



Care of Afghan Families (CAF)

Annual Report ۱۳۹۴

(Dec ۲۲, ۲۰۱۴ to Dec ۲۱, ۲۰۱۵)



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۵۵۱۵

پوسټه خانه مرکزی صندوق پوسټی #

Care of Afghan Families

CAF

Annual Report ۱۳۹۴/۲۰۱۵

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Message from Director General

It is a great honor and pleasure that *Care of Afghan Families* (CAF) has passed its thirteen years of experience in the field of health, nutrition, community development and education/research. In this annual report we are happy to present CAF achievements, undertakings, success and challenges within a difficult environment during the past year (۲۰۱۵).



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

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

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

I would like to acknowledge the significant contribution of CAF's board of trustee and whole CAF team on all the achievements during the year ۲۰۱۵ (corresponding to ۱۳۹۴). My special thanks and appreciation is from the provincial staff, health facilities staff and community volunteers who are the frontline for preventing and fighting against the diseases, injustice and unawareness.

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

Thank you for your supports

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

CAF IN A GLANCE

Care of Afghan Families (CAF) is a non-Governmental, non-political, not for profit, independent and humanitarian Organization. The organization has been established in Kabul, registered in Ministry of Planning of Islamic Transitional Government of Afghanistan in January 1, 2002 with Registration No 946 then based on the requirement of the government in 2005, reregistered in the Ministry of Economy with registration number 68.

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



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

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



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

All functions of the organization is stands on the bases of the following principles and values which are:



١. Accountability and transparency: able to provide evidences and proves for use of organization's resources.
٢. Equity and integrity: Being honest and respect others rights.
٣. Professionalism: Having required qualifications and using it in performing a job.
٤. Efficiency: Using resources economically and reasonably to deliver effective outputs.
٥. Innovation: Applying new methods to deliver better services.
٦. Neutrality: CAF provides services considering neutrality.

The organization has tremendous capacity to develop highly qualified and committed staff to ensure effectiveness, efficiency and sustainability of its projects in the country. Currently CAF has total of ١٣٢٠ full time paid staff at different levels of the organization from top to lower management and technical positions. CAF also has ١٢٩٢ Community Health Workers (CHWs) who are delivering basic health services considering the CHW guidelines and strengthening more the referral systems.



CAF is an active member of HSS Steering Committee, active member in CPDS (Coordinated Procurement Drugs Supply System) forum, and active member and the steering committee member of Alliance of Health Organization (AHO) which is umbrella organization of most health NGOs working in Afghanistan. CAF has greatly contributed in health sector policy development through participating at different forums. In addition, CAF is a member of nutrition cluster and health clusters at the national level and an active member of PHCC meetings at the provincial levels.



CAF'S MANAGEMENT BOARD:

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



CAF'S DONORS:

CAF is greatly indebted to all the following donors who contributed to the organization's fund during ۲۰۱۰ and enabled us to implement the projects successfully.

MOPH (Trust Fund)/World Bank (WB): World Bank (WB) through MOPH/trust fund mechanism was the main donor of CAF's activities during ۲۰۱۰. WB has made ۵۶,۰۸% of CAF's funds during ۲۰۱۰ for implementation of System Enhancement for Health Action in Transition (SEHAT) projects in Kunduz, Daikundi, Logar and Badakhshan provinces.

United States Agency for International Development (USAID): USAID was the second major donor of CAF's activities during ۲۰۱۰. USAID has made ۳۹,۴۹% of CAF's funds during ۲۰۱۰ for the implementation of BPHS services in Takhar and Badakhshan provinces channeling through MOPH and community based DOTs project in Takhar and Badakhshan provinces through MSH (۳۹,۱۰% PCH and ۰,۳۹% MSH).



World Food Program (WFP): WFP provided around ۳,۱۱% of CAF's fund during ۲۰۱۰ for implementation of target supplementary feeding program in Takhar and Badakhshan.



World Health Organization (WHO): WHO donated around ۰,۸۰% of CAF's fund during ۲۰۱۰ for implementation of mobile health teams in Logar province.



Micronutrient Initiative (MI): MI contributed around ۰,۲۷% of CAF's fund during ۲۰۱۰ for conducting of research activities on infant and young child feeding as well as post intervention survey of IFA supplementation program in Wardak, Laghman, Takhar, Kapisa, Samangan, Khost and Paktika provinces.



Global Fund (GF): GF has contributed in ۰,۰۱% of total CAF's fund during ۲۰۱۰ for implementation of Malaria control programs and TB control programs through BRAC and HNTPO.



Agha Khan Foundation/Royal Tropical Institute (KIT): AKF through KIT University contributed around ۰,۱۷% of CAF's fund during ۲۰۱۵. KIT is partnering with CAF in conducting of community based financing research project in Bamyan, Badakhshan and Kunduz provinces during ۲۰۱۵.



Action Contra La Faim (ACF): ACF has contributed around ۰,۰۷% of CAF's fund during ۲۰۱۵ in partnering for conducting of a nutrition coverage assessment in five districts of Badakhshan province.



EXECUTIVE SUMMARY:

Care of Afghan Families, CAF, is pleased to introduce its another series of Annual Reports for the year ۱۳۹۴/۲۰۱۵ to its donors, line ministries, partners and stakeholders who are stepping to improve health of Afghans and to achieve national objectives and goals to reduce morbidity and mortality in the country. CAF could successfully complete PCH projects in Takhar and Badakhshan provinces during the reporting period which was supplemented by other projects such as RBF, community based DOTs, Malaria program and Target Supplementary Feeding Program; supported by USAID, WB, MSH, GF and WFP respectively. To progress the achievements, CAF has been implementing BPHS projects in Badakhshan, Kunduz and Logar provinces; EPHS project in Daikundi province; other supplementary projects such as CB-DOTs, deployment of mobile health teams in Logar province, target supplementary feeding program in Badakhshan province, CME program in Takhar province, CME and CHNE in Logar province; and evidence generated research projects such as IYCN assessment in Laghman and Wardak provinces; Iron Folic Acid post intervention assessment in Takhar, Kapisa, Laghman, Samangan, Khost and Paktika provinces; Community-based financing in the context of Afghan Free health care in Bamyan province; and SLEAC assessment in Badakhshan province. Total of ۳,۴۹۴,۸۱۶ population received public health services from CAF projects in all provinces. This figure makes ۱۳% of CAF contribution in all Afghanistan population for whom we provided public health services during the year. Total of ۳۳۰۹ persons including ۹۱۸ female and ۲۳۹۱ male staff from all provinces received training on BPHS topics during the year. Total of ۹۳ external and ۱۹۲۴ internal monitoring sessions conducted in the projects by MOPH, other stakeholders and CAF management staff. Quarterly project review workshops; annual review workshop; and operation workshop and training; were other outstanding activities of the year performed to assess, plan and improved health services provision in the provinces. One of the important activities of CAF is struggling to improve Gender equality. The most important gender consideration during the year was registration of the organization with the ministry of women affaires. CAF is an active member of national and provincial level forums. Participation in HSS forum, CBHC and RH task force meetings at the MOPH level; attending health and nutrition cluster meetings; and steering Alliance for Health Organizations are CAF main coordination activities in the year. Besides CAF is active member of PHCC, PHO sub committees, and EPR committee at the provincial levels. CAF could promote the culture of volunteerism through recruiting of ۳۶ volunteers with ۱۹% deployment rate after their capacity building. CAF could manage ۱۲ emergencies in Badakhshan and ۲ emergencies in Logar provinces throughout the year. Our outstanding achievements were appreciated through giving certificate of appreciation through our donors (MSH), governmental authorities and community. Our main challenges during the year were unavailability of standard buildings for some of our health facilities, shortage of female professional staffs (female MD, specialists), insecurity in some of the districts in operating provinces and lack of medical engineering facilities at the national level.

CAF'S STRATEGIC ACTIVITIES DURING ۲۰۱۵:

Health Activities:

Implementation of BPHS project in Badakhshan province: CAF is the lead BPHS implementer in a joint venture form with a local partner in Badakhshan province since July ۲۰۱۵. Total of ۴۴ HFs (۱ district hospital, ۲ CHC+, ۵ CHC, ۱۹ BHCs, and ۱۷ SHCs) and ۲۷۰ HPs (۲۵۴ female and ۱۶۳ male CHWs) are functional and providing BPHS services under SEHAT II/MOPH trust fund contract in Badakhshan cluster ۱. Total of ۱,۲۰۵,۱۷۴ beneficiaries

received public health services through active HFs and HPs in the province during the year. The figure translate utilization rate of ۲,۰۵ per person per year in the province. Out of the total beneficiaries ۱۱۳,۶۰۰ women received MCH services, and ۲۰,۶,۲۶۰ under five children screened for child hood disease and immunization services.



The figures describe that women of reproductive age has a utilization rate of ۰,۹۷ while children under five has a utilization rate of ۱,۷۶ since July ۲۰۱۵.

Implementation of BPHS project in Logar province: CAF is the lead BPHS implementer in a

joint venture form with a local partner in Logar province since Jan ۲۰۱۴. Total of ۴۰ HFs (۲ district hospitals, ۲ CHC+, ۶ CHCs, ۱۸ BHCs, ۱ prison health and ۱۱ SHCs) and ۲۰۲ HPs (۱۶۳ female and ۳۹ male CHWs) are functional and providing BPHS services under SEHAT/MOPH trust fund contract in Logar province. Total of ۱,۰۱۹,۶۹۳ beneficiaries received public health services through active HFs and HPs in the province during the year. The figure



translate utilization rate of 2.64 per person per year in the province. Out of the total beneficiaries 70,888 women received MCH services, and 100,391 under five children screened for childhood disease. The figures describe that all women of reproductive age has attended at least one times the HF and all children under five received 2 times services in the HF.

Implementation of BPHS project in Kunduz province: CAF is the BPHS implementer in Kunduz province since 2007. Currently, CAF is implementing BPHS in total of 60 HF (1 district hospitals, 2 CHC+, 12 CHC, 29 BHCs, 1 prison health, 1 MHTs and 20 SHCs) and 434 HPs (864 CHWs) under SEHAT/MOPH trust fund contract in Kunduz province. CAF is in joint venture partnership model with SCI in this project. Total of 1,188,877 beneficiaries received public health services through active HF in the province during the year. The figure translate utilization rate of 1.2 per person per year in the province. Out of the total beneficiaries 82,902 women received MCH services, and 208,734 under five children screened for childhood disease. The figures describe that 42% women of reproductive age has attended at least one time the HF and all children under five received 1.0 times services in the HF during the year.



Implementation of EPHS project in Daikundi province: CAF is the lead EPHS implementer in Daikundi province since Jan 2014. Currently, CAF is implementing EPHS in Nilli provincial hospital and community based health programs in 13 HPs (26 CHWs) under SEHAT/WB/MOPH contract in Daikundi province. Total of 81,082 beneficiaries received hospital services through Nilli provincial hospital in the province during the year. In addition, total of 7,220 of patients admitted in the hospital, which is 9% of all outpatients' beneficiaries. Among these figures 108 women with major obstetric complications admitted in the hospital. Out of the total beneficiaries 48,820 women received MCH services, and 14,826 under five children screened for childhood disease. During the year, total of 1,074 major and minor surgeries performed in the hospital.



Deployment of Mobile Health Teams to Support Un-Served/ Conflict Areas in Logar: This project started since May ۲۰۱۴ and successfully completed in May ۲۰۱۵ in two districts of Logar province funded by WHO. Two mobile health teams have been established in un-served and conflicted areas of Logar province. The mentioned teams provided BPHS services as per mobile health team package to the targeted districts. Total of ۵,۰۰۴ beneficiaries received services through the mobile health teams. Out of this, ۷۹۱ women received MCH services, ۲,۳۱۱ under five children screened for childhood diseases and vaccination.



Deploying of mobile health team and static facility in Logar province: As a supplementary support to the BPHS project, CAF implemented ۱ mobile health team and ۱ static facility in two districts of Logar province. The project has been started since Dec ۲۰۱۴ through financial support of WHO under OCHA-CHF annual program and completed on April ۲۰۱۵. The mobile health team and static facility provided necessary public health services to the remote areas of Logar where winter is a challenge for normal access to health services and a burden of public health services. Total of ۴۵ villages were covered through the established mobile health team and static facility where ۱۲,۵۰۹ beneficiaries received public health services. Among this figure, ۴,۱۵۵ women of reproductive age received MCH services while ۵,۶۷۰ children under five received screening and vaccination services.

Nutrition Activities:

Implementation of target supplementary feeding program in Takhar and Badakhshan provinces: CAF implemented target supplementary feeding program (TSFP) program in ۲۹ HF's of Takhar and ۳۶ HF's of Badakhshan



of Takhar and ۳۶ HF's of Badakhshan provinces under financial support of WFP. The project started on first of January ۲۰۱۵ and ended on June ۲۰۱۵. During project period ۷,۱۲۵ children under the age of five with moderate acute malnutrition (MAM) and ۱۶,۶۵۴ acute malnourished pregnant and lactating women (AM PLW) were registered and received food rations according to protocol in Takhar and Badakhshan provinces. Of these, ۱,۷۵۳ under ۵ children and ۳,۰۲۰ PLW were exited from the program. The performance indicators for Supplementary Feeding program

reported as following: SFP children under 5 - (cure rate 98.2%, Death rate 0.0% and defaulter rate 1.8%); SFP PLWs - (cure rate 98.8%, Death rate 0.0% and defaulter rate 1.2 %). This indicates performance on SFP indicator within the sphere standard limits.

Implementation of target supplementary feeding program in Badakhshan province: CAF

implemented target supplementary feeding program (TSFP) in 32 HF's related to cluster 1 and 2 of Badakhshan province under financial support of WFP. The project started on first of July 2015 and ended on Dec 2015. During project period 5,480 children under the age of five with moderate acute malnutrition (MAM) and 9,820 acute malnourished pregnant and lactating women (AM PLW) were registered and received food rations according to protocol in Badakhshan province. Of these, 1,088 under 5 children and 2,040 PLW were exited from the program. The performance indicators for Supplementary Feeding program reported as following: SFP for children under 5 (cure rate 96.6%, Death rate 0.0% and defaulter rate 3.4%); SFP for PLWs (cure rate 97.5%, Death rate 0.0% and defaulter rate 2.5 %). The data reveals performance on SFP indicator within the sphere standard limits.



Community Development Activities:

Implementation of community based DOTs in Badakhshan province: This project is implemented by the financial support of MSH/USAID under Challenge TB project in 40 health facilities (HF's) and 639 community health workers (CHWs) in Badakhshan province. The project started on Oct 2015 and will last till Sep 2016. The project aims to increase TB case detection at the community level and to improve treatment and management of TB patients by CHWs. During the reporting period, total of 202



suspected cases identified in Badakhshan province. All the suspected cases have been detected and referred by CHWs. Totally, 10 TB smear positives identified, which make 17% of suspected cases identified and referred by CHWs. Total of 202 head of clinics, 30

community health supervisors; and ٥٧٥ CHWs received training on CB-DOTs. ١٠ billboards installed in the crowded areas of the province presenting key TB messages from NTP. TB key messages broadcasted through ٣ local media to increase awareness about TB-DOTs. During the project ١٠ TB association is established consisting of TB patients, TB cured patients, and community members. The association purposed to increase awareness and TB case detection at the community level.

Education/Research Activities:

Implementation of community midwifery education (CME) program in Takhar province:

CAF is implementing CME program in Takhar CME School under financial support of WB through MOPH SEHAT project with partnership of AKF. Total of ٢٦ female students are enrolled in the school, are under the training and expected to be graduated on Aug ٢٠١٦. The graduated midwives will be deployed in the needy health facilities of the province. Deployment of the trained community midwives in the province will further support female health workers of the human resource collection of the province. The program is carrying through qualified and expert trainers using AMNEAB principles and standards.



Implementation of community midwifery education (CME) program in Logar province:

CAF is implementing CME program in Logar CME School under financial support of WB through MOPH SEHAT project. Total of ٢٤ female students are enrolled in the school, are under the training and expected to be graduated on Dec ٢٠١٦. The graduated midwives will be deployed in the needy health facilities of the province. Deployment of the trained community midwives in the province will further



support female health workers of the human resource collection of the province. The program is carrying through qualified and expert trainers using AMNEAB principles and standards.



Implementation of community health nursing education (CHNE) program in Logar province: CAF is implementing

CHNE program in Logar CHNE School under financial support of WB through MOPH SEHAT project. Total of ٢٤ female students are enrolled in the school, are under the training and expected to be graduated on Dec ٢٠١٦. The graduated nurses will be deployed in the needy health facilities of the province. Deployment of the trained community nurses in the province will further support female health workers of the human resource collection of the province. The program is carrying through qualified and expert trainers using AMNEAB principles and standards.

Conducting of IYCN baseline & end line studies in Laghman and Wardak provinces: CAF

conducted the baseline and end line assessment of infant and young child nutrition (IYCN) program in Laghman and Wardak provinces under financial support of Micronutrient Initiative (the MI). Total of ٥٧٠ caregivers of children ٦-٥٩ months are recruited in each round of the study. In addition, knowledge, attitude and practices indicators



of health workers and other health officials are assessed during the study. The overall objective of this assessment was to inform program implementation about the current status of the activities of the program roll out and any course correction required.

Conducting of a post intervention of IFA supplementation program in Afghanistan: CAF

conducts a post intervention of Iron Folic Acid (IFA) supplementation program in Takhar, Kapisa and Laghman provinces as program areas and in Samangan, Khost and Paktika provinces as control areas under financial support of Micronutrient Initiative (the MI). Total of ٢٦٤٠ women with children less than ٦ months are recruited in the study. In addition, knowledge, attitude and practices indicators of ٢١٢ health workers and ٣٠ other health officials including the public nutrition officers are assessed during the study. The program aims to assess the coverage and utilization of

IFA

supplementation among pregnant and lactating women for prevention of anemia and eventually reduction of maternal mortality, improving birth



outcome

and

infant

mortality.

Community-based financing in the context of "free health care in Afghanistan":

This project is funded by AKF under the Central Asia Health System Strengthening (CAHSS) program in 4 provinces of Afghanistan including Bamyan, Kunduz, Badakhshan and Kabul. CAF as a local implementing partner in partnership of KIT University is responsible for implementation of the project in Bamyan province. The project started on May 2010 and will last till end of April 2011. The research team aims to understand what coping mechanisms are

currently in use by households and communities in their efforts to ensure medical care for their members without creating financial difficulties. Using a 9-step workshop approach, our teams seek to engage in a dialogue with different groups within communities. We selected representatives from both genders, young and old, various ethnic groups, income groups, with various levels of access to health care. PADev tool were used by the research team and total of 10 workshops conducted in four districts of Bamyan province.

Nutrition Coverage survey through SLEAC

assessment

SLEAC (Simplified LQAS Evaluation of Access and Coverage) is a low resource method for classifying and estimating the coverage of selective feeding program and identifying barriers to access. CAF in partnership of ACF implemented the assessment in two zones of Badakhshan province including Argo, Shahrebuzurg, Yafgal sulfa, Darayeem and Teshkan districts. The project started in Sep 2010 and ended on Nov 2010. The survey revealed the coverage estimation for the accessible villages at 20.7% (CI 95%: 10.93%-20.03%)



MAJOR ACHIVEMENTS:

Implementation of BPHS project in Badakhshan province:

CAF successfully implemented BPHS project in Badakhshan province, which ended on 30th June 2015. CAF implemented the BPHS in total of 34 HFs (1 district hospitals, 2 CHC+, 0 CHC, 19 BHCs and 1 SHCs) and 269 HPs (026 CHWs) under USAID/PCH contract in cluster 1 Badakhshan province.

Implementation of BPHS project in Takhar province:

CAF successfully implemented BPHS project in Takhar province, which ended on 30th June 2015. CAF

implemented the BPHS in total of 07 HFs (3 district hospitals, 1 CHC+, 12 CHC, 34 BHCs, 1 Prison Health and 6 SHCs) and 008 HPs (111 CHWs) under USAID/PCH contract in Takhar province.

Implementation of RBF project in Takhar and Badakhshan provinces:

Result Based Financing is a supply side health care financing scheme, which is integrated in all HFs of Takhar and Badakhshan provinces for further strengthening of quality health services under financial support of World Bank. The project ended on June 30th 2015.

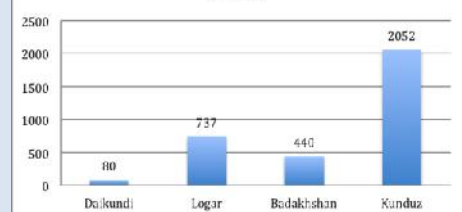
Amount of 3,197,440 AFS has been disbursed to the health workers of Takhar province and an amount of 1,720,190 AFS has been disbursed to the health workers of Badakhshan province as incentive payment for their outstanding achievements over the set baselines for particular public health indicators during the reporting period. In total, AFA 36,790,190 has been disbursed to Takhar health workers and AFA 19,047,100 has been disbursed to Badakhshan health workers during the life of the project.

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, 3,309 persons including 918 female and 2,391 male staff (80 in Daikundi, 737 in Logar, 440 in Badakhshan and 2052 in Kunduz) received training sessions through MOPH, PEMT, PND, CAF and other stakeholders. Among this figure 3,094 persons received training sessions under cascading plan in Logar, Daikundi, Badakhshan and Kunduz provinces. 2,830 CHWs received initial and refresher trainings, Additional to that; different capacity building sessions conducted in CAF main and provincial offices as well.

Training sessions by person in 2015



On the job training, conferences and seminars

Beside that CAF has its own capacity building programs for management staff. In addition, the organization has training programs for project staff at the office and health facilities level. Weekly technical conference at the health facilities level, annual workshops at the main office, monthly training sessions at HQ level, Monthly coordination meeting in Kabul with participation of CAF partners, quarterly technical review workshops in Kabul, trainings and on job trainings in both levels supported and enhanced the knowledge and skills of the staffs. We tried to build the capacity of HF's staff as well as management staff of CAF. We focused on regular supportive supervision of health facilities by trained and expert supervisors in order to ensure in service training.

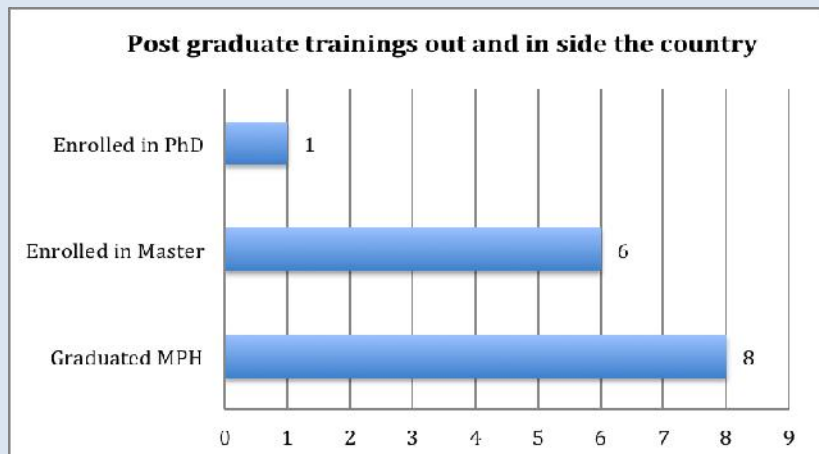


Training and workshops outside the country

CAF encourage its staff in order to attend postgraduate degrees such as Master and Doctoral (PhD) programs inside and outside of the country. Three staff members of CAF are studying postgraduate degree in Master of Public Health, three staff are studying post graduate degree in Master of Business Administration and another staff is PhD scholar in public health during the reporting year and

currently working at head quarter office. Subsequently, CAF is committed to build the capacity of its staff members through short and medium term programs

and workshops inside and outside of Afghanistan. CAF has supported and celebrated total of 14 master graduates from its main and provincial offices staff members till end of 2010.



Partnerships:

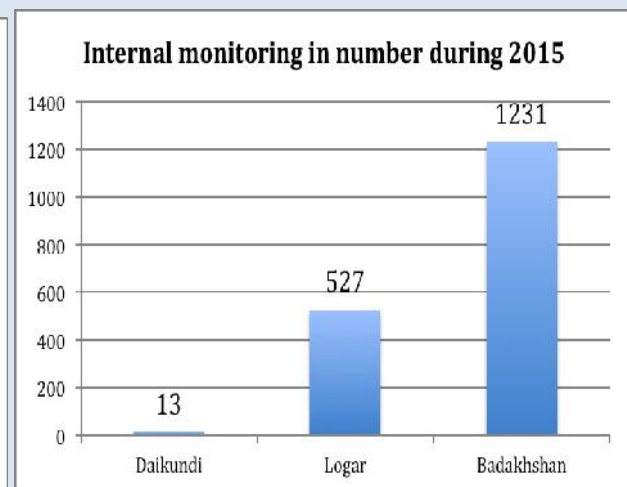
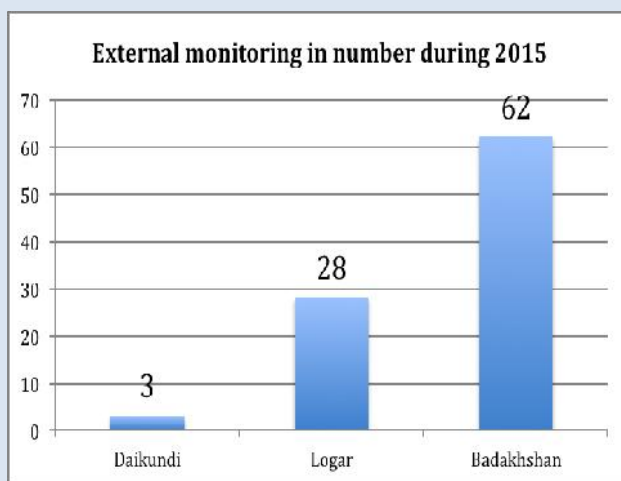
CAF works in partnership with various actors such as community, government, national and international agencies. Coordination with our partners and stakeholder such as SHDP, BARAN, Aga Khan Health

Services (AKHS), WHO, UNICEF, MSH, WFP, UNDP, Women Affairs Department, Provincial council and other governmental agencies at the national and provincial level was the key intervention of the

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

Monitoring and Supervision:

93 external monitoring visits (28 in Logar, 62 in Badakhshan and 3 in Daikundi) conducted by GCMU-MOPH, MSH, WHO, PPHD, and M&E-MOPH. There is 21% coming down in the frequency of monitoring visits by MOPH and other stakeholders during 1394 comparing to 1393. Total of 1,924 internal monitoring visits (1,231 in Badakhshan, 527 in Logar, 13 in Kaikundi, and 120 in Kunduz provinces) conducted by CAF HQ and provincial management team. There is 10% decline in the frequency of monitoring visits by CAF and its partners during 1394 comparing to 1393. Action plans have been prepared addressing the findings of the visits and regular follow up is made during the course of the projects.



Quarterly Review workshops

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

participated actively in the workshops. Review of quarters' performance, lessons learned; plan for the next quarter and assessment of projects activities were the agendas discussed during the workshops.



Annual review workshop

Another outstanding activity for the year was annual review workshop of SEHAT projects. The workshop held in Kabul in which key staff of projects participated, presented their annual achievements, compared achievements with the annual work plan, and planned for the next year.

CAF

operation and technical directors and managers participated in the workshop and provided constructive feedbacks and comments for effectiveness and efficiency aspects of the projects.



Operation workshop

During the reporting period a 3 days operation workshop conducted participated by provincial office and main office staff. CAF policies and procedures as well as contract required points reviewed and action plan prepared for further follow up and compliance with the donor and organization requirements. Also the participants from provincial offices received orientation on the mechanism of third party HMIS verification and HF functionality as well as latest third party reports. Compliance with BPHS-2010 implementation was also focused and all activities reviewed based on the document and action plan prepared for further follow up.



Gender activities:

One of the important activities of CAF is struggling to improve Gender equality. Some main activities on improving gender balance during the year were: recruitment of female staff, conducting regular meeting about gender awareness, celebration of 8 March/ national woman days at



the office level, maintaining of kindergarten for children of staff and a female teacher in kindergarten. The most important gender consideration during the year was registration of the organization with the ministry of women affairs (MOWA). CAF participated in a workshop, which was held in the ministry of women affairs for celebration of national women day. CAF committed to contribute in the empowerment of women and girls as a main objective of the ministry of women affairs

messages about women empowerment, which was widely distributed.

Coordination and communication:



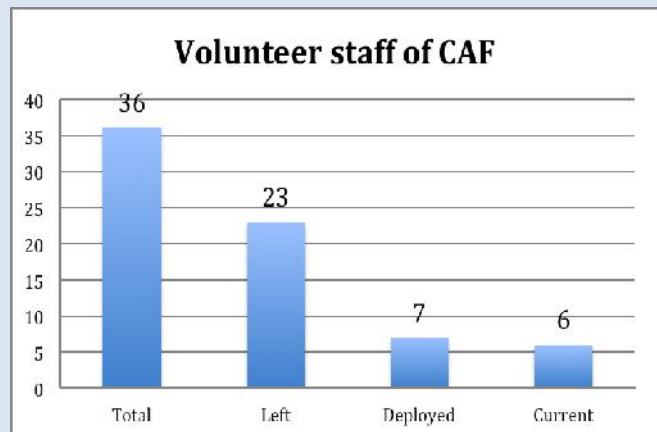
CAF is an active member of national and provincial level forums. Our staff participated in health system strengthening (HSS) forums regularly during the year. CAF is a member of CBHC, HMIS, IYCF and RH taskforce meeting at the MOPH level. In addition, CAF is a member of nutrition and health clusters at the national level. CAF leadership and provincial staff participated regularly and actively in quarterly

BPHS and EPHS review meetings during the reporting period. Furthermore, CAF leadership participated in Health Result Conference; SEHAT review meeting held by World Bank mission; Call to Action gathering where presented m-health and Baby Friendly Village initiatives to donors, MOPH, partners and other CSOs. Also CAF is among steering committee members of Alliance for Health Organizations (AHO). Besides, CAF is an active member of PHCC meetings at the provincial levels where CAF is operating. CAF staff is members of PHO sub committees – such as RH, CBHC, EPI, and IMCI – and the EPR committee at the provincial levels.



Volunteerism:

Since its establishment, CAF tried to build the capacity of Afghan youths through provision of volunteerism mechanism in its main and provincial offices. Total of 36 male and female youths employed as volunteer in different departments of the organization. From all, CAF could deploy 19% of volunteers in its main and provincial offices and 81% of volunteers obtained necessary knowledge and skills during their stay in CAF and left for joining other



organizations.

Emergency response:

Badakhshan, Logar, Daikundi and Takhar are the provinces where the people suffer from natural disasters and disease outbreaks. Being one of the main implementers of health projects in Takhar, Badakhshan, Logar, Daikundi and Kunduz provinces, CAF has actively contributed in response to the emergencies in these provinces. CAF is an active member of Emergency preparedness and Response (EPR) committee at mentioned provinces and managed to respond effectively and timely in ١٤ events during the year. During the reporting period, ١٢ emergencies reported from Badakhshan province and ٢ emergencies reported from Logar province, which responded properly. Totally, ٢٠٢٥ children under five, ٢٠٠٣ female and ٢٩٠ male over five received health and nutrition services during post emergency responses in Badakhshan and Logar provinces.



Appreciation and recognition:

During the reporting period, CAF was recognized and appreciated by MSH for the successful implementation of CB-DOTs project in Takhar and Badakhshan provinces. In addition, Kunduz governmental authorities, Imam Sahib District governor, and Kunduz provincial counsel has appreciated CAF and SCI for proper implementation of BPHS services in the province. Meanwhile, Logar governor and public health director has appreciated CAF's efforts in implementation of BPHS project in Logar province. Also, provincial counsel and public health director of Daikundi has appreciated faithful and quality implementation of hospital services in Daikundi provincial hospital and awarded a certificate of appreciation to CAF. Moreover, CAF's Takhar and Logar project



managers have been awarded with certificate of appreciation by Takhar governor office, Takhar different authorities and Logar public health directorate respectively. Badakhshan governor and provincial council have appreciated CAF's activities in all districts of cluster 1 of Badakhshan through awarding a certificate. Certificates of appreciation to CAF and its staff through different authorities are enclosed with this report.

Our challenges:

Less number of standard buildings in the operating provinces is a challenge to quality implementation of health services. 10 HFs in Logar and 23 HFs in Badakhshan provinces do not have standard building. Also Daikundi provincial hospital building is not standard and do not have adequate space for proper service delivery as a PH in the province. This problem regularly shared with related



stakeholder to find a solution. In the result, currently two new infrastructures are in process of construction one for Azra CHC+ of Logar and one for Daikundi provincial hospital through government of Japan and government of Afghanistan respectively.

Shortage of female professional staff in remote areas of the provinces is a general challenge in the country. Although Ministry of public health has started community midwifery education and community nursing, a community based programs, in

most of the provinces shortage of female doctors and specialists is still a challenges toward ministry of public health to achieve Millennium Development Goals set for Afghanistan. CAF has taken



different approaches to fill this gap through exploring qualified female staff abroad the boundaries of Afghanistan such as Tajikistan to overcome this challenge in its operating area and to contribute to goals of ministry of public health. As a bench-mark from most of the developing countries we recommend the ministry of public health of the government to apply a post graduate mandatory services of medical graduates (both MDs and specialists) in the remote areas of the country as a long term solution for unavailability of female professional staff in these areas.

Insecurity in some of the area is a big challenge, which needs effort of multi sectorial teams to reduce its effect on the route of health service provision. CAF as non-political and community based organization provided uninterrupted services to the needy population of the operating insecure areas such as Logar and Kunduz provinces regardless of their political sides. ٦٤ health facilities in Kunduz, ٤٤ health facilities in Badakhshan, ١ PH in Daikundi and ٤٠ health facilities in Logar provinces were functional and providing un-interrupting services to the needy population of the provinces.

Lack of skill and knowledge in medical engineering and shortage of qualified staff for this purpose is another major challenge in BPHS and EPHS projects of CAF in the operating provinces. Acquiring medical engineering knowledge requires long term capacity building programs which the

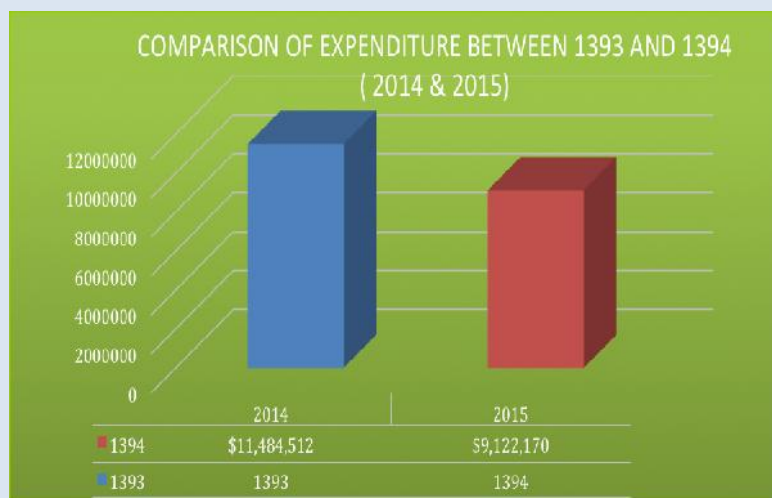


government, ministry of public health, is requested to consider such need of the country in its educational programs.

As a health provider in the country, we found that current practice of ministry of public health for selection of NGOs for implementing of BPHS and EPHS projects as a result of quality and cost mechanism is not effective. Most of the contracts to the implementers awarded based on their least cost factor. It is well known that quality of services need enough and proper resources. Therefore, it is recommended to MOPH and donor officials a change in the mechanism – for example; quality based selection mechanism with a range of pre-identified cost – for the future BPHS and EPHS projects contracts.

FINANCIAL SUMMARY:

CAF financial status has ۲۱% decreases during the reporting period. However, CAF could receive grants for its Badakhshan BPHS projects under SEHAT II from MOPH (Trust Fund)/World Bank. In addition, CAF signed partnership with MSH and WFP for implementation of community based TB and target supplementary feeding program in Badakhshan province. CAF had expansion in a wide range of provinces through its research projects during the year.



The total Income of CAF for the year ۱۳۹۴/۲۰۱۵ is \$ ۹,۱۲۲,۱۷۰ USD that is ۱۸% less than its income in ۱۳۹۳ and the total expenditure of CAF for the year ۱۳۹۴/۲۰۱۵ is decreased by ۲۱% comparing with the last year. CAF indirect cost rate remained around ۱۰% for the fiscal year ۱۳۹۴/۲۰۱۵ audited by an independent external audit. The reason for the decrement could be due to a slight decrease in the number of projects during the reporting period.

In total CAF could collect amount of ۲۴,۵۱۲,۹۳۷ AFS withholding Tax from its operation as per Afghanistan income tax law and amount of ۲۴,۵۱۹,۲۴۰ AFS paid to government account during the year. The collected amount of tax related to payroll tax, vehicle tax, purchase tax and house rental taxes in the provincial offices and main premises of CAF. CAF as always, paid its monthly collected amount of tax to the government timely.

Care of Afghan Families (CAF)
Kabul - Afghanistan

TAX REPORT FOR THE PERIOD FROM DECEMBER 22, 2013 TO DECEMBER 21, 2015

Afghani (AFN)

S/No	Description	Dec, 22 2014 to Dec 21, 2015			Dec 22, 2013 to Dec 21, 2014		
		Amount Collected	Amount Paid to Government	Balance with CAF	Amount Collected	Amount Paid to Government	Balance with CAF
1	Payroll Tax	17,500,598	17,503,102	-	17,814,538	17,812,034	(2,504)
2	Vehicle Tax	2,716,445	2,719,444	-	2,849,132	2,846,133	(2,999)
3	Purchase Tax	2,708,143	2,708,943	-	2,803,277	2,802,477	(800)
4	House Tax	1,587,751	1,587,751	-	1,040,487	1,040,487	-
GRAND TOTAL		24,512,937	24,519,240	0	24,507,434	24,501,131	(6,303)

Note: An amount of 6,303 was paid less last year, which is paid this year to the government account.

FINANCIAL

STATEMENTS:

Statement of Financial Position:

Care of Afghan Families (CAF)
Kabul, Afghanistan

Statement of financial position as at December 21, 2015

	1394	1394	1393	1393
Note	21 December 2015	21 December 2015	21 December 2014	21 December 2014
	AFN	US\$	AFN	US\$
ASSETS				
TOTAL ASSETS	220,533,394	3,245,525	166,517,217	2,872,472
TOTAL LIABILITIES AND FUNDS	220,533,394	3,245,525	166,517,217	2,872,472

Statement of Comprehensive Income (Profits and Losses):

Care of Afghan Families
Kabul - Afghanistan

Income Statement for the year ended December 21, 2015

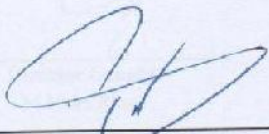
	1394	1394	1393	1393
Note	21 December 2015	21 December 2015	21 December 2014	21 December 2014
	AFN	US\$	AFN	US\$
INCOME				
	608,884,241	8,960,769	665,901,823	11,487,008
EXPENDITURE				
	619,851,467	9,122,170	665,901,823	11,487,007
Difficit of income over expenditure for the period	(10,967,226)	(161,401)	(0)	0

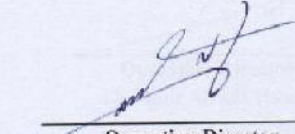
Independent Auditor's Report:

Care of Afghan Families (CAF) Kabul, Afghanistan

Statement of financial position as at December 21, 2015

	Note	1394		1393	
		21 December 2015		21 December 2014	
		AFN	US\$	AFN	US\$
ASSETS					
<i>Current assets</i>					
Receivable from donors	3	6,833,424	100,607	54,720,320	938,882
Security deposits	4	527,413	7,762	105,626	1,822
Other assets	5	35,000	515	6,668,321	120,090
Cash and cash equivalents	6	209,486,386	3,082,908	101,837,169	1,756,722
		<u>216,882,222</u>	<u>3,191,791</u>	<u>163,331,436</u>	<u>2,817,517</u>
<i>Non - Current assets</i>					
Operating fixed assets	7	3,651,171	53,733	3,185,781	54,956
TOTAL ASSETS		<u>220,533,394</u>	<u>3,245,525</u>	<u>166,517,217</u>	<u>2,872,472</u>
LIABILITIES AND FUNDS					
<i>Current liabilities</i>					
Deferred grant income - Restricted	8	147,153,267	2,166,421	92,243,544	1,591,229
Other payables	9	58,777,071	865,005	47,729,229	823,344
		<u>205,930,339</u>	<u>3,031,425</u>	<u>139,972,774</u>	<u>2,414,573</u>
<i>Funds</i>					
Accumulated Core Fund		<u>14,603,055</u>	<u>214,099</u>	<u>26,544,443</u>	<u>457,900</u>
Contingencies & Commitments		-	-	-	-
TOTAL LIABILITIES AND FUNDS		<u>220,533,394</u>	<u>3,245,525</u>	<u>166,517,217</u>	<u>2,872,472</u>


Director General
M. Naim Rassa


Operation Director
Dr. Nasir Ahmad Hamid

Care of Afghan Families

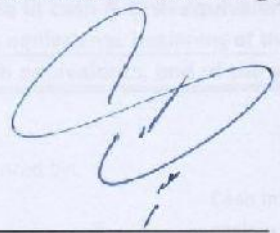
Kabul - Afghanistan

Income Statement for the year ended December 21, 2015

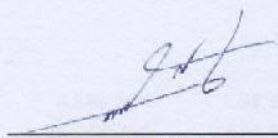
	Note	1394		1393	
		21 December 2015		21 December 2014	
		AFN	US\$	AFN	US\$
INCOME					
Amortization of deferred grant	10	604,635,955	9,429,253	662,049,008	11,420,565
Other income	11	4,248,286	62,521	3,852,815	66,442
		<u>608,884,241</u>	<u>9,491,774</u>	<u>665,901,823</u>	<u>11,487,008</u>
EXPENDITURE					
Direct operating cost	12	523,231,823	7,700,248	377,682,622	6,515,139
Indirect operating cost	13	53,989,330	794,545	45,893,636	791,679
Expenses of sub-grant	14	32,570,688	479,333	65,276,044	1,126,031
Expenses of SEIAT projects	15	10,059,626	148,045	176,904,873	3,051,662
		<u>619,851,467</u>	<u>9,122,170</u>	<u>665,757,175</u>	<u>11,484,512</u>
Surplus of income over expenditure		(10,967,226)	(161,401)	144,648	2,495
Accumulated Core Fund brought forward		26,544,443	457,900	26,399,795	473,931
Exchange Loss on Core Fund brought forward		(974,162)	(14,336)	-	(18,526)
Accumulated Core Funds carried forward		<u>14,603,055</u>	<u>282,162</u>	<u>26,544,443</u>	<u>457,900</u>

uafv

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



Director General
M.Naim.Rassa



Operation Director
Dr. Nasir Ahmad Hamid

Member Firm of



Global
Consultants

Usman Azeem & Co.

Chartered Accountants

INDEPENDENT AUDITORS' REPORT ON COMPUTATION OF TAX CALCULATION

General Director
Care of Afghan Families (CAF)
Kabul
Afghanistan

Our audit was conducted for the purpose of forming an opinion on the financial statements taken as a whole. The schedule of computation of tax contained that the organization collected tax is AFN 2,4512,937 and paid tax is AFN 24,519,240/- presented for the purpose of additional analysis and is not required part of the financial statements. Such information has been subjected to the auditing procedures applied in the audit of financial statements and, in our opinion, is fairly stated in all material respects in relation to the financial statements taken as a whole.



Chartered Accountants

Kabul

February 09, 2016

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at # 6, Bibi Hajan Palaz,
amat Wani Street, Sheri Naw,
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3 788 875 413

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1808, 1st floor,
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Email: usmanazeem.company@gmail.com

Lahore Office:
111 CC-A,
Phase IV, DHA Lahore

Care of Afghan Families (CAF)

Kabul - Afghanistan

**SCHEDULE OF COMPUTATION OF INDIRECT COST RATE
FOR THE PERIOD ENDED DECEMBER 21, 2015**

PARTICULARS

PARTICULARS	AMOUNTS IN AFS			INDIRECT COST
	DIRECT COST	CAPITAL COST	SUB-GRANTEE COST	
SALARIES AND BENEFITS	185,603,809	-	-	36,386,696
GOOD AND SERVICES	336,915,475	-	-	17,602,635
ASSETS	-	712,539	-	-
SUB-GRANT EXPENSES BARAN	-	-	12,902,985	-
SUB-GRANT EXPENSES SHDP	-	-	19,667,702	-
CAF-BARAN CONSORTIUM EXPENSES	-	-	-	-
CAF DIRECT EXPENSES PORTION DAIKUNDI	-	-	-	-
CAF DIRECT EXPENSES PORTION LOGAR	-	-	-	-
DIRECT EXPENSE FIXED ASSET	-	-	-	-
TOTAL:	522,519,284	712,539	32,570,688	53,989,330

INDIRECT COST RATE (RATIO) =

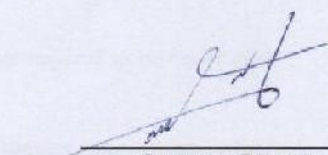
$$\frac{\text{Indirect Cost}}{\text{Direct Cost}} = \frac{53,989,330}{522,519,284}$$

10%

Handwritten signature/initials



Director General
M.Naim.Rassa



Operation Director
Dr.Nasir Ahmad Hamid

A Member Firm of



Usman Azeem & Co.

Chartered Accountants

INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE

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

We are engaged to conduct the Audit of the financial statements of CAF for implementations of various project states under activities description from Annexure 1 to Annexure 23 for the period from 22 December 2014, to December 21, 2015 funded by different donors. The financial statements are the responsibility of the CAF's management. Our responsibility is to express an opinion on the financial statements based on our audit.

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

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

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

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

For and on behalf of


Usman Azeem & Co.
Chartered Accountants

Kabul

February 09, 2016

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Phase IV, DHA Lahore

Registrations



تصدیقنامه ثبت مؤسسات
غیر دولتی بخش زنان

Certificate of Registration For Women

Islamic Republic of Afghanistan
Ministry of women's Affairs (MOWA)
Policy & Plan Department

S/N : (639)
Date:
Based on the decision of the NGO Registration Commission of Ministry of Women's Affairs (MOWA) is Hereby recognized as an NGO (CAF) authorized to Undertake 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 the supervision of MOWA . In case of any violation or unsatisfactory Performance , the above mentioned NGO will no longer receive MOWA,s support and this certificate is Awarded for one year and is valid from (18/08/1394) to (17/08/1395)

Minister of Women's Affairs

دولت جمهوری اسلامی افغانستان
وزارت امور زنان
ریاست پالیسی و پلان

شماره مسلسل (۶۳۹) ثبت
تاریخ:
به استناد فیصله کمیسیون ثبت انجیوها و وزارت امور زنان جمهوری اسلامی افغانستان به ثبت مؤسسه محترم (مواظبت خانواده های افغان) منجبت یک انجیو که به منظور رشد و افکشاف زنان در مرکز و ولایات فعالیت دارند موافقت می نماید.
مؤسسه محترم مکلف است تا تمام فعالیت های خویش را طبق قانون مؤسسات غیر دولتی تحت نظر این وزارت به پیش برده در صورت تخلف از مواد منکره از حمایت این وزارت غر بخش های کاریشان مستفید نگردیده و تصدیقنامه برای یک سال از تاریخ (۱۳۹۴/۰۸/۱۸) الی (۱۳۹۵/۰۸/۱۷) مدار اعتبار میباشد.

وزارت امور زنان



Islamic Republic of Afghanistan
Ministry of Economy
NGOs Department



جمهوری اسلامی افغانستان
وزارت اقتصاد
ریاست مؤسسات غیر دولتی
جواز نامه فعالیت

Former Registration No (۹۴۶) Date / /
New Registration Number: (۶۸) Date: 29/09/2005

To: Care...at... Afghan Families.....

According to the final decision No: (۶۸) Dated 29/09/05 of High Evaluation commission of NGOs your Organization is entitled to work in Afghanistan as an NGO.
You shall respect and observe the Afghanistan Constitution, NGO law and the rest of laws and regulations enforced in the Islamic Republic of Afghanistan.

شماره ثبت قبلی (۹۴۶) تاریخ / /
شماره ثبت جدید (۶۸) تاریخ ۱۳۸۴/۷/۷
به مؤسسه محترم (راجبه خانواده های افغان) (CAF) با ساسی تصویب کمیسیون عالی ارزیابی مؤسسات غیر دولتی تحت فیصله شماره (۶۸) مورخ ۱۳۸۴ / ۷ / ۷ برای مؤسسه شما اجازه فعالیت در افغانستان منظور است. مؤسسه مکلف است در اجراء خویش تمام مواد مندرج قانون اساسی، قانون مؤسسات غیر دولتی و سایر قوانین و مقررات نافذ جمهوری اسلامی افغانستان را رعایت نماید.

با احترام




دوکتور میرمحمد امین (فرهنگ)
وزیر اقتصاد و رئیس کمیسیون عالی ارزیابی

Dr. Mir. M. Amin (Farhang)
Minister of Economy

Appreciations

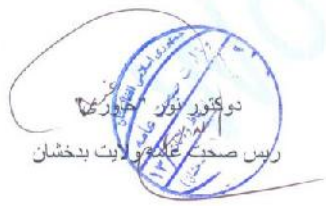




تَحْسِينِ نَامَه



به پیشواز از روز جهانی توبرکلوز و به اساس خدمات شایسته و تلاش های پیگیر محترم دین محمد "دانشجو" تحسین نامه هذا برایشان تفویض میگردد و موفقیت مزید شان را در امورات کاری شان از خداوند متعال خواهانیم.



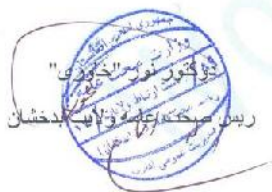
قطب الدین "برومند"
 امر ولایتی توبرکلوز ولایت بدخشان
 1393-12-19



تَحْسِينِ نَامَه



به پیشواز از روز جهانی توبرکلوز و به اساس خدمات شایسته و تلاش های پیگیر محترم فخرالدین "احمدزاده" تحسین نامه هذا برایشان تفویض میگردد و موفقیت مزید شان را در امورات کاری شان از خداوند متعال خواهانیم.



قطب الدین "برومند"
 امر ولایتی توبرکلوز ولایت بدخشان
 1393-12-19



تحسين نامه



به پیشواز از روز جهانی توبرکلوز و به اساس خدمات شایسته و تلاش های پیگیر محترم داکتر ناصر "افضلی" تحسین نامه هذا برایشان تفویض میگردد و موفقیت مزید شان را در امورات کاری شان از خداوند متعال خواهانیم.



قطب الدین "برومند"
1393/09/02
آمر ولایتی توبرکلوز ولایت بدخشان

جمهوری اسلامی افغانستان
اداره مستقل ارگانهای محلی
شورای ولایتی بدخشان
دارالانشاء



د افغانستان اسلامي جمهوریت
دسیمه ییزو اورگانونو خپلواکه اداره
د بدخشان ولایتی شورا
دارالانشاء

Islamic Republic of Afghanistan
Independent Directorate of Local Governance
Badakhshan Province Council

شماره ثبت ۹۵۶

تاریخ 1394/09/02

مدیریت اطلاعات و ارتباطات

(تقدیر نامه)

شورای ولایتی بدخشان، به پاس خدمات و زحماتی که محترم عبدالجمیل "سلطانی" رئیس شفاخانه ولسوالی کشم در قسمت مدیریت سالم، برخورد مناسب با مراجعین و پرسونل، اخلاق نیک و تهیه ادویه لازم برای افراد فقیر و ناتوان در سطح ولسوالی کشم انجام داده است، ایشان را مورد تقدیر و تحسین قرار داده و از خداوند متعال موفقیت و پیروزی شان را در امورات کاری و خدمت گزاری بیشتر به مردم خواهان است.

با احترام

داکتر احمد بشیر "صمیم"
رئیس شورای ولایتی بدخشان





تصدیق نامه از عمل کرد

به این وسیله ریاست امور زنان ولایت بدخشان تصدیق می دارد از کار موسسه مواظبت خانواده های افغان یا کف در قسمت صحت و انکشاف ظرفیت کارمندان صحتی و کارکنان صحتی زنانه جامعه و ارایه خدمات صحت باروری مطابق مجموعه خدمات اساسی صحتی برای زنان و مادران ولسوالی ها و قریه جات سیزده ولسوالی ولایت بدخشان و آرزوی موفقیت های بیشتر شان را داریم

۲۵ میزان سال ۱۳۹۴

رئیس امور زنان ولایت بدخشان

جمهوری اسلامی افغانستان
وزارت امور زنان
ولایت لوگر
ریاست امور زنان



تصدیق نامه

به این وسیله ریاست امور زنان ولایت لوگر از کار موسسه مواظبت خانواده های افغان یا کف در قسمت صحت زنان، انکشاف ظرفیت کارمندان صحتی و کارکنان صحتی جامعه زنانه و ارایه خدمات صحت باروری مطابق مجموعه خدمات اساسی صحتی برای زنان و مادران ولسوالی ها و قریه جات ولایت لوگر تصدیق می دارد و آرزوی موفقیت بیشتر شان را داریم

28 میزان سال 1394

با احترام

شما زرگر

رئیس امور زنان ولایت لوگر





تاریخ - 1393/10/20 جمهوری اسلامی افغانستان

بخش ارگانه‌های محلی
شورای ولایتی ولایت دایکندي

شورای ولایتی ولایت دایکندي بپاس خدمات صادقانه موسسات محترم CAF/SHDP که از طریق شفا خانه ولایتی ولایت دایکندي به این مردم خدمات صحی با کیفیت را ارایه مینمایند ابراز امتنان نموده و برای ایشان موفقیت های هرچه بیشتر را از بارگاه ایزد مننان استدعا مینماید

با احترام

شورای ولایتی دایکندي



تاریخ - 1393/10/13 جمهوری اسلامی افغانستان

وزارت صحت عامه

ریاست صحت عامه ولایت دایکندي

ریاست صحت عامه ولایت دایکندي از اجراءات صادقانه محترم داکتر محمد عارف "تابش" امرشفا خانه ولایتی در راستای خدمات صحی برای مردم این ولایت اظهار سپاس نموده تقدیر نامه هذا را برای ایشان تقدیم و موفقیت های مزید را از درگاه خداوند برایش استدعا مینماید

با احترام
داکتر تیمور شاه "یوسفی"

رئیس صحت عامه ولایت دایکندي



تاریخ - 1393/10/13 جمهوری اسلامی افغانستان

وزارت صحت عامه

ریاست صحت عامه ولایت دایکندي

ریاست صحت عامه ولایت دایکندي از اجراءات صادقانه محترم محمدجمال "علوی" مدیر نرسینگ خانه ولایتی در راستای خدمات صحی برای مردم این ولایت اظهار سپاس نموده تقدیر نامه هذا را برای ایشان تقدیم و موفقیت های مزید را از درگاه خداوند برایش استدعا مینماید

با احترام

داکتر تیمور شاه "یوسفی"

رئیس صحت عامه ولایت دایکندي



بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ



د افغانستان اسلامي جمهوریت
د عامې روغتیا وزارت
د لوگر ولایت د علم، روغتیا ریاست

د افغانستان اسلامي جمهوریت
د سیمه ایزو اورگانونو خپلواکه اداره
د لوگر ولایت

تقدیر نامه

شماره راجستر: (۱۶۷)
تاریخ: ۱۳۹۳ لمر ۱۰

بناغلی داکتر فضل محمد "منگل" چی د لوگر ولایت د صحت د پروژې د مسنول په توگه یی په بیره ایمانداري، صداقت، خلوص او زورورتیا دنده تر سره کړی او په خپلو ورسپارل شویو روغتیایی مسنولیتونو او نندو کی د لوگر ولایت د شریف او نجیب ولس په خدمت کی یی نه ستړی کیدونکی هلی خلی کړی دی نوموړی ته د لوگر د ولایت مقام او د لوگر ولایت د عامې روغتیا ریاست د لوگر د خلکو په استازیتوب سره د بنو کړنو او بنایسته خدمتونو په کولو سره دغه تقدیر نامه ورکوی او ویاړ وربښی چی ملت ته لازیات خدمت مصدر وگرخی.

وزارت صحت عامه
ریاست روغتیا و لاسوالی و د لوگر ولایت
د لوگر ولایت د عامې روغتیا ریاست

د افغانستان اسلامي جمهوریت
د سیمه ایزو اورگانونو خپلواکه اداره
د لوگر ولایت

Let's improve the quality of life among Afghan families

Care of Afghan Families

CAF

Annual Report ۱۳۹۴

