencies and the CAF Board of Directors, ensuring transparency, accountability, and compliance with financial and operational standards.

CAF'S DONORS AND STAKEHOLDERS

CAF extends its sincere appreciation to all donors and stakeholders whose generous contributions and collaboration in 2025 were instrumental in enabling the successful implementation of our health and nutrition projects across Afghanistan.

- **World Bank (WB)/UNICEF:** The World Bank, through UNICEF, was CAF's principal donor in 2025, contributing **23.11%** of total funding. This support was pivotal in implementing the **Health Emergency Response (HER)** projects in **Logar province**, enhancing access to essential maternal and child health services.
- **ADB/UNICEF:** The Asian Development Bank, through UNICEF, was CAF's principal donor in 2025, contributing **46.09%** of total funding. This support was pivotal in implementing the **SAFE** projects in **Logar province**, enhancing access to essential maternal and child health services.



- **United Nations Population Fund (UNFPA):** UNFPA provided **26.47 %** of CAF's funding, significantly strengthening reproductive health interventions and capacity-building efforts for frontline workers.



United Nations Population Fund

- **World Food Program (WFP):** With a contribution of **3.43%**, WFP supported community-based nutrition initiatives aimed at reducing malnutrition and micronutrient deficiencies.



- **United Nations Development Program (UNDP):** UNDP's contribution of **0.9%** supported TB, Malaria and RSSH components of health system.



AUDITED FINANCIAL STATEMENTS:

Statement of Financial Position:

CARE OF AFGHAN FAMILIES (CAF)
STATEMENT OF FINANCIAL POSITION
AS AT MARCH 20, 2026

		1404		1403	
	Note	March 20, 2026		March 20, 2025	
		AFN	US\$	AFN	US\$
ASSETS					
<i>Current assets</i>					
Receivable from donors	3	84,850,417	1,322,970	103,068,982	1,461,453
Security deposits	4	275,087	4,289	283,862	4,025
Cash and cash equivalents	5	39,743,781	619,677	71,119,484	1,008,429
		<u>124,869,285</u>	<u>1,946,936</u>	<u>174,472,328</u>	<u>2,473,908</u>
<i>Non - Current assets</i>					
Operating fixed assets	6	2,700,276	42,102	1,343,524	19,050
		<u>127,569,561</u>	<u>1,989,038</u>	<u>175,815,852</u>	<u>2,492,958</u>
TOTAL ASSETS					
LIABILITIES AND FUNDS					
<i>Current liabilities</i>					
Deferred grant income - Restricted	7	16,258,609	253,501	16,719,618	237,074
Accrued and other liabilities	8	101,433,227	1,581,526	154,650,907	2,192,852
		<u>117,691,837</u>	<u>1,835,027</u>	<u>171,370,525</u>	<u>2,429,926</u>
<i>Funds</i>					
Accumulated core fund BF		7,624,994	118,887	4,445,326	63,032
Revaluation reserve		2,252,730	35,124	-	-
Granted assets reserves		-	-	-	-
		<u>9,877,724</u>	<u>154,011</u>	<u>4,445,326</u>	<u>63,032</u>
Contingencies & Commitments		-	-	-	-
		<u>127,569,561</u>	<u>1,989,038</u>	<u>175,815,852</u>	<u>2,492,958</u>
TOTAL LIABILITIES AND FUNDS					

The annexed notes from 1 to 15 are an integral part of these financial statements.

