Delivering Quality Healthcare and Transforming Lives Across Our Communities







Annual Report 2025

OPHCD

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Director's Message:

As we reflect on 2025, I am proud of the resilience, dedication, and professionalism demonstrated by the team of the Organization for Promotion of Health & Community Development (OPHCD) across Afghanistan.

This year was marked by both immense challenges and meaningful achievements. Operating in a complex humanitarian and economic environment, our staff remained committed to ensuring that vulnerable women, children, and underserved communities continued to access life-saving health and nutrition services. Through strong partnerships with UNICEF, World Health Organization, World Food Program, the World Bank, and the Global Polio Eradication Initiative, OPHCD successfully implemented integrated programs across 22 provinces, reaching more than 3.9 million beneficiaries.

Beyond numbers, what defines 2025 is the strengthening of systems. We invested in building the capacity of frontline health workers, enhancing cold chain infrastructure, improving supply chain monitoring, expanding community-based nutrition platforms, and reinforcing accountability mechanisms. We prioritized female workforce participation and community engagement to ensure inclusive, culturally sensitive service delivery.

Our approach goes beyond service provision. We believe in strengthening local systems, empowering communities, and building long-term resilience. Whether through Primary Healthcare support, management of BPHS and EPHS services in Khost Province, expansion of Targeted Supplementary Feeding Programs, or scaling up routine immunization, OPHCD remains focused on sustainable impact.

I extend my deepest appreciation to our donors, government counterparts, community leaders, and especially our dedicated staff who work tirelessly under challenging conditions. Their commitment continues to inspire confidence and progress.

As we move into 2026, OPHCD remains steadfast in its mission to strengthen health systems, reduce malnutrition, expand access to essential services, and contribute to resilient communities across Afghanistan.

Together, we will continue building healthier futures.

Mohammad Aziz Paewastoon
Executive Director
Organization for Promotion of Health & Community Development (OPHCD)

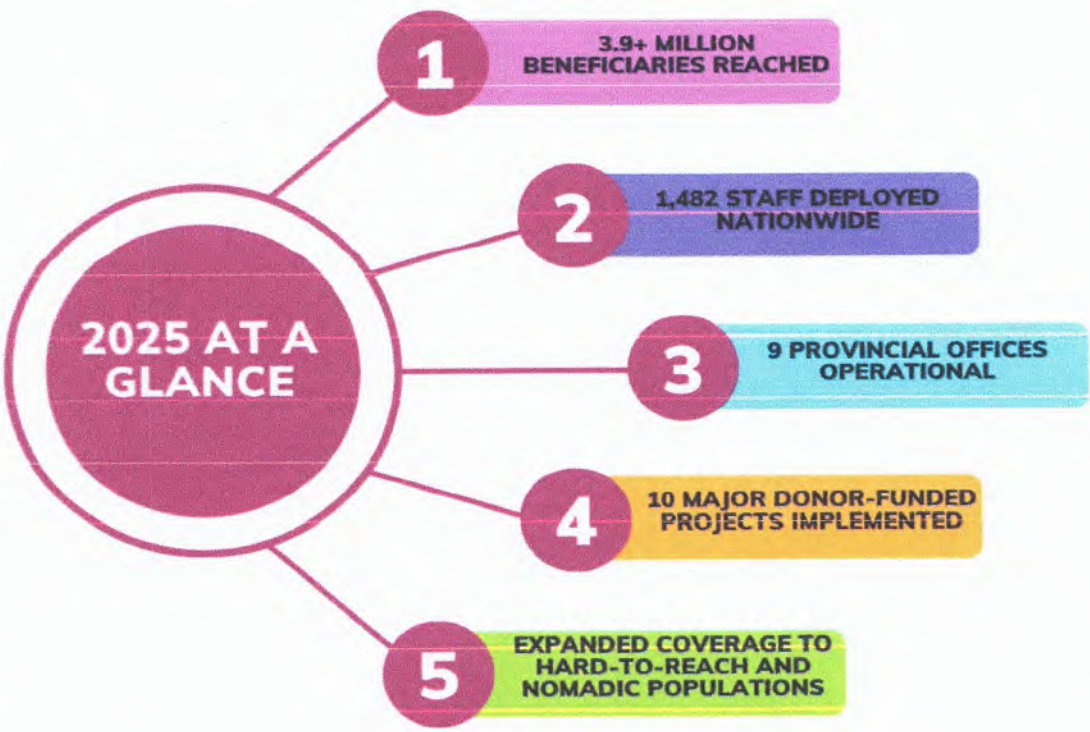
Executive Summary

The Organization for Promotion of Health & Community Development (OPHCD) is a national, non-governmental organization committed to improving access to essential services for vulnerable communities across Afghanistan.

Registered with the Ministry of Public Health and Ministry of Economy, OPHCD operates independently, guided by humanitarian principles of neutrality, accountability, transparency, and inclusion.

The year 2025 represented a year of consolidation, expansion, and system strengthening for OPHCD. Through strategic collaboration with **UNICEF**, **World Health Organization (WHO)**, **World Food Program (WFP)**, and the **Global Polio Eradication Initiative (GPEI) through ACF**, OPHCD implemented integrated health, nutrition, Education and WASH programs across 22 provinces of Afghanistan.

Despite complex humanitarian conditions, OPHCD maintained uninterrupted delivery of life-saving services by strengthening frontline health systems, expanding community-based programming, and investing in institutional resilience.



OPHCD's approach combined service delivery, system strengthening, capacity building, and community ownership, ensuring sustainable and equitable impact.

Key strategic Areas of Operation & 2025 Achievements

In 2025, OPHCD reinforced its position as a trusted national implementing partner delivering high-impact, innovative, accountable, and inclusive programming. The organization has successfully strived to contribute significantly to strengthening Afghanistan's health and nutrition systems through strategic partnerships and

community-centered approaches. OPHCD remains committed to building resilient and empowered communities across Afghanistan with continued collaboration and cooperation with the country's healthcare systems. OPHCDs' key strategic areas are being as follow in the year 2025:



I. HEALTH SYSTEM STRENGTHENING & PRIMARY HEALTHCARE

Strategic Objective: To strengthen equitable access to quality and integrated primary healthcare services, for all age groups including women, children, remote, nomadic and underserved communities.

Strategic Approach

OPHCD's health programming in 2025 was built around five core strategies:

1. **Integrated Service Delivery Model:** Integration reduced missed opportunities and improved efficiency at facility and community levels. OPHCD provided a comprehensive package of healthcare through health facilities and camps including:

- MNCH services
- Routine immunization
- IMNCI

- Nutrition screening and treatment
- Mental health support
- Referral and emergency care

2. **Capacity Building & Continuous Professional Development:** The approach focused on:

- Regular training on IMNCI, MH GAP, IPC, IMAM, HMIS
- On-the-job mentorship
- Supportive supervision visits
- Performance-based monitoring

3. **Strengthening Cold Chain & Infrastructure**

- Solar-powered refrigerators installed
- Equipment upgrades in remote facilities
- Preventive maintenance systems introduced

4. **Community Engagement & Accountability**

- Activation of Health Shuras
- Community Health Volunteers (CHVs) mobilized
- Feedback and complaint mechanisms strengthened

5. **Data-Driven Decision Making**

- Improved HMIS reporting
- Monthly data review meetings
- Real-time performance tracking

II. NUTRITION & MALNUTRITION MANAGEMENT

Strategic Objective: To reduce acute and chronic malnutrition among children under five, pregnant and lactating women, and adolescent girls through prevention, early detection, and treatment provision services.

Strategic Approach

1. **Community-Based Prevention Model**

- Monthly growth monitoring
- MUAC screening at household level
- MNP distribution
- IFA supplementation for adolescent girls

2. **Continuum of Care for SAM & MAM**

- Early identification and admission in OPD SAM/OPD MAM
- Timely referral to IPD SAM

- Follow-up home visits
- Relapse prevention

3. Social and Behavior Change Communication (SBCC)

- MIYCN counseling sessions
- Community dialogues
- Male engagement initiatives
- Nutrition education through CHWs, CHVs, GMG & GFGs

4. Supply Chain Strengthening

- Coordination with partners/UNICEF and WFP for RUTF, RUSF, LNS and Super cereal pipeline
- Supply of RUTF, RUSF, LNS and Super cereal to HFs distribution to eligible malnourished children and PLWs
- Buffer stock planning
- Improved storage and tracking systems

5. Gender-Sensitive Programming

- Female nutrition workforce expansion
- Women-friendly service hours
- Privacy and dignity ensured in treatment sites

III. WASH PROGRAMMING

Strategic Objective: To improve community health outcomes by enhancing access to safe water, sanitation facilities, and hygiene practices.

Strategic Approach: OPHCD being increasingly engaged in WASH activities and is willingly looking forward to prove its abilities in undertaking standalone and integrated WASH projects/interventions at the communities. The organization has focused on below strategies in the year 2025:

1. Integration of WASH within health and nutrition facilities
2. Hygiene promotion sessions alongside MIYCN counseling
3. Safe water system rehabilitation in the HFs
4. Distribution of hygiene kits/health promotional items through the HFs for under 5 children and PLWs visiting HFs for ANC, PNC and other MNCH services
5. IPC (Infection Prevention & Control) strengthening in facilities

Integrated WASH interventions directly contributed to reduced infection rates and improved nutrition recovery outcomes in projects implementation areas.

IV. EDUCATION & COMMUNITY DEVELOPMENT

Strategic Objective: To contribute in promoting inclusive, safe, and equitable education opportunities and strengthen community resilience.

Strategic Approach

1. Community-based education initiatives
2. School feeding coordination (where applicable)
3. Parent-teacher engagement platforms
4. Education-linked nutrition and hygiene promotion
5. Focus on girls' education and safe learning environments

V. LIVELIHOODS & FOOD SECURITY

Strategic Objective: To enhance household resilience and reduce vulnerability through sustainable livelihood interventions.

Strategic Approach

1. Linking vulnerable households to food assistance programs
2. Targeted support to nomadic and returnee populations
3. Strengthening community-based resilience mechanisms
4. Coordination with food security clusters

VI. EMERGENCY RESPONSE & DISASTER RISK REDUCTION

Strategic Objective: To contribute in provision of timely humanitarian assistance while strengthening preparedness systems.

Strategic Approach

1. Rapid needs assessments
2. Mobile health and nutrition responses
3. Pre-positioning of supplies
4. Staff surge capacity mechanisms
5. Disaster preparedness training

OPHCD maintained operational readiness to respond to shocks, displacement, and seasonal emergencies. This was particularly evident in khost province where the organization is implementing the basic package of services (BPHS) for the entire province population under the HER project funded by the world bank through UNICEF financing scheme.

VII. Governance, Accountability & Compliance

OPHCD adheres to strong governance frameworks including:

- Have General Assembly meeting annually,
- Have Board of Directors meeting on each 4 months frequency,

- Have Senior Management Team managing day-to-day activities and implementation of the projects.
- Have more than 38 approved and endorsed Operation policies and guidelines governing OPHCD operation, these policies include but not limited to: Gender & Inclusion Policy

a) Accountability to Affected Population policy,
b) PSEA Policy
c) Child Safeguarding Policy
d) Environmental & Social Safeguards
e) Anti-Fraud & Anti-Corruption Policy
f) Data Protection & Confidentiality Policy
g) Financial Management policy
h) Human Resource Management policy
i) Procurement and Logistic Policy
j) Program Development Planning Policy
k) Gender mainstreaming policy
l) OPHCD Anti-terrorism and security Policy
m) OPHCD Administration Policy

OPHCD has its own internal audits unit, MEAL department and monitoring systems, and continuous donor compliance reviews to ensure financial integrity and operational transparency.

Organizational Strength & Institutional Capacity

- 1,482 skilled staff
- Strong provincial presence in 22 provinces of the country
- Experienced grant and compliance team
- Robust M&E framework and relevant strategies
- Digital reporting systems
- Established partnerships with UN agencies and government counterparts

Overview of Major Projects Implemented in 2025

1. **Khost BPHS & EPHS under WB funded HER AF2 project**

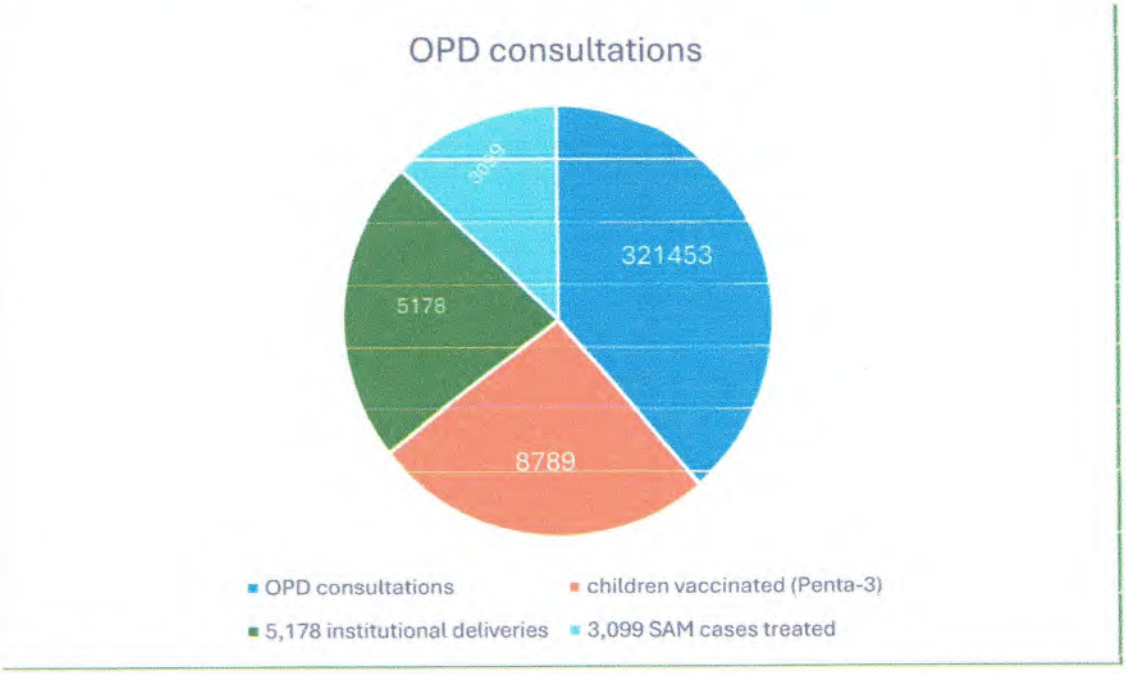
A. Project Overview:

BPHS/EPHS programs have delivered essential health and nutrition services to hundreds of thousands, improving maternal, child, and adolescent health across target provinces. Through skilled staff, effective referrals, and extensive community engagement, the programs strengthened access, awareness, and service quality. This approach demonstrates a sustainable and scalable model for equitable healthcare in challenging contexts

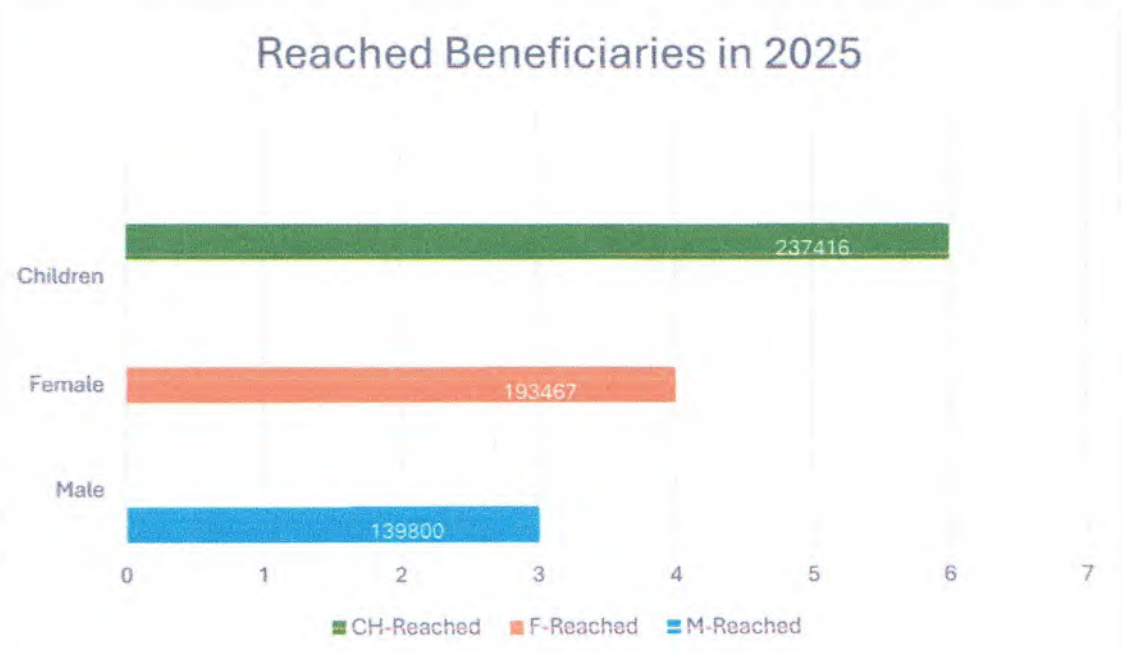
Total population as target beneficiaries of the project (RFP Annex D)

Boys	Girls	Men	Women	Total
23416	221451	193800	193467	846134

children U1	Children U5	PLWs	CBA Women	
40614	152304	67691	173457	434066



Reached Beneficiaries in 2025:



B. Project Indicators:

S#	Indicator	Achievement
1	No. of Major surgeries conducted	476
2	No. of C-section performed	122
3	No. of Couple Years of Protection at HFs	4804
4	No. of Nutrition Growth Monitoring and Promotion and IYCF counselling among all children	37602
5	No. of Nutrition Growth Monitoring and Promotion and IYCF counselling among FEMALE children	4093
6	No. of Antenatal Care Visits	22600
7	No. of Postnatal Care Visits	12724
8	No. of TB +ve cases treated	251
9	No. OPD consultations conducted (New Cases)	321453
10	No. of OPD consultations conducted (New Cases) <5 years of age MALE	37415
11	No. of OPD consultations conducted (New Cases) <5 years of age FEMALE	35085
12	No. of OPD consultations conducted (New Cases) <5 years of age	72500
13	No. of institutional deliveries	5178
14	No. of under 1-year MALE children vaccinated with penta-3	4505
15	No. of under 1-year FEMALE children vaccinated with penta-3	4284
16	Copy of No. of under 1-year children vaccinated with penta-3	8789
17	No. of TT2+ for women of reproductive age	21301

18	No. of under-five children's morbidities (HMIS-MIAR-A1-morbidities)	107049
19	No. of Referrals	3776
20	No. of normal deliveries referred by CHWs	585
21	No. of patients with mental health issues	11289
22	No. of children aged <5 years old receiving treatment for MAM	8182
23	No. of children aged <5 years old receiving treatment for SAM	3099
24	No. of pregnant and lactating women receiving MAM treatment	3435
25	No. of children under 5 years with SAM who are admitted for treatment and discharged cured	1551
26	No. of children under 5 with acute diarrhea who received Zinc	629
27	No. of children under 5 with acute diarrhea who received ORS	622

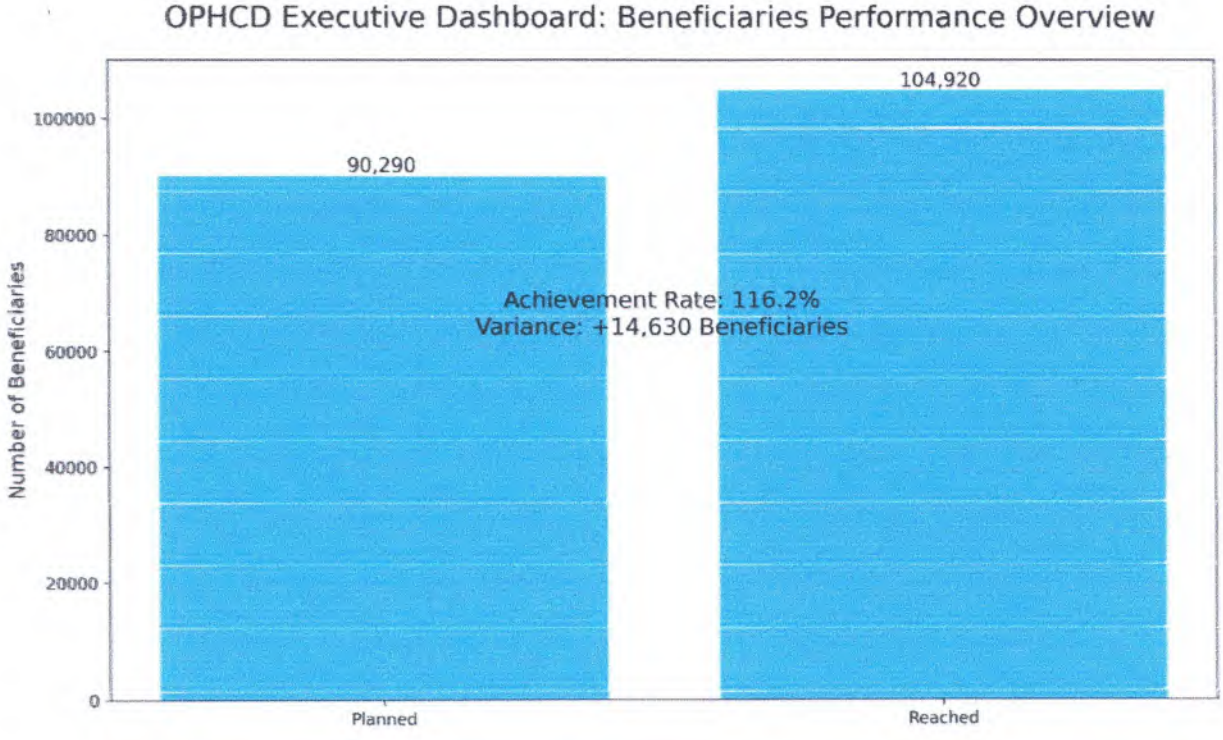


Project Health team is serving patients at Khost Provincial Hospital, providing timely and quality healthcare with dedication and care to improve community health.

2- Health Camps -Kandahar:

The intervention exceeded planned targets through effective field deployment, system strengthening, and enhanced coordination, contributing to improved service delivery and health outcomes.

- **Planned:** 90,290 beneficiaries
- **Reached:** 104,920 beneficiaries (**116% achievement**)



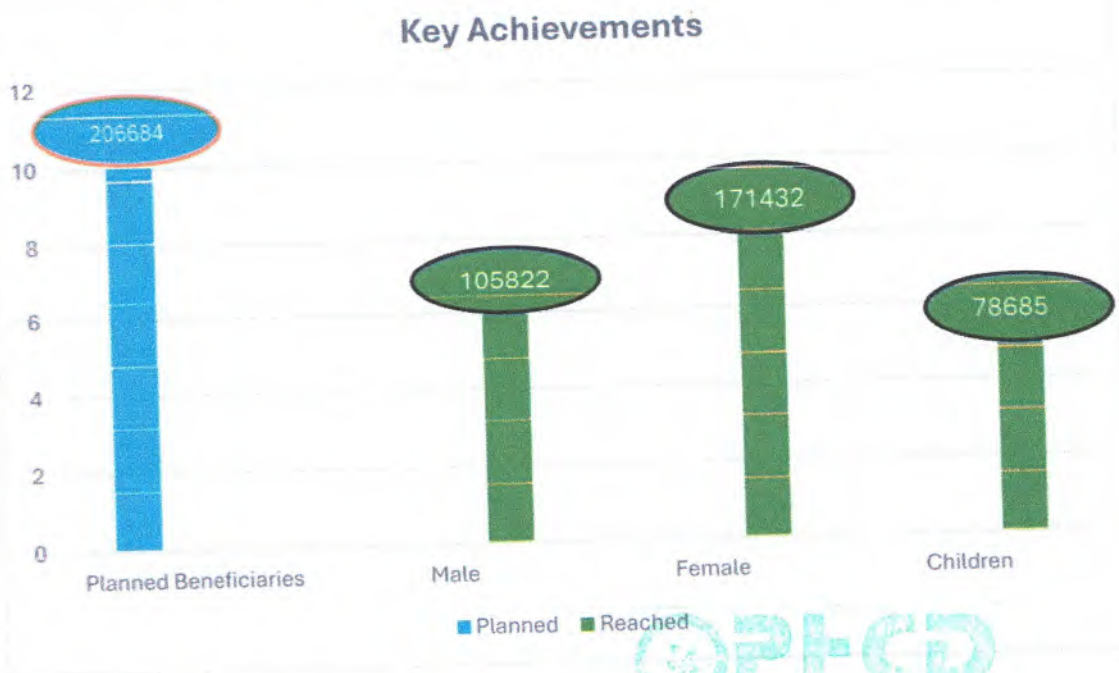


Health Camps project is providing essential vaccination services in Naqlin, Kandahar, ensuring children and communities receive timely immunization for better health

3. Strengthening Routine Immunization (SRI) - Helmand & Uruzgan (GPEI):



Under the Strengthening Routine Immunization (SRI) initiative in Helmand and Uruzgan provinces, OPHCD successfully surpassed its planned targets, demonstrating strong field performance and effective program management. Out of 206,684 planned beneficiaries, the project successfully reached 277,254 individuals, achieving approximately 134% of the target. This significant overachievement reflects improved outreach strategies, strengthened coordination with health facilities, and enhanced community mobilization efforts. The intervention was implemented through the dedicated efforts of 199 trained staff, ensuring quality service delivery, expanded immunization coverage, and strengthened routine vaccination systems across targeted districts. This achievement contributes directly to improved child health outcomes and supports national immunization goals under the GPEI framework.



Achievement Rate is 134% against the tagetes

3-Community-Based Nutrition Program - Uruzgan:

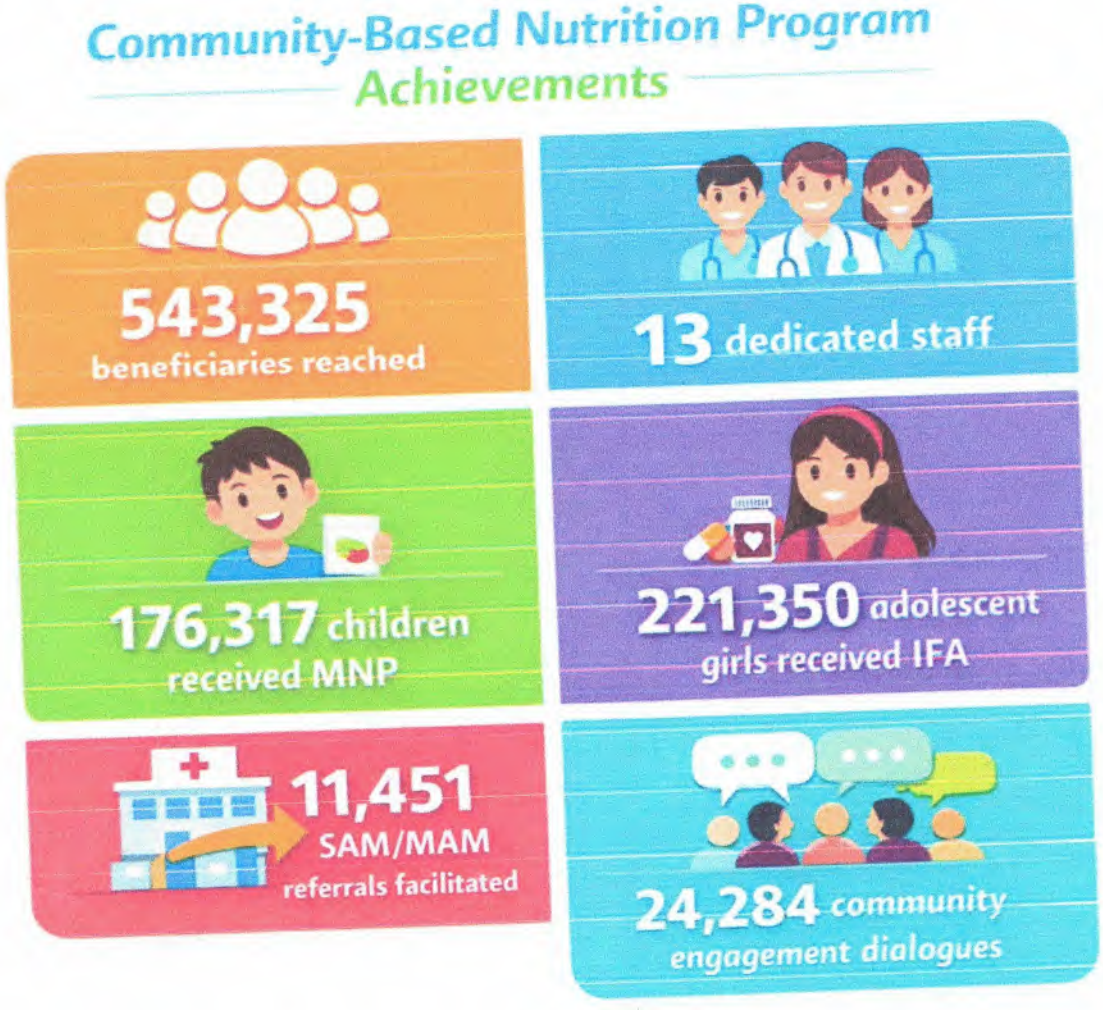
Malnutrition remains one of the most pressing public health challenges in Afghanistan, contributing significantly to preventable deaths, illness, and long-term disability, particularly among children under five, pregnant women, and lactating mothers. Years of conflict, poverty, food insecurity, and limited access to quality health services have exacerbated the nutritional vulnerabilities of Afghan communities, especially in rural and underserved areas. According to national health surveys, a substantial proportion of children suffer from stunting, wasting, and micronutrient deficiencies, which not only affect their physical growth but also impair cognitive development and overall well-being.

Planned Beneficiary Information:

1. **Planned Beneficiaries (2025):** 543325
2. **Reached Beneficiaries (2025):** 543325

Male: 57215 Female: 221350 Children: 176317

Key Achievements:



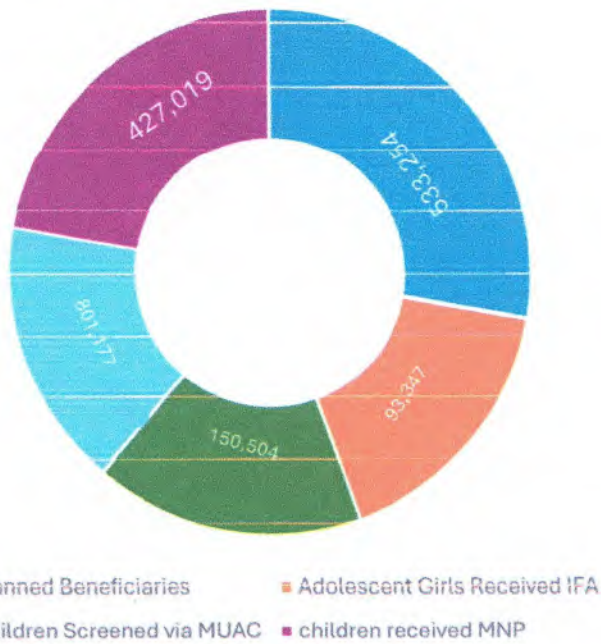
4-Community-Based Nutrition Initiatives (CBNI) in Faryab & Jawzjan

Project overview:

Malnutrition remains a serious public health concern in Faryab and Jawzjan, particularly among children under five and pregnant and lactating women, driven by food insecurity, poverty, and limited access to essential services. While Community-Based Nutrition Initiatives (CBNI) are in place, gaps in follow-up, referral systems, and community-level monitoring continue to hinder sustained recovery, especially in remote areas. This project strengthens CBNI follow-up services to ensure early identification, timely referrals, improved adherence to counseling, and stronger community support systems. Through these interventions, the project aims to achieve sustainable nutrition outcomes, targeting **533,254 planned beneficiaries**.

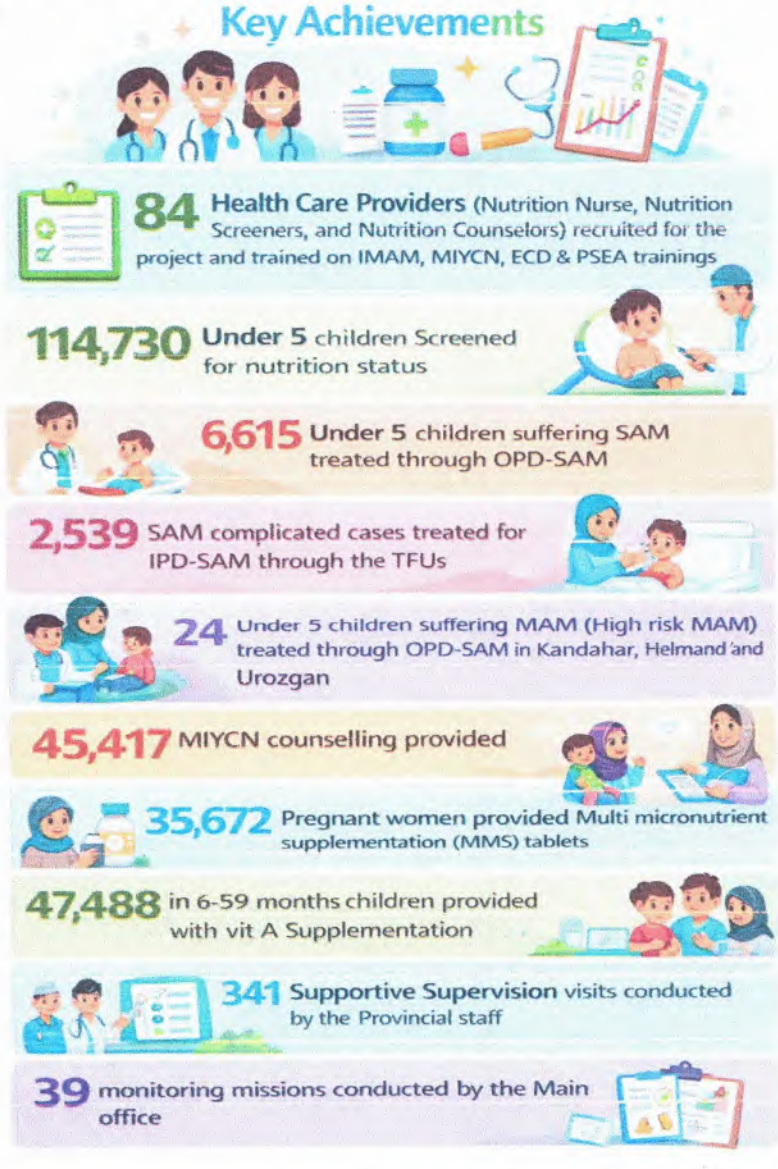


Key Achievements:



5- Life-Saving Nutrition Services – Southern Region:

Malnutrition continues to pose a serious public health challenge in the Southern Region of Afghanistan, disproportionately affecting children under five, pregnant women, and lactating mothers. Limited access to quality health services, food insecurity, and inadequate awareness of proper infant and young child feeding practices have left vulnerable populations at high risk of preventable illness, disability, and mortality. Existing health facilities are often insufficient to meet the needs of these communities, particularly in hard-to-reach areas served by functional health houses (FHHs) and non-HER health facilities. To address these gaps, this project focuses on the provision of life-saving nutrition services, targeting the most vulnerable groups to improve health outcomes and reduce the burden of malnutrition in the Southern Region.

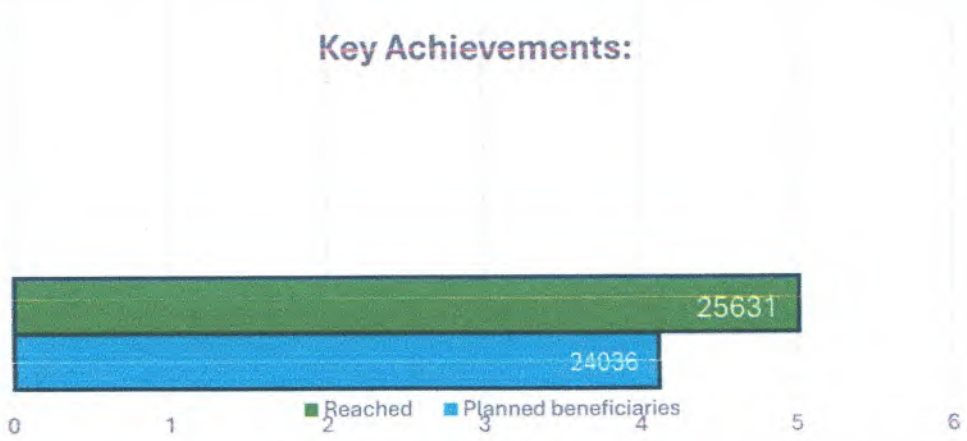


6-TSFP-in 15 Provinces (WFP/YYD):

Kabul, Kapisa, Baghlan, Ghazni, Nangarhar, Logar, Badghis, Khost, Paktia, Paktika, Laghman, Helmand, Takhar, Parwaan, Maidan Wardak provinces.

Provided supplementary feeding for MAM children and AM-PLW, strengthened referral systems, and improved monitoring compliance.

- Planned beneficiaries: 24,036
- Reached: 25,631

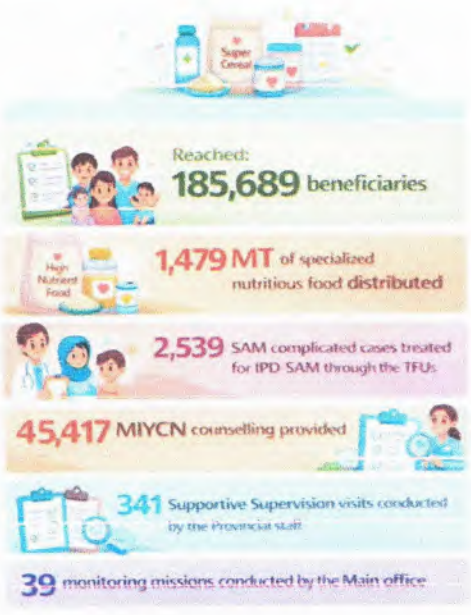


7-TSFP -Helmand & Uruzgan (WFP)

Project Background:

Acute malnutrition remains a critical public health concern, particularly affecting children aged 6-59 months and pregnant and lactating women, whose nutritional needs are heightened during periods of growth and caregiving. Moderate Acute Malnutrition (MAM) among young children and acute malnutrition among pregnant and lactating women (AM-PLW) significantly increase vulnerability to infections, poor growth, adverse pregnancy outcomes, and, if left unaddressed, progression to severe malnutrition. Contributing factors include food insecurity, poverty, inadequate dietary diversity, and limited access to timely nutrition and health services. In response to these challenges, the Targeted Supplementary Feeding Programs (TSFP) is designed to provide timely, evidence-based treatment through supplementary foods, routine screening, nutrition counseling, and follow-up care, aiming to restore nutritional status, prevent deterioration, and reduce malnutrition-related morbidity and mortality among the most vulnerable populations.

Keey Achievement:



8-Primary Healthcare Services -Southern Region Zabul, Nimruz, Helmand and Kandahar provinces:

Project Background:

Provinces such as Nimruz, Helmand, Zabul, and Uruzgan continue to face significant public health challenges due to prolonged conflict, geographic remoteness, population displacement, and fragile health infrastructure. Many communities in these provinces experience limited access to functional health facilities, skilled health workers, and essential medicines, resulting in preventable illness and loss of life, particularly among women, children, and other vulnerable groups. Recurrent disease outbreaks, malnutrition, and maternal health complications further strain an already weakened health system, highlighting the urgent need for sustained support to maintain the availability and functionality of essential healthcare services in these underserved areas.

1-Planned beneficiaries: 75410,2-Reached beneficiaries: 124736,3-9 health facilities supported



Vaccination and consultation services are being provided in Uruzgan, ensuring communities have access to essential immunization and primary healthcare services to improve overall health and well-being

Key Impact Figures – 2025

- **3.9+ million beneficiaries reached**
- **1,482 staff employed**
- **Over 1.8 million children screened for malnutrition**
- **Thousands of safe deliveries supported**
- **Hundreds of thousands vaccinated**

- **Over 1,479 MT nutrition commodities distributed**
- **Strong HMIS reporting and data quality improvements**

Key Challenges in 2025

- Shortage of qualified female health workers
- Delays in supply chain pipelines
- Hard-to-reach geographical terrain
- High mobility of nomadic populations
- Infrastructure limitations in rural facilities

OPHCD undertook adaptive measures and proactive planning that minimized service disruption to a considerable extent during the reporting year. Details are given under specific project overviews in this document.

Mitigation strategies:

- Cross-provincial staff deployment
- Buffer stock systems
- Remote monitoring mechanisms
- Stronger partner coordination

Partnerships & Collaboration

Strong and transparent partnerships remain the cornerstone of OPHCD's success. In 2025, OPHCD implemented multi-sectoral programs as mentioned above through strategic collaboration with leading international and national partners.

Key Institutional Partners

OPHCD worked closely with:

- **World Bank** – Supporting health system strengthening and BPHS/EPHS implementation.
- **UNICEF** – Supporting health camps, nutrition programming, BPHS/EPHS services, community-based nutrition, and life-saving interventions.
- **World Health Organization** – Strengthening Primary Healthcare facilities and emergency response systems.
- **World Food Program** – Implementing Targeted Supplementary Feeding Programs (TSFP) across multiple provinces.
- **Global Polio Eradication Initiative** – Enhancing routine immunization and polio eradication efforts.

- **BMGF** – Strengthening routine immunization in Hilmand and Uruzgan provinces

In addition, OPHCD coordinated closely with Provincial Public Health Directorates (PPHDs), community health structures, and cluster coordination platforms to ensure alignment with national priorities and humanitarian standards.

Table 1 OPHCD partners in 2025



Partnership Approach

OPHCD's partnership model is built on five key principles:

1. Alignment with National Systems

All projects are implemented in coordination with relevant line ministries and provincial authorities to ensure sustainability and policy coherence.

2. Transparency & Accountability

- Timely financial and programmatic reporting
- Internal audits and compliance reviews
- Real-time monitoring systems
- Community feedback mechanisms

3. Operational Efficiency

- Strong grant management systems
- Experienced procurement and logistics units
- Risk mitigation and compliance controls

4. Technical Excellence

- Adherence to global standards (IMNCI, IMAM, MH GAP, EPI)
- Continuous staff training and supervision
- Quality assurance frameworks

5. Community-Centered Implementation

- Engagement of local leaders and health shuras
- Use of Community Health Volunteers
- Gender-sensitive programming

Value Added to Donors

OPHCD offers donors:

- Nationwide operational footprint
- Proven capacity to manage large-scale grants
- Strong female workforce in health and nutrition
- Robust monitoring and data reporting systems
- Rapid emergency response capability
- Deep community trust and acceptance

In 2025, OPHCD demonstrated consistent compliance with donor requirements, maintained high reporting standards, and delivered results exceeding several planned targets.

Organizational Governance & Policies

OPHCD operates under 9 global policies including:

- Gender Policy
- Environmental & Social Protection Policy
- Data Protection Policy

- Grievance Policy
- PSEA Policy
- Child Protection Policy
- Anti-Terrorism & AML Policy
- Conflict of Interest Policy
- Anti-Fraud & Anti-Corruption Policy

These policies ensure compliance, transparency, efficiency and accountability across all operations.

Governance Structure

OPHCD operates under a structured governance and management model ensuring clear separation of oversight and operational responsibilities.

Governance Oversight:

The Board of Directors is responsible for:

- Strategic policy approval
- Institutional risk oversight
- Financial and audit supervision
- Organizational compliance
- Appointment and performance evaluation of senior management
- Safeguarding ethical standards

The Board convenes periodically to review performance reports, financial statements, and strategic plans.

Board of Directors:

Strong governance and accountable leadership remain central to OPHCD's institutional integrity, and operational effectiveness. The organization operates under a clearly defined governance framework that ensures strategic oversight, financial transparency, regulatory compliance, and alignment with humanitarian principles.

The Board of Directors provides strategic direction and fiduciary supervision to ensure that OPHCD fulfills its mission effectively and responsibly. The Board members bring diverse expertise in public health, education, management, literature, and engineering that guarantees strengthening institutional decision-making.

1. Shafiullah Safi – Board Director

Shafiullah Safi is an experienced professional in health programming in Afghanistan. A graduate of Nangarhar Medical Faculty and Ittehad High School (Pakistan), he currently serves as MEAL manager at OPHCD in Kabul.

Mr. Safi brings strong expertise in healthcare planning, project management, staff supervision, and technical oversight of health programs.

2. Mohammad Aziz Paewaston – Board Member & Secretary

Mohammad Aziz Paewaston is an MBA graduate and currently serving as General Director of OPHCD (2017–present). As a Board Member and Secretary, he provides strategic oversight, ensures compliance, strengthens donor engagement, and oversees operational and financial performance.

He has extensive training in:

- Leadership and governance
- Monitoring & Evaluation
- Proposal development
- Reporting and compliance

He is fluent in English, Dari, and Pashto.

3. Zahid Karimzai – Board Member

Zahid Karimzai is a respected academic and literary professional with a Master's degree in Pashto Literature from Kabul University. He currently serves as a Lecturer at Kunduz University and manages Atarud A Lingua Academy in Kabul.

His previous leadership roles include:

- Head of Jowand Adabi Baheer
- Chief Editor at Pasoon Timely Magazine

His background strengthens OPHCD's community engagement and communication strategies.

4. Dr. Mir Mohammad Usman (Sadat) – Board Member

Dr. Mir Mohammad Usman (Sadat) holds an MBBS, MPH, and diplomas in Public Health and Nutrition. He has previously worked as Senior Contract Compliance Specialist at GCMU/MoPH.

His contributions are noteworthy in:

- Healthcare service delivery improvement
- Contract compliance and monitoring
- Health systems strengthening
- Capacity building in public health

His expertise enhances OPHCD's technical rigor and compliance standards.

5. Zakirullah Zaki – Board Member

Zakirullah Zaki is an accomplished engineering academic with advanced degrees in civil and industrial engineering from Voronