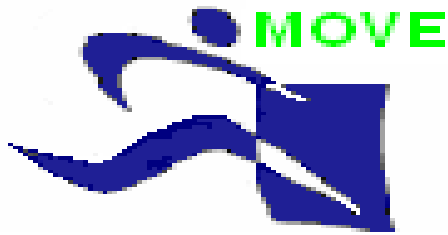


2019

Annual Report



Welfare Organization

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ACRONYMS:

BPHS	Basic Package of Health Services
BHC	Basic Health Center
CHC	Comprehensive Health Centre
CBHC	Community-Based Health Care
CHS	Community Health Supervisor
CHW	Community Health Worker
CDC	Community Development council
CCNAP	Citizen Charter National Afghanistan Program
CMS	Community Mobilization session
COBV	Community Based outreach Vaccination
DH	District Hospital
EPHS	Essential package of Hospital services
FPC	Family protection Centre
GBV	Gender Based Violence
GAVI	Global Alliance for Vaccines and Immunization
HMIS	Health Management Information System
HQ	Head Quarter
IDPs	Internal Displaced People
MAM	Moderately Acute Malnutrition
MHT	Mobile Health Team
MoPH	Ministry of Public Health
MOVE	MOVE Welfare Organization
NGO	Non-Governmental organizations
NMT	Nutrition Mobilization Team
OPD	Outpatient Department
PLW	Pregnant and Lactating Women
PMO	Performance Management Office
PMU	Performance Management Unite
PPHD	Provincial Public Health Director
PPHO	Provincial Public Health Office
PHO	Public health officer
RH	Reproductive Health
SFP	Supplemental Feeding Program
RMNCAH	Reproductive, Maternal Norborne, Child and Adolescent Health
SRH	Sexual Reproductive Health
UNICEF	United Nation International Children Emergency Fund
UNFPA	United Nations Population Fund
UNDP	United Nations Displaced program
WHO	World Health Organization
WB	World Bank
WFHS	Women Friendly Health Spaces

EXECUTIVE SUMMARY

This report covers MOVE' s activities for the period 1st January 2019 to 31st December 2019. These activities have been accomplished through various projects in different locations as highlighted in the report of the projects. During this period, MOVE continued with its services in health promotion, prevention, treatment, community mobilization, capacity building, education and social development activities in Daikondi, Bamyan, Nimroz, Baghlan , Kundoz and Badghis provinces of Afghanistan.

MOVE has managed its project with new concept of payment as P4P; one Provincial Hospital, 3 District hospitals, 2 CHC + 6 CHC, 14 BHCs, 29 SHCs, 11 MHTs, 82 FHHs, one Prison health facilities and two CME/CHNEP schools were functional for service provision. MOVE community development programs through partnerships with ACTED and CHA organizations implemented Citizen chartered projects in Badghis and Nimroz provinces channeling through MRRD, for development of 365 CDCs, it is going on according its work plan and successfully achieved its targets.

The projects implementation had many challenges, including shortage of managerial staff, disruption in the management of fund flow, money inflation and its effects, cost increments, social instability and on top of all the insecurity. The poverty level remains high which have been negatively affecting the social health status. Despite on that, in overall MOVE projects

performances was good and successfully achieved its targets. We effort for caring of those who need it the most and making the best use of available funds and resources with transparency and accountability. All HFs were functional, staffing was more than 98%, supplies accomplished timely to HFs and the clients could receive the maximum benefit from incurred resources. The tremendous work carried out in related projects catchment areas are the result of the; hard endeavor, resistances, and tolerance of MOVE management and field staff battlement to work under pressure, who worked with great commitment, day and night in a very challenging condition. We are grateful from all MOVE staff for their dedication and hard efforts to provide quality services and achieving projects objectives. MOVE is grateful to provincial (PPHDs/PMUs) and central (MOPH/MRRD) authorities and all other stakeholders who technically and financially participated in the project implementation and paved the ways for MOVE to strategically achieve its one-year objectives and goals. It is worth mentioning that the targeted community and their representatives also actively participated and contributed to the success of the whole process of the projects implementation.

Dr. Abdul Latif “Rashed”
MOVE Executive Director

ABOUT MOVE WELFARE

ORGANIZATION

MOVE is a national, humanitarian, independent, non-political, non-sectarian organization which is aiming for an equitable and quality standard health care for all Afghans throughout its endless effort to response to highly vulnerable groups; mother and children, who are victim of various deadly diseases as well as having the high rates of morbidity and mortality in the country. MOVE Welfare Organization was founded in 2003 by a group of professionals in health care management. MOVE was registered with the Ministry of Economy (Reg. No. 45) and signed a memorandum of understanding (MoU) with the Ministry of Public Health.

Our Values

- Providing services with dignity and respect.
- Commitment, transparency, accountability and efficiency.
- Teamwork, community participation, gender equity.
- Capacity building, creativity, innovative

Our Vision

- Healthy life and social welfare for all, without any type of violence and abuses on gender, religious and ethnicity with dignity and respect.
- Ensure that all Afghans have access to high-quality health care and optimal level of health and well-being.
- Desiring to provide education, food, shelter and health care facilities.
- A society stand on the legal right, equity, gender, equality,

integrity, justice, transparency, honesty, social sensitivity.

Our Mission

- MOVE Welfare Organization respecting the right of healthy life and social welfare for all and aiming the efforts for quality health care and social development for the people of Afghanistan.
- By offering health, training, capacity building, and social development programs would meet the most crucial needs of Afghanistan
- MOVE is committed to contributing to the promotion of public health through providing facilities and services in, health care, water sanitation, hygiene and environmental issues.

Organization objectives

- To improve health status by providing health services particularly for the most vulnerable people.
- To contribute upgrading knowledge, skills, developments activities, researches.
- To strengthen the social financial and mental status of the women and children who are affected by conflicts.
- To contribute poverty alleviation focusing on empowering, agriculture, food and shelter.
- To ensure access to safe water, environmental and health care services and facilities such as women & child health, immunization, and nutrition.

PROGRAMS:

HEALTH SERVICE PROGRAM

Health service provision is the main activity of MOVE organization, include provision of Basic Package of Health Service (BPHS), Essential Package of Hospital Service (EPHS), Family Health House (FHH), RMNCH, Mobile Health Team, Nutrition prevention and treatment through therapeutic feeding center (TSFPs) and Gender Based Violence (GBV/HSR) services.

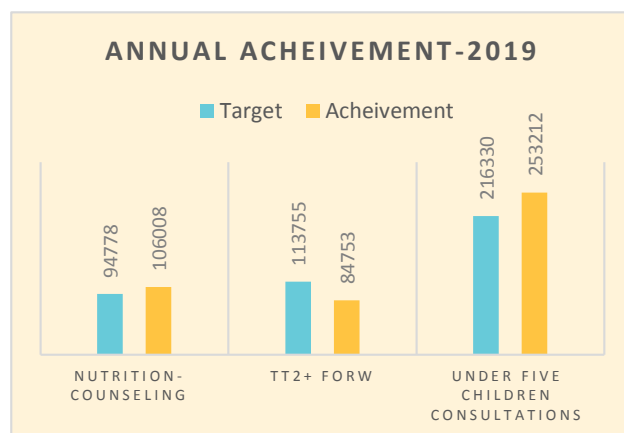


The health service programs is implemented through 148 health facilities dispersed in 5 provinces covering almost one million peoples. The beneficiaries of the projects are the whole population of the provinces mainly the most Venerable which are the women of reproductive health, mothers and children under-fives years old. The health services are in line with MoPH recommended policies included the whole Basic Package of Health Service, which include the seven components (MCH, Nutrition, Child health and immunization, CDC, Mental health, Disability services and provision of Essential drugs) and Essential Package of

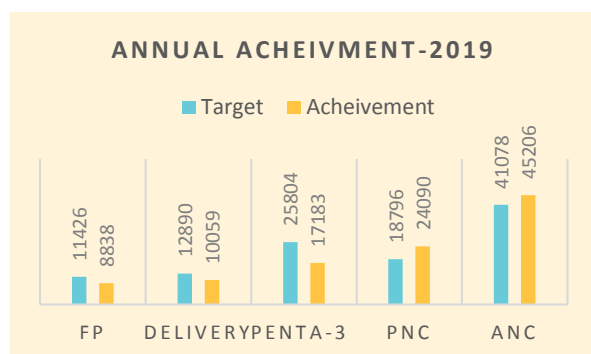
Hospital Service in hospitals, provides by skilled certified health workers. The services supported by a network of Community Based Health Care system contains of Community Health Workers, Community Health Shuras, Family Health Action Groups and a strong referral system for linkage of each type of health facility to upper level. The OPD consultation, IPDs, preventive and promotive services are all without any charges to the patients. The programs are supporting by MOPH, World bank, UNFPA, UNICEF, WFP and different donors.



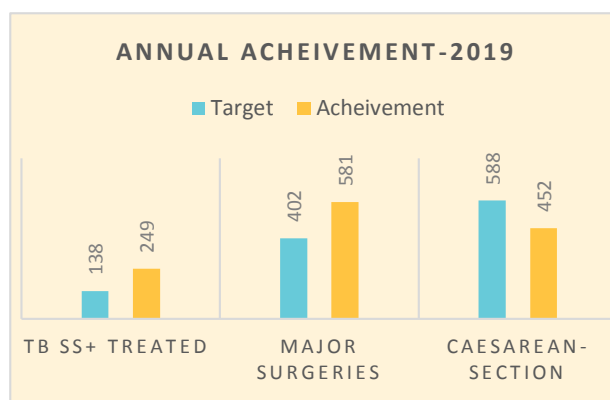
During year 2019, BPHS and EPHS health facilities Performed totally 1,247,528 OPD consultation, 253,212 under 5 consultation, 852 major surgery, 45,206 ANC, 24,090 PNC, 10,059 Delivery care, 452 Cesarean Section, 89,753 TT



vaccination, 15,108 Measles vaccination, 17,905 BCG vaccination, 17,183 Pnta3 vaccination, 249 TBSS+ treatment.



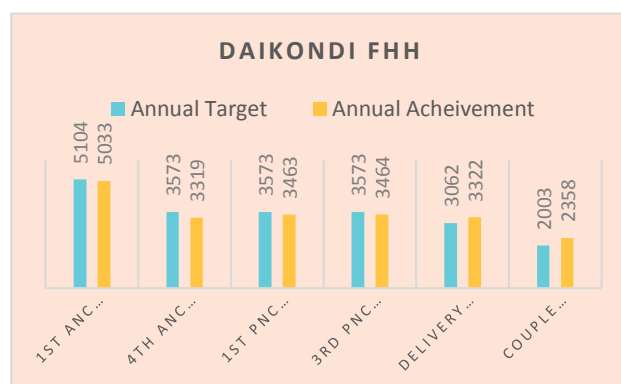
106,008 nutrition consultation, 43,737 mental health, 5,976 physiotherapy 48,799 Dental services, 30,365 Eye care, 4,363 X ray 4,731 ultrasound services has been done.



The RMNCH mobile health care service teams provided the health services in hard to reach uncovered areas by 11 MHTs. Provide essential RMNCH services for the people Who live in very remote areas and don' t have access to BPHS. The MHTs have a fully equipped vehicle, with qualified staff (Midwife, Nurse, Vaccinator) goes to pre identified SDPs for service provision. The pharmaceuticals supplied by UNICEF and provision of service are based on MOPH MTH standards.



The Delivery of Health Services and Promotion of Sustainable Livelihood Project implemented through 82 FHH, 78 HP, 168 FHAG, and 82 Health Shura in Bamyan, Daikundi and Badghis provinces. To whom live in very remote areas and don' t have access to BPHS services.



The main and essential services provided by FHHs is around the clock delivery care, OPD (IMNCI) for under 5 years children, ANC, PNC, Delivery and FP.



TRAINING AND CAPACITY BUILDING

Training and capacity building is crucial part of MOVE activities to develop human resources for quality service provision. We had two type of trainings, in services training, that short training conducted for health workers who are directly



involved for service provision and preservice long term training conducted in CME & CHNE schools for students such as two years training for community midwives and nurses. The in service training was conducted based on TNA and training annual plan for different categories of staff mostly one to seven days. The qualified trainers provided the training and



all facilities provided for trainees. The Daikundi CHNE and CME schools commenced in October 2017 and completed in October 2019. It was two year

Preservice training for 48 students conducted by MOVE/OCCD as part of the MoPH/World Bank funding, in close coordination of MoPH/GIHS. During the education period, we offered high quality teaching in line with CHNE & CME Curried by using update national CHNE/CME standards. According to the CHNE and CME policy requirement. The program have been assessed by GHIS and AMNEAB and completed all phases of assessment (Baseline, Non-Binding and Binding Assessments) for accreditation with a score of more than 95%. The project trained and successfully graduated 46 (23 CME and 23 CHNE) students as professional nurse and midwife, using community health nursing and midwifery education strategy.

The CME of Badghis is the first step for



establishment of Family Health House project with the same aim and objective of Daikundi and Bamyan FHHs with Foreign Affairs, Trade and Development ministry of Canada funded through UNFPA started on September 2019. The CME School will train 29 community midwives in Badghis CME School. The candidates after graduation of CME School will go to their already selected Family Health Houses and provide RMNCAH services. Currently this course cover 29 midwives as student with theory and practical classes facilitate by qualified CME teachers.

SOCIAL DEVELOPMENT

MOVE is one of the facilitating partner for implementation of Citizen Charter National Program in Badghis and Nimroz provinces



since May 2017. Citizens' Charter Project is seek to address key community limitations to respond to financial constraints to national and social development. It improve the delivery of social services to participating communities through strengthened Community Development Councils (CDCs). These services are part of a minimum service standards package that the Government is committed to deliver to the citizens of Afghanistan. As such, the Citizens' Charter is a promise of the partnership between the state and communities. The project core performance indicators for the year 2019 were successfully achieved. 365 CDC identified under 76 cluster CDCs, all the clusters elected with formation of sub-committees and CDPs prepared. All the tools and its forms submitted to PMU. MOVE as a facilitating partner build the capacity of 43,757 person's (21,390 female, 22,367 male) through providing different training such as project management, disaster risk mitigation management and gender and safety exercise and transferring knowledge-based

training such as accountant, procurement, Environmental and social safeguard training and Grievance Handling Mechanism for new covered 2026 household; and 79 SOs "56 Form MOVE and 23 from PMU/MRRD" received project.

Ghar-e-Haidar CDC (Code # 19-1904-0067), Jawand district, Badghis province located around 12 Km in the east region of Jawand district centre, has 123 household ,covered by CCNPP in August 2017. Mrs. Zargul the chairman of Ghar - e-Haidar CDC trained and get proper knowledge on CCNPP activities. She applied it in practice by starting a tailoring course for 18 women in her



community. She collected 500 Afghani from each women participating in the course in order to procure 5 tailoring machines. She trained 18 women for two months from 10 October to 10 December 2019. All 18 student are graduated from tailoring course on 11/12/2019 and they are sewing women and men dresses in their home. Each one feel proud of being enabled for income generation and can serve their family. All of them are delighted to contribute in their household livelihoods. It is a success story of the project in a very remote village of the country.

PROJECTS ACTIVITIES AND OUTPUTS

DAIKONDI SEHATMANDI PROJECT (BPHS-EPHS)

PROJECT NAME AND DONOR: BPHS/EPHS

Sehatmandi- MoPH/World Bank

DURATION: From 01 January 2019 to 31 June 2021

LOCATION AND POPULATION: Daikundi-466,580 based on CSO and project contract

PROJECT GOAL and OBJECTIVES:

The overall objective of the project is to contribute to improving health status of people, reducing the maternal, new born, infant/child mortality, reducing the incidence of communicable disease and improving child health and nutrition, Through BPHS/EPHS implementation, increase access and utilization of primary quality health services in equitable and sustainable manner in Daikundi province.

PROJECT INPUT AND ACTIVITIES:

Totally 58 HFs (One Provincial Hospital, 3 DHs, 2CHC+, 6 CHCs, 14 BHCs, 29 PHCs, 1 prison health and 2 MHT) and 386 HPs are functional. 625 technical and support staff in HFs and 45 in management are involved in health service delivery. The health facilities are distributed in whole districts of the province. HFs with different types

and capability for service as recommended by MoPH policies are available and provide the BPHS seven components services free of any charges and cover the whole population. On daily bases 5,000 population on average receive the service from the project. The referral system from low level health facility to higher level is established and maintained to cover the complicated cases. Around the clock Ambulance are provides through 12 HFs (1PH, 3DHs, 2CHC+s and 6 CHCs) and one High way Ambulance for referral of emergency cases to Bamyan and Kabul. The health worker activities and payments managed through Pay for Performance (P4P) as one of the new methods of medical provider compensation for health service quality improvement. MOVE management team developed comprehensive guideline for implementation of P4P, specific human resources for verification of reports recruited, required tools developed and followed. Quarterly performance review meetings have been conducted with active participation of PPHD, MoPH/PMO and MOVE provincial management team. The implementation of the P4P have a good implication for health worker active participation in the project. The challenge was delay in performance payment of health worker due to weak funding flow as a consequence of third party verification. The EPI section supported by CBOV funded by GAVI within sehatmandi structure.

PROJECT CORE INDICATOR PERFORMANCE

Services-Indicators P4P	Annual Achievement	Annual Target	% of Achievement
Ante-natal Visits	45206	40580	111%
Post-natal visits	24090	20099	120%
Institutional delivery	10059	12056	83%
Couple Year protection	8794	10815	81%
Penta-3 <1 year	17183	25815	66%
TT2+ for women	84753	109852	77%
TB Sputum Smear Positive (SS+) cases successfully treated	249	176	141%
Nutrition- Growth monitoring <2 years children/IYCF counselling	106008	130321	81%
Under five children consultations	253212	235319	108%
Caesarean-Section	452	438	103%
Major Surgeries	581	452	128%

Supervisions and Monitoring: Each HF's have been supervised at least 6 times per year. 403 supervisory visits conducted from 58 HF's by deferent technical units and Constructive feedback and follow up action plan prepared and implemented. MOVE HQ Management team (Executive Director, Health Director, Performance Verification



and Development Director, Operation Director, Admin/ Finance Director, Nutrition/EPI Manager, HMIS/ M&E manager, Pharmacy manager) has conducted monitoring from provincial office and HF's. During 5 round of missions 17 HF's roundomely visited, and necessary support has been provided to the provincial management team and HF's staff.

His excellency MoPH Deputy Minister for provision of Health Services had monitoring visit from 4 HF's of SEHATMANDI project,



PPHD deferent technical were conducted 101 join monitoring visits from 49 HF's. Eeconomic department, PPHD, and MOVE team jointly visited 14 HF's, 17 HF's were monitored by MoPH M&E members, RH, CBHC, Mental Health and Pharmacy departments, moreover GCMU Senior Grant specialist and PMO focal point had Monitoring visits from provincial office as well as from 11 different types of HF's, remedial follow up action plan for provided internal and external monitoring reports developed in order to follow and improve services provision. The COBV mobile team supervised by provincial EPI team and supported for how to use their time in the best manner for vaccination of in white areas.

Capacity Building activities: BPBS /EPBS HF's staff received different trainings based on project training plan, during 2019 totally 419 Sehatmandi project staff trained (P4P orientation workshop, TB stock management ,GBV, RUM/MDS, HMIS refresher , HQIP refresher , EPI Refresher, TSFP Refresher).



HFs New establishment/upgrading: In Miramor and Kijran districts of Daikundi province, for strengthening of community accessibilities to the health services, one PHC newly established (Mirghulam) and one BHC upgraded to CHC (Temran) with close coordination of PPHD and other stakeholders. Medical and non-medical equipment's supplied based on BPBS standards, the required staff of both HF's recruited and trained and health services delivery started.

HFs supplies: Pharmaceuticals supplied to all HF's, Also essential medicines, expandable, Lab reagents, HMIS formats,



stationary, hygiene materials, food for patient, fuel for generator, gas for EPI and dressing, Heating materials for winterization for all 58 HF's provided. In addition CHW Kit has been supplied for all HF's. With close coordination of MoPH the procurement of 2 new standard Ambulances and 5 Motor Bick successfully completed for Daikundi Sehatmandi project. Based on assessment plan 4 Generators, 20 Solar with batteries, 2 Dental units for DHs and required furniture for 28 HF's (Desk, Chair, bench and Shelf) has been supplied.



Coordination: The Project management team kept their close coordination with Daikundi PPHD, PPHOs, partner organizations and governmental and nongovernmental stakeholders to implement Sehatmandi project in a professional manner, all coordination meetings were attended on



regular bases. Monthly and Quarterly project report submitted to MoPH/GCMU/PMO.

Pharmacy Management: In Daikundi Sehatmandi project the supply management of essential medicines adjusted based on monthly morbidity report and HMIS factor (Pull System), on push method caused, irrational use of drugs and poly pharmacy during prescribing at health facilities and was an issue to be tackled. Emergency kits



and one month buffer stocks were maintained at all HFs to prevent any shortages and stock outs, re-supply order issued for HF by taking the minimum stock level and lead time into the consideration. The provincial pharmaceutical stock including buffer stock maintained at the provincial level as well. Based on training annual plan one batch RUM/ MDS refresher training conducted for 29 eligible staff of HFs.

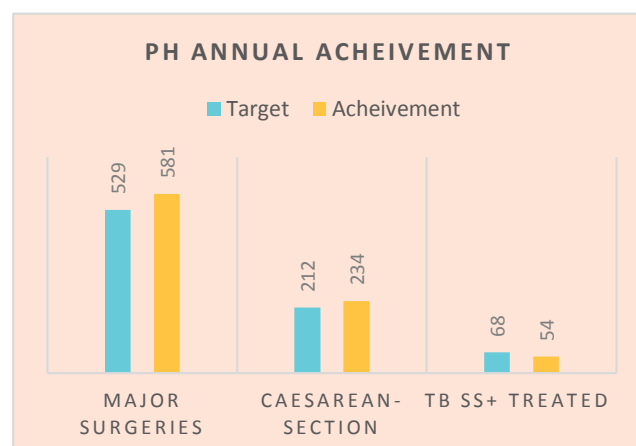
EPHS services: In commencement of Sehatmandi project an in depth assessment conducted in Nili PH in term of



availability of staff, services, equipment's, trainings and renovation needs, the result analyzed and the improvement action plan developed. MOVE operation department successfully procured and supplied all medical/non-medical consumables supplies for PH. The overall management of the hospital organized required renovation has been done. Hospital



management and quality assurance committees developed and started its activity. The OPD and IPD services are functional and provide round the clock health services. The IPDs ward are including the surgery, Obs+ Gynecology, pediatric, internal medicine, Nutrition for male , female and children are available. The diagnostic service are lab, Ultrasound and X ray which provide the services for OPDs and IPDs patients.



DAIKONDI FAMILY HEALTH HOUSE PROJECT (FHH-MHT)

PROJECT NAME AND DONOR: PROVISION OF
HEALTH SERVICES AND PROMOTION OF
SUSTAINABLE LIVELIHOOD-UNFPA

DURATION: From 01 January 2019 to - 31
December 2019

LOCATION AND POPULATION: Bamyan, Daikundi
and Badghis Provinces

PROJECT GOAL and OBJECTIVES:

The goal of the project is to contribute for reduction of avoidable mortality and morbidity among the population living in Daikundi, Bamyan and Badghis provinces, through health services providing by FHHs, MHTs, and HPs. The main objective of this project is providing essential RMNCAH services, increase access of people to RMNCAH in which strengthen the delivering the basic health care, community health care referral of complicated cases, and



preventing defaulter of ANC and PNC through home visits of the FHH's catchment areas and follow up of family folders and encourage women to come to FHH.

Main Achievement of Bamyan and Daikundi FHH Projects:

The 82 FHH were functional and provided the RMNCAH services, for quality improvement HQIP implemented in all FHHs, pharmaceuticals and logistic supplies provided regularly. Supervision and Monitoring of the activities have been conducted from all FHHs, HPs and FHAGs in order to insure proper and quality based health care services. HQ and provincial technical staff performed 667 regular supervision and monitoring, through the



missions all FHHs and HPs visited, provincial and HQ team had several coordination meeting with PPHD, PHOs, Women Directorate, Provincial Council Members, Health Shura Members and BPHS/EPHS implementer to coordinate the activities and seek their support for improvement of referral and health promotion of people. Refresher training on Malaria, Nutrition, Sayana Press Injection, HMIS and RUD conducted to all midwives. Reporting system improved based on HMIS policy of MoPH and all reports entered in HMIS data base and shared with MoPH and PHD of the province. Logistical materials and pharmaceuticals including winterization supply have been done on time before reaching winter.

Several join monitoring performed from FHHs. One of the highlights of this year was the supervision of the project by the top level management of the Ministry of Public Health, (His excellency MoPH deputy Minister, and MCH Director) who officially appreciated the FHH project activities in Daikundi. As part of supportive supervision, on the job training provided to all FHH' s midwives on different health topics also meeting with the respective communities to improve their participation was the part of supervision and through the meetings they have been informed about the available facilities in the FHHs.

Progress on Indicators:

Bamyan FHH	Annual Target	Annual Progress	Annual % of Achievement against Target
1st ANC Visits	1330	1317	99%
4th ANC Visits	1064	1035	97%
1st PNC Visits	1064	984	92%
3rd PNC Visits	1064	1190	112%
Delivery by SBA	931	929	100%
Couple Year Protection	688	765	111%
Daikundi FHH	Annual Target	Annual Progress	Annual % of Achievement against Target
1st ANC Visits	5104	5033	99%
4th ANC Visits	3573	3319	93%
1st PNC Visits	3573	3463	97%
3rd PNC Visits	3573	3464	97%
Delivery by SBA	3062	3322	108%
Couple Year Protection	2003	2358	118%

Capacity Building of Technical Staff in Daikundi and Bamyan

During 2019, MOVE conducted trainings on Nutrition, Malaria, HMIS, RUD and Sayana Press Injection (Sub coetaneous Depo

medroxyprogesterone acetate) to 83 CMWs, these trainings facilitated by qualified trainers, conduction of these training in addition to enhancing the capacity of midwives will have a good impact on the delivery of services.



Coordination of the Project in Bamyan, Daikundi and Badghis FHH project

FHH project team kept effective and good coordination with PPHD, PHOs, Health Shuras, Provincial Counsel, Government authorities and other stakeholders involved in the project activities to help the project functionality and addressing challenges during the implementation.



MOVE provincial team actively participated in all subcommittee meetings arranged and conducted by PHOs including HMIS, Pharmacy, EPI, RH & Gender, TB, Nutrition, and EPR

PPHOs and PHCC meetings. MOVE HQ and provincial office team participated in Provincial council meeting, PDC, FHH Steering Committee at national level and UNFPA annual review meeting.



As well as weekly staff meeting regular conducted by provincial management team, to discuss about their achievement, challenges, and weaknesses and make their proper weekly plan for better follow up of FHH activities. Quarterly review meeting conducted on regular bases, this review were open discussion with all provincial supervisors and managers they presented their planned activities, achievement, challenges, lesson learnt and success stories through individual presentation then for each supervisors and managers constructive feedback were provided and



action plan developed based on the comments and recommendation.

CME/MHT of Badghis Province:

The CME and MHTs of Badghis are actually Family Health House project with the same aim and objective of Daikundi and Bamyar provinces under Foreign Affairs, Trade and Development Canada fund through UNFPA so, the CME School will train community



midwives for Family Health House. Badghis CME School started on September 2019 by MOVE Welfare Organization at the center of province (Qala e Now). CME program established and organized for those candidates whom have been selected for Badghis FHHs. The candidates after graduation of CME School will go to their own Family Health Houses (FHH) and will



provide RMNCAH services to their catchment area. Currently this course cover 29 midwives as student with theory and

practical class facilitate by qualified teachers.

Two Mobile Health Team (MHT) work in Badghis under this project to provide accessible and quality health care services to under-served populations particularly in the catchment areas of FHH and mobilize the related community. The MHTs visited villages and Service Delivery Point (SDPs) at least for 20 days in a month as per the approved work plan so, during their visits to the targeted villages.

Kabul CME Refresher Course: CME refresher course established by MOVE Welfare Organization, this course started on the 1st of September 2019 in Kabul by financial support of UNFPA through Foreign Affairs,



Trade and Development Canada fund. Duration of the course was for four months (1st of September 2019 till end of December 2019). This course organized for those midwives whom have been selected for Noristan, Paktika, Samangan and Badghis provinces and decision has been made that after the graduation they will go to their own Family Health Houses (FHH) of the mentioned provinces. The course covered 16 midwife as student and through one theory class and one practical class facilitated by qualified teachers. Course managed by

management team consisted of school principle, 2 qualified teachers, hostel principle, admin finance officer and logistic officer. Its overall activities were successfully implemented in accordance to brief curriculum made by teachers based on CME standard curriculum and calendar, teachers mostly focused on all aspects of the course like theoretical



unit, practical works, skills lab on models and hospital skills. The course had successfully completed on Dec 30, 2019. Ceremony for their graduation and



distribution of certificate arranged by MOVE management team as well as initial midwifery kit has been distributed to graduated midwives.

GENDER BASED VIOLENCE AND HUMANITARIAN PROJECT (GBV-MHT)

PROJECT NAME AND DONOR: GENDER BASED
VIOLENCE AND HUMANITARIAN -UNFPA

DURATION: From 01 January 2019 to - 31
December 2019

LOCATION AND POPULATION: Bamyan,
Daikundi, Baghlan, Kunduz and Nimroz
Provinces

PROJECT GOAL and OBJECTIVES:

The aim of this project is prevention to gender based violence and health sector response, humanitarian health activities and law-enforcement bodies through Family Protection Centers, Women Friendly Health Spaces, MHTs and one health facility. The project activity is multi sectorial for identifying the GBV cases, providing medical care to the clients, refer the cases to police and law enforcement bodies and humanitarian health services to IDPs and returnees. In 2019, MOVE Welfare Organization implemented GBV Humanitarian Project in 5 provinces (Bamyan, Daikundi, Nimroz, Baghlan and Kunduz) through 6 Family Protection Center, 3 Women Friendly Health Space, 3 Mobile Health Team and One Health Facility funded by UNFPA .

Main Achievement

6 FPC, 3 WFHS, 3 MTH and 1 Zero Point Clinic in the border of Nimroz were functional and provided services to the victims. 60 Monthly Case Management Meeting conducted by provincial GBV team of Bamyan, Daikundi, Nimroz, Baghlan and Kunduz provinces, in which all sectors should have efforts on elimination of GBV as well as their

capacities should be strengthen on prevention, response and monitoring of GBV and child marriage. 24 Community dialogue have been conducted in Bamyan, Daikundi, Nimroz, Baghlan and Kunduz in which more than 1000 women and men participated. 12 GBV Sub cluster meeting has been conducted in Bamyan. 5 Batch of GBV Data Collection and SOP training for 125 health worker arranged and successfully conducted in Baghlan, Bamyan and Daikundi provinces, the participants of this trainings were health worker from different type of BPHS health facilities including EPHS. 5 Batch of Data collection of GBV and Psycho-social training for 183 health worker arranged and successfully conducted, the participants of this trainings were health worker from different type of BPHS health facilities including EPHS. 10 midwife from BPHS health facilities mainly from CHCs and DHs of Baghlan, Kunduz, Nimroz, Herat and Badghis have been trained on BEmONC, this training was for 21 days and conducted in Kabul Rabi Balkhi Hospital. 17 Program Managers from different BPHS implementer NGOs including PHOs of Nimroz, Kunduz, Herat, Badghis and Mazer e sharif trained on SPRINT/MISP, this training arranged in Kabul and was for 5 days.

GBV Projects Pictures:



BAMYAN RMNCH PROJECT (RMNCH)

PROJECT NAME AND DONOR: MHT-RMNCH -UNICEF

DURATION: From Feb 2019 to - 31 December 2019

LOCATION AND POPULATION: Bamyan, Province

PROJECT GOAL and OBJECTIVES:

The goal of the project was to reduce maternal and child mortality rate among mothers and young children through equitable access to quality health care services in hard to reach areas. The objectives were to ensure provision of basic health services in remote villages in hard to access areas, expand and strengthen community based health care (CBHC), increase awareness, encourage greater community participation, and creates demand for health services, and safety and environmental sanitation.

PROJECT MAIN ACTIVITIES AND ACHIEVEMENTS

RMNCH is (Reproductive Maternity Newborn and Child Health) project was started in Feb 2018. MOVE organization implemented the project in the Bamyan in Catchment area of 7 districts (Markaz, Shiber, Saighan, Kahmard, Yakawlang 1,2, Panjab and Waras) through 7 Mobile team as per project plan. According to contract UNICEF supported the



project. This project covered 63,791 population. RMNCH project site selection is done through annual PEMT Micro planning session. All performance indicator achieved. Also the data of this project is reported timely to each related line of the project. Activities followed based on plans (Annual, quarterly and daily plan) the 7 MHT team covered 403 villages of related catchment area in Bamyan districts. The Health service are conducted by 7 MHT team



included (OPD service, antenatal and postnatal care, immunization service, health education, TB case detection and referring) for all pregnant/ lactation women and children under five.

Established a strong reporting system such as monthly consumption , monthly activity , health education, and vaccination reports, HMIS data record, database, supervision, review monthly workshop, statistic and technical report and main of of this activity was compilation of HMIS data record to project. Monthly and quarterly review workshop was regular done in MOVE training hall in Bamyan province. Review workshop focuses was analysis of

data and knowledge of staff about weak and strongly point of the activity that how they can take the action to bring improve to project activities.



Conducted regular coordination meeting with DoPH, UNICEF, BPHS , provincial governor, seven district governor and security unit, during each of the meeting had been shared related point about project



and types of the activity by MHT like regular health service to all remote



community especially for mother and children.

logistic department regularly provided all needed materials and supply for each MHT team and office. The procedure of RMNCH purchasing was conduct through purchasing committee and based on logistic plan, the pharmaceuticals was provided by UNICEF on quarterly bases. A stock of pharmacy was managed to supply the MHTs on monthly bases.

Description of project indicator monthly achievements Vs targets:

Key Indicator	Annual Target	Annual Performance	Achievements %
Total OPD	105384	121180	115%
# of First Antenatal service	1404	1913	136%
# of First Postnatal service	684	833	121%
# of patients/client received health education	42000	52507	125%
# of mother referred with major complication	252	321	127%
# of children screened	12756	13734	107%
Immunization of Penta3	2556	2101	82%
Immunization of TT+ for PW women	2424	1902	78%

Monitoring /supervision activities:

Supportive supervision have been done per month of 7 MHT team according to project plan. During each supervision period we have checked all document of each MHT in filling system, cross checked some data in

register based on actual patient to the village. Then analyzed the data and provided action plan to MHT team for support and improving to their monthly performances. Conducted five round of joint monitoring as per plan with project stakeholder like UNICEF, DoPH, BPHS and



provincial council from type of MHT and project activity in the remote area of



different district at Bamyan.

Conducted two round joint monitoring with Yakawlang and Panjab districts governor from MHT province activity in the field and after of each monitoring the governor did thankful of MOVE organization management team and project staff for good coverage and health service to vulnerability community special to community that they are living to high risk and mountainous area.



P4P activity was planned by RMNCH project to each project indicator. RMNCH staff regular appraised by P4P criteria and collecting their score based on monthly project performance. So this activity has been gave good motivation to each staff which they try to have more coverage during the month in the field.

DAIKONDI MALARIA PREVENTION PROJECT

PROJECT NAME AND DONOR: MALARIA PREVENTION PROJECT-UNDP/

DURATION: From 01 January 2019 to - 31 December 2019

LOCATION AND POPULATION: Daikundi Province (whole population)

PROJECT GOAL and OBJECTIVES:

The project aims is to achieve global objective of Malaria prevention program, to reduce avoidable mortality and morbidity caused by burden of Malaria among the population living in Daikundi province, increase capacity of community Health workers, eliminate the Malaria parasitaemia and stop further transmission and Limit the Malaria emergence and spread of drug resistance.

PROJECT ACTIVITIES AND ACHIEVEMENTS:

The project covered the population through priority target groups of 77 health facilities, 11 laboratory included of 18 lab technicians, 24 CHSs and 737 CHWs.

Malaria case management consisting of early diagnosis and prompt effective treatment as a vital component of malaria control and elimination strategies. MOVE welfare organization team implement the project objectives in a collaborative manner with PPHD, Malaria teams and community influence holders. It is recommended by MoPH and donor to confirm all cases of suspected malaria (with microscopy or Rapid Diagnostic Test, RDT) and then promptly treat according to the National Standard Treatment Guideline (NSTG). To ensure confirmation at all levels RDTs are introduced/trained to HPs and awareness of

the general population increased regarding the prompt recognition, appropriate care-seeking behavior and effective prevention of malaria through community-level and mass media support.

Based on project plan MOVE succeed to achieve over all project targets. All the steps have been followed based on agreed project contract with consideration of MOVE services and procurement policies and procedure. Desk review of documented activities and results across provincial health directorate malaria department and SEHATMANDI and Daikundi PPHD was conducted. The review was followed by key informant interviews with projects staff, PPHDs Malaria department and other implementing partners (NGOs). Malaria project team held regular meetings with PPHD staff to coordinate the planned malaria activities (MLIS reports, trainings for the Lab technician and community awareness). The



reports were collected from all Daikundi HF's & HPs and submitted to donor and MoPH/NMLCP based on their requirements.

During the 2019 year the below activities are successfully conducted and managed: Two batch of refresher trainings for health facilities lab technician were conducted,

totally 18 lab technician from 11 health facilities were trained. Supply of Malaria commodity to 77 HFs had been done (Primaquine, AL and Reporting formats and supplied all HFs to RDT that not have laboratory facilities) Supply of malaria commodity to 373 Health post were successfully done (timer, thermometer, RDT, gloves and needed reporting formats) Regular supervisory and Joint monitoring visits were conducted. Regular monthly and quarterly reporting system followed.

Malaria Community awareness: community awareness, meetings conducted in Daikundi province by MOVE malaria team and Daikundi PPHD totally 243 people that included of community leaders, health Shuras, Molahs (religious leaders), Women shuras, school teachers and students were attend in this sessions.

Indicator	Target	Result	%
			Achievement
CM-1a(M): Number of suspected malaria cases that receive a parasitological test at public sector health facilities (RDTs and Microscopy)	7127	2426	57.60%
		Microscopy	
		1680 RDT	
CM-2a(M): Number of confirmed malaria cases that received first-line antimalarial treatment at public sector health facilities	309	240	77.60%
CM-1b(M): Number of suspected malaria cases that receive a parasitological test in the community	2647	3609	136%
CM-2b(M): Number of confirmed malaria cases that received first-line antimalarial treatment in the community	298	131	44%
CM-other 1: Proportion of confirmed malaria cases among total reported malaria cases (presumed and confirmed)	≥95	Total confirmed cases 1/ Total confirmed+ clinical x100 (9/9 X 100)	100%
Number of Health Facility lab technicians trained on microscopy and RDTs	18	18	100
Number of participants attended community awareness event (230 participants per province)	230	243	105%
Number of supervisory visit conducted (Kabul to province and Province to district level)	48	48	100%

DAIKONDI TSFP PROJECT

PROJECT NAME AND DONOR: TARGETED

SUPPLEMENTARY FEEDING PROJECT-WFP

DURATION: From 01 January 2019 to - 31 December 2019

LOCATION AND POPULATION: Daikondi Provinces (whole population)

PROJECT GOAL and OBJECTIVES:

The overall goal of the project is to reduced incidence of mortality and morbidity related to acute malnutrition in children aged 6 to 59 months and pregnant and lactating women by improving their nutritional status through access to targeted supplementary feeding program. To treat moderate acute malnutrition (MAM) and prevent from becoming severely acutely malnourished. To increase awareness and practice amongst caregivers, communities and women of reproductive age in optimal infant and young child feeding and care, and maternal nutrition.

PROJECT ACTIVITIES and ACHEIVMENTS:

The TSFP program is functional in 26 HF's of Daikondi province. Direct beneficiaries of the program was 5,861 PLW and 16,578 malnourished children. During the year 2019

(January–December) 9,524 MAM children and 5,162 PLWs admitted in the program. Based on the standard treatment protocol, for treatment of malnutrition each malnourished pregnant or lactating women should receive 7.5 kg super cereal per month (250 gr/day) and each under five MAM children should receive 30 sachet RUSF per month. During the year 2019 MOVE has distributed 85,599 Kg Super Cereal and 55,780.7 Kg RUSF to admitted children and PLWs through 26 exited OPD–MAM sites. As the outcome/result of the program, from 11,865 exited children, 10,522 (89%) were cured, 1,151 (10%) were defaulted, 1% were referred out and 1 % not cured. As the outcome/result of the program, from 6,887 exited pregnant and lactating women, 6,251 (91%) were cured, and 636 (9%) were defaulted. During year 2019 Daikundi TSFP project supervised 6 time by technical department of MOVE HQ office. Also base on project staff supervisory plan, each TSFP visited once per month by BPHS project technical staff and TSFP project team. According to the project work plan, TSFP project team conducted 3 days nutrition refresher training to 26 existed TSFP nurses/food distributors.



DAIKONDI CBNP PROJECT

PROJECT NAME AND DONOR: COMMUNITY BASED NUTRITION PROGRAM-UNICEF

DURATION: From 01 April 2019 to - May 2020

LOCATION AND POPULATION: Daikondi Province (whole population)

PROJECT GOAL and OBJECTIVES:

The project goal is to contribute for reduction of under-five and women mortality and morbidity due nutrition related problems, increase the communities' awareness on nutrition and positively change the behavior community, increase early case detection and prevention of malnutrition in community and HPs level and to strengthen the link between HPs and HF's and referral services. The direct beneficiaries of the project is, 15,440 community members, 772 CHWs, 95,363 under five children and 138,641 women/care givers.

PROJECT ACTIVITIES and ACHEIVMENTS:

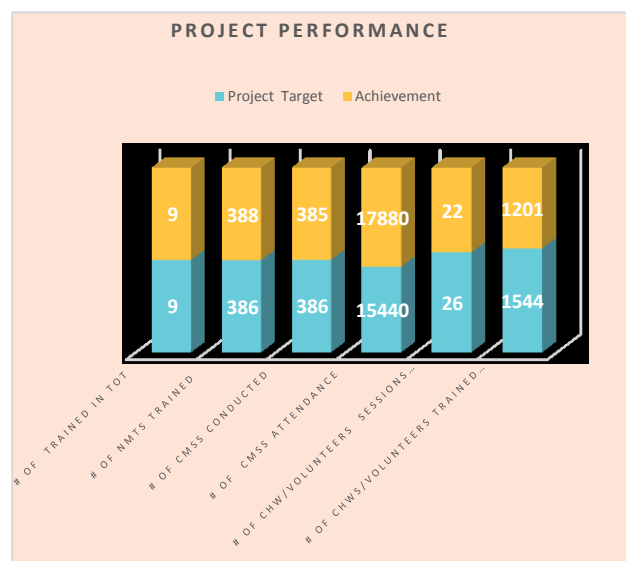
CBNP project has two phases, the first is capacity building and second is implementation of the program. In part of capacity building, 9 staff (3 from PPHD, 3



from Sehatmandi project and 3 from CBNP project) attended the 4 days TOT in central level. Then the project staff with close coordination of PPHD and CBHC team of Sehatmandi selected one NMT member for each HPs and including 26 CHSs, 388 NMT (Nutrition Mobilization Team) members trained in 3 days training. At the third step of the capacity building two days CMS



(Community Mobilization Session) conducted per HP and totally 385 CMSs were conducted at provincial level and 17,880 population trained during its sessions. Also 1201 CHWs/Volunteers attended for two days refresher training.



BADGHIS & NIMROZ CITIZEN CHARTER NATIONAL AFGHANISTAN PROGRAM (CCNAP)

PROJECT NAME AND DONOR: CITIZEN CHARTER
AFGHANISTAN PROGRAM –MRRD

DURATION: From Feb 2019 to - 31 December
2019

LOCATION AND POPULATION: BADGHIS &
NIMROZ, Provinces

PROJECT GOAL and OBJECTIVES:

Citizens' Charter is the national program in Afghanistan which started in 2017 and is a promise of partnership between the state and communities. MOVE is one of the facilitating partner in Badghis and Nimroz provinces. Project is seek to address key limitations to respond to financial constraints to national development



investments. To improve the delivery of core infrastructure and social services to participating communities through strengthened Community Development Councils (CDCs). The Citizens' Charter will set a threshold of core infrastructure and services that the government will provide to all accessible communities over

the next ten years. It gives a voice to vulnerable groups such as women, returnees.

PROJECT ACTIVITIES AND ACHIEVEMENTS:

MOVE started as facilitating partnership with CCNPP/MRRD through JV with ACTED and CHA in Badghis and Nimroz provinces in May 2017 for three years and successfully 2.5 year completed with highly satisfactory achievements as per plan. The project core performance indicators for the year 2019 were successfully achieved.

All the covered 365 CDC identified under 76 cluster CDCs, all the clusters elected with formation of sub-committees and CDPs



prepared, and 8 CDCs establishment 'election, formation of sub-committee, bank account penning and CDP preparation' with all the tools and its forms submitted to PMU, also under this program MOVE as a facilitating partner build the capacity of 43,757 person's (21,390 female, 22,367 male) through providing different training such as project management, disaster risk mitigation management and gender and safety exercise and transferring knowledge-based training such as accountant, procurement, Environmental

and social safeguard training and Grievance Handling Mechanism for new covered 2026 household; and 79 SOs “56 from MOVE and 23 from PMU/RRD” received project management, disaster risk mitigation management and gender trainings, 39 SOs received the first TOT which they hired newly for additional 171 CDCs of Jawand and 42 SOs received refresher and reflection training.

Main achievements base on the capacity of the community



- Women are active and represented in CDC's more than ever and are representing women's interests;
- Establishment of Cluster CDC have taken responsibility to follow all the cluster issue with DCCMC;
- Knowledge transferring to CDC through class and practically process based trainings as per OM of program;
- The PRA tools exercise has changed community members' behaviour regarding unnecessary expenditures;
- Several CDCs 'which called champion CDC' have independently taken responsibility and have mobilized internal resources to implement their development priorities;

- Supporting the vulnerable groups and extremely poor households through Grain Banks approach, has instilled more social awareness in wealthy community members;
- Knowledge transferring through cross visit of CDCs from Champion CDCs in the same district;
- Improvement of education and health sector through score card and community participatory monitoring.

Core-Indicator	Target	2019 Acheivement
Project Management Maintenance/ Disaster Risk Mitigation Management/ Gender and Safety Exercise trainings	364	99.7%
Score Card 'second and third round'	364	99.7%
Community Participatory Monitoring (CPM) and Social Audit second and third round	356	97.6%
Community Mobilization, elections, bank account opening and CDP	8	89%
Cross visit of CDCs from champion CDC in the same district	364	99.7%
Facilitation CDC linkage with DCCMC at district level 'first, second and third round' with two round on general meeting with DCCMC.	76	100%
Identification, election, bank accountant opening, CDP and sub-committee formation of Clusters/ sub-committee formation	2	100%
Institutional Maturity Index (IMI), Community Participatory Monitoring (CPM) and Score Card first round.	8	100%
CDCs Grain Bank Establishment	8	100%

Training Capacity Building:

Providing practical and theory training to CDCs such as Grievance Handling Mechanism, Project Management, Disaster Risk Mitigation Management and Gender trainings which build the capacity of the community for good leadership and projects implementation. Cluster CDCs linkages with District Citizens' Charter Management Committees (DCCMC) based on the plan three round which was the hard work in current situation of Badghis. As per target milestone which is fixed in the contract 46 percent of the payment of overall contract installment achieved and verified by PMU.

Grain Bank formation in new established



CDCs and regular campaign and close follow up with all the CDCs which is very important component of the program which they supporting regularly poor, IDPs and vulnerable Groups on community level. and during the years 3,257 HH in Badghis and 475 HH in Nimroz province supported from grain bank.

As we worked at insecure and remote provinces but we hope to keep fill all the position based on the contract ratio and the vacant position recruited based on the need of the program. Based on the good coordination and close follow up with

community in the targeted area our staff doesn't have any security problem but in general have the effect on speed of the steps of the program. Winterization of provincial and districts sub-office is done on time based on instruction.

Supervision and Monitoring:

Supportive supervision of the provincial and district teams of 'Badghis and Nimroz' conducted to focus on transparency and accuracy of the activities under the CCNPP. The field staff and many villages in the Badghis and Nimroz province received positive information and feedback on the benefits of the CCNPP and for better implementation at community level. In addition, the program facilitate according to the CCNPP operation manual in very



remote area of Jawand, Maqar and Charborjack districts but still the CDCs as per security and culture issues have problems with participation of female in



the program. formation of the grain bank at CDCs have good impact for supporting of poor and vulnerable groups but less people participated because most of the people of Badghis and Nimroz is not in good economic condition, furthermore, during this period employees performance is evaluated good and action plan quality improvement developed and implemented according the targeted plan of 2019.

Shand Masum Khan CDC Success story (Code # 22-2204-M0044) :

Located in Chakhansoor District of Nimroz province, its number of households is 26. The village located 40 kilometers northwest from the district center. Most of the community residence are busy with livestock activities. When CCNPP program introduced at the community by social organizers, on that time the women didn't have interest to participate in this program activities



especially at the PRA tools activities. One of the interested and important point for the villagers was CDC member election. When the social organizers conducted CDC election program at 23 November 2017 in the mentioned village, 45 years old women, Mrs. Shah Pari was elected as secretary of the CDC by the people. After election as a CDC secretary Mrs. Shah Pari started her

activities as an active member and influenced and encourage the women at the village to participate at all the CDC meetings. She and the CDC vice chairmen held regular CDC meetings among the ladies at the village. All the meetings minutes were recorded in the CDC Meeting Book. Mrs. Shah Pari always share the ladies CDC members' idea with men. She paved a environment that the training for man and women should conduct jointly in one room and the men and women of the village are encouraged to attend the trainings. She succeed for this aim, All the trainings at the village were conducted successfully with good impacts in a previously restricted community. Shah Pari continues to be strongly committed to assist the most vulnerable in her community. She has been supporting the creation of the CDC Vulnerable sub-committee and the implementation of a community wide campaign to raise funds and food for the community's Grain Bank.

MOVE OPERATION DEPARTMENT:

Operation Activities and achievements:

The 2019 annual plan for the operation implemented successfully. Operation department did the best efforts to accomplish the plan with full satisfaction for all projects. All necessary steps have been performed in the area of project supply, such as procurement, stocking and releasing, transport, security action, record keeping with complete transparency and proper documentation, control and monitoring of consumptions, assets and inventories. Providing safe and proper work environment with office required equipments and warehouse for maintaining and stocking the medical and nonmedical items receiving and releasing for the projects.

Procurement: HQ procurement team made their best efforts in implementation of the procurement with effective methods for the supply of projects during the year. The procurement plan for the project supply have designed and implement on quarterly base and also for the winterization for six



months supply. The team made their best efforts through required bidding process (open...) to procure in the right time,

right place, with adequate quality to the projects. The quality and quantity of each supply delivery has been checked thoroughly by the technical team in MOVE warehouse during the supply delivery.

Transportation: Totally we had managed 76 vehicles for support of the projects, that 48 vehicles are rental and 28 are the project vehicles. The vehicles contracted with private companies and individuals or the owner of vehicles. The kind of vehicle has been arranged according to project requirement, such as Ambulance, truck, Corolla and 4 Runner. The vehicles have been used for program activities, field supervision, referral case from HFs (Ambulance) and supply of medical and non



medical items. Transportation for EPI outreach and CHW program has been arranged with motorbikes. We use rental and



official vehicle for ambulances and equipped according to ambulance utilization rules. With closed contact with UN and local flight and local transportation by road to provided effective travel management for the organization employee and supply from HQ to provinces.

Stock/Warehouse: Operation department have been arranged stockroom for the medical and logistic materials and maintained during the year. Professional logistics staff for better management of goods receive, release, safety and record



keep have been served there. Timely packing of hygiene kits, food parcels and other logistic items were made for each quarter/month for the supply of MOVE projects. Proper stock control system and stock cards were used to manage appropriate stock reporting system.



Project supply: According the annual plan for the project supply, all medical, logistic consumable and non-consumable material supply for health facilities have been done timely. The medical and non-medical equipment have been purchased base on projects need (including Konexes , containers , motorbikes, medical equipment) for HFs have purchased. The provincial management of operational issues was managed by provincial logistic team. The HQ operation department follow all the project operational activities through a daily contacts and weekly/monthly updates reports and regular field supervision and monitoring system.

Winterization supply: To prevent from any shortage of project supply, the winterization supply is planned and designed for six months that is purchased according to projects requirements and



organization rule through HQ operation department for all MOVE project that is



contain drug and logistic consumable and non consumable materials and the huge part



of supply is drug and heating material for heaters for all HF's.

Renovation: Renovation of health facilities and maintenance of infrastructure was the main activity of operation department for all projects. Despite of budget constraints for



renovation, we were able to perform several construction and renovation for the projects. Summaries are painting the HF's



building, renovation of canalization, power supply, repairing Medical and non

medical equipment and other maintenance



work. Update of projects inventories and for the organization properties was successfully done for each project on quarterly base. The damaged items or missing items discovered during the inventory and reported. We had 6 net provider contracts in different provinces. Also used the other means of communication such as meetings, mobile, email...

Closing of projects: Base on projects contract with DONORS, some project such as CME/CHNE Daikondi, and GBV project in Bghlan and Kundoz provinces have been closed normally and the project asset have submitted to relevant organs and or saved in MOVE stock up to the next directions.

Coordination: Operation Director had the mission for the support of MOVE projects to provinces. The main aim of the mission was projects support and strengthen the coordination with local authorities.



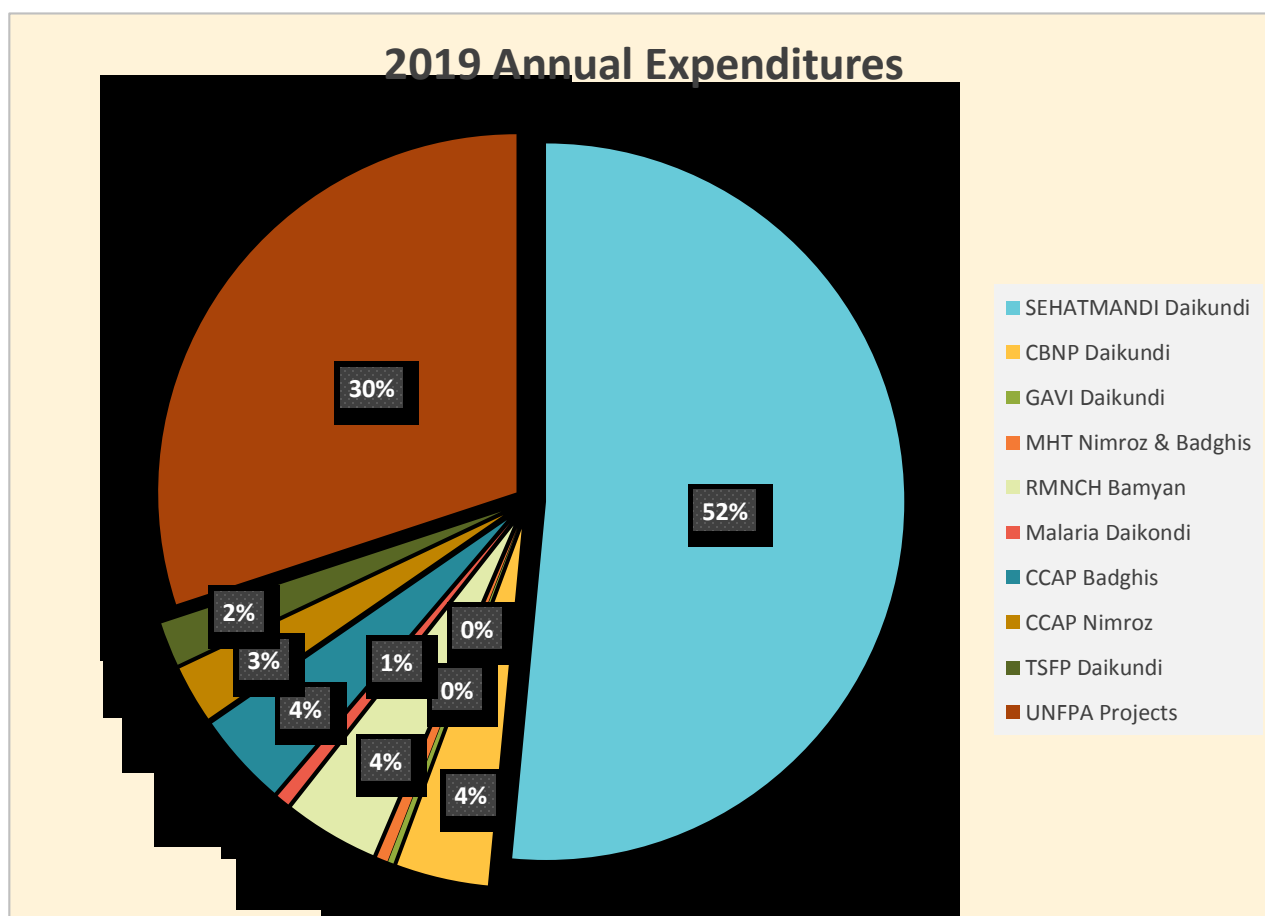
FINANCE DEPARTMENT ACTIVITIES:

The objective of the finance department is to manage the organization budget in accordance with national and international norm, facilitate the funding flow and ensure accountability and transparency. The HQ finance department is the Centre for leading and managing of all financial issues. The provincial finance departments manage the project's financial activities strengthened and followed with HQ coordination.

The fund flow of the project, expenditures, recording, reporting managed based on MOVE finance policy and procedure. Monitoring

and supervision of projects have been done by MOVE HQ finance team. MOVE's organizational Annual Audit conducted by an international auditing company, the report and result were satisfactory with the impression of unqualified performances. Staff salaries managed through bank accounts system. Revision of the policies was done. Overall, taxation and annual tax report (Ezahrnama) as per Afghanistan Tax Law controlled, managed and delivered to income, and withholding tax department for the year 2019.

Quarterly projects financial reports, EMIS report, and required database are submitted timely to MoPH and different donors for all projects.



MOVE WELFARE ORGANIZATION

DONORS-2019

MOPH-Afghanistan

MRRD-Afghanistan

World Bank

UNFPA

UNICEF

UNDP

WHO

WFP

GAVI

2019

Annual Report



MOVE ADDRESSES:

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Badghis-Afghanistan
Mobile #: 0777781310

DAIKUNDI:

Nili Center
Beside Kabul Bank
Daikondi- Afghanistan
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BAMYAN :

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