SFAI AKAS

Director General

Dr. Sayed Ashuqullah Majidi

Finance Director

Mohammad Edriss Yousufy

Statement of Income and Expenditure:

CARE OF AFGHAN FAMILIES (CAF) STATEMENT OF INCOME AND EXPENDITURE FOR THE YEAR ENDED 20 MARCH 2026

	Note	1,404 20 March 2026		1,403 20 March 2025	
		AFN	US\$	AFN	US\$
INCOME					
Project income	9	400,699,312	6,017,594	487,975,474	6,888,754
Other income	10	620,817	9,680	(5,491,202)	(77,862)
		401,320,129	6,027,273	482,484,273	6,810,893
EXPENDITURE					
Direct operating cost	11	363,783,678	5,672,040	441,938,994	6,266,416
Indirect operating cost	12	34,356,783	535,684	39,624,439	561,850
Bad debt expense	13	-	-	590,715	8,376
		398,140,461	6,207,724	482,154,148	6,836,642
Deficit of income over expenditure		3,179,668	49,577	330,125	4,681
Accumulated core fund brought forward		4,445,326	63,032	3,813,186	54,069
Exchange gain/loss on core fund		-	6,278	302,015	4,282
Accumulated core fund carried forward		7,624,994	118,887	4,445,326	63,032

The annexed notes from 1 to 15 are an integral part of these financial statements.

SFAI AKAS

Director General

Dr. Sayed Ashuqullah Majidi

Finance Director

Mohammad Edriss Yousufy

INDEPENDENT AUDITOR'S REPORTS:



INDEPENDENT AUDITORS' REPORT TO THE BOARD OF DIRECTORS

Opinion

We have audited the accompanying financial statements of Care of Afghan Families (the Organization) which comprises the statement of financial position as at March 20, 2026, the statement of income and expenditure, the statement of cash flows for the year then ended, and notes to the financial statements, and a summary of significant accounting policies and other explanatory information.

In our opinion, the accompanying financial statements give a true and fair view of the financial position of the organization as at March 20, 2026, and of its financial performance for the year then ended in accordance with the accounting policies mentioned in Notes 2 and 3 to the financial statements.

Basis for Opinion

We conducted our audit in accordance with International Standards on Auditing (ISAs). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial statements* section of our report. We are independent of Organization in accordance with the ethical requirements that are relevant to our audit of the financial statements in Afghanistan, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other Matter

The financial statements of the Organization for the year ended March 20, 2025 were audited by another auditor, who expressed an unmodified opinion on those financial statements in their report dated 16th September 2025. Our opinion on the current period financial statements is not modified in respect of this matter.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation of these financial statements in accordance with the financial reporting requirements and for such internal control as management determines is necessary to enable the preparation of financial statements that is free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Organization ability to continue as a going concern, disclosing, as applicable, matters relating to going concern and using the going concern basis of accounting unless management either intends to liquidate the organization or to cease operations, or has no realistic alternative but to do so.

Auditors' Responsibilities for the Audit of the Financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an



auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with ISAs, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit 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.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Organization's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Organization to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.





INDEPENDENT AUDITOR'S REPORT ON THE SCHEDULE OF COMPUTATION OF INDIRECT COST RATE

Director General

Care of Afghan Families (CAF)
Kabul, Afghanistan

Our audit for the period ended March 20, 2026 was 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 **9.44%** is presented **(34,356,783 AFN)** for the purpose of additional analysis and is not a required of the general-purpose financial statements. Such information has been subjected to the auditing procedures applied in the audit of the general-purpose financial statements and, in our opinion, is fairly stated in all material respects in relation to the purpose financial statement taken as a whole.


SFAI Assurance Kabul Audit Services
Kabul, Afghanistan
Dated: August 06, 2026



INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE

Director General

Care of Afghan Families (CAF)
Kabul, Afghanistan

We are engaged to conduct the Audit of the financial statements of CAF for implementations of various project states under activities description from Annexure 1 to Annexure 14 for the period from 21 March 2025 to 20 March 2026 funded by different donors. The financial statements are the responsibility of the CAF 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 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 is 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 (ISA) and not solely, this report is not suitable for any other purpose.

SFAI Assurance
SFAI Assurance Kabul Audit Services
Kabul, Afghanistan
Dated: August 06, 2026



OPERATIONAL CONTEXT CHALLENGES

Throughout the reporting period, CAF has remained committed to principled service delivery and adaptive programming across Afghanistan's evolving humanitarian landscape. While our teams have achieved significant impact in nutrition, health, and governance, several sector-wide challenges have shaped our operational environment:

1. Administrative and Regulatory Engagement:

CAF maintained regular coordination with local authorities to ensure compliance with updated operational procedures. These administrative processes require continuous follow-up and documentation at both provincial and central levels.

2. Access Limitations and Infrastructure Constraints

Delivering services to remote and hard-to-reach areas continues to be challenging due to mountainous terrain, seasonal road blockages, and limited infrastructure. Outreach activities have been further affected by the condition of transportation assets most notably, the motorbikes used by field teams, many of which are outdated.

A total of 16 FHH (9 in Logar, 7 in Samangan) operate from rental houses, while eight SHCs function in community-contributed spaces that do not meet MoPH structural standards. These non-standard buildings lack adequate zoning, sanitation, and safety provisions, resulting in compromised service delivery.

3. Human Resource Turnover and Performance Monitoring

CAF observed frequent turnover among key health personnel, including surgeons, Gyn/OBG specialists, and female medical staff at both district hospital and PHC levels.

4. Essential Medicine Shortages

During the year, several health facilities reported shortages of high-risk essential medicines such as Sup: Amoxicillin 250 mg, Vial: Ampicillin 1 g, Amp: Atropine, Oint Betamethasone, Vial: Ceftriaxone 1 g & 500 mg, Cap: Cloxacillin 500 mg, Sup: Cotrimoxazole 240 mg, Tab: Cotrimoxazole 480 mg, Amp: Diclofenac, Amp: Diazepam, Amp: Ergometrine, Sup: Erythromycin, Cap: Fluoxetine 20 mg, Amp: Furosemide 10 mg, Sol: Glucose 10%, Sol: Glucose + Sodium Chloride, Tab: Hydrochlorothiazide, Sol: Sodium Chloride, Amp: Lidocaine + Adrenaline, Tab: Mebendazole 500 mg, Metronidazole Injection 500 mg/100 ml, Amp: Morphine 10 mg, Salbutamol for Nebulizer, Sup: Paracetamol, Tab: Aspirin 100 mg, Tab: Aspirin 500 mg, Tab: Penicillin V 500 mg

5. Procurement and Budget Constraints:

CAF faces serious financial and procedural challenges in procuring medical and non-medical supplies due to limited budgets, stricter donor requirements, delayed AFDA certificate approvals, and market shortages. These issues are compounded by insufficient funding for essential project needs including winterization kits, patient food, generator fuel, facility renovations, and equipment maintenance leading to delays and compromised service delivery.

6. Funding Limitations and Institutional Development and sustainability

CAF continues to face challenges related to short-term funding cycles. The absence of core funding for organizational development and staff capacity building has constrained efforts to strengthen internal systems, invest in professional development, and enhance long-term institutional sustainability.

As a not-for-profit organization operating without a core fund or unrestricted financial reserves, we face a critical challenge in managing exchange rate fluctuations that directly impact our operational sustainability.

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Our sincere appreciation goes to:

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CONTACT INFORMATION:

Dr. Sayed Ashuqullah Majidi

Director General

Email: caf.director.general@gmail.com

Mobile: +93 (0) 789 122 169 & 728 355 531

Mohammad Edriss Yousufy

Finance Director

Email: caf.finance.director@gmail.com

Mobile: +93 (0) 729 880 511 & 700 21 23 23

Dr Sayed Abdullah Omar

Technical Director

Email: caf.technical.director@gmail.com

Mobile: +93 (0) 799 146 860 & 729 880 509

CAF Address: House # 2194, Street 7th, Qala-e-Fathullah, Kabul, Afghanistan

www.caf.org.af

راپور سالانه موسسه مواظبت خانواده های افغان سال ۱۴۰۴



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بیانید کیفیت سطح زنده گی را در بین فامیل های افغان تقویت بخشیم



Address:

House # 2194,
Street 7th,
Qala e Fathullah,
Kabul, Afghanistan



Email:

cafkbl@gmail.com



Website:

www.caf.org.af

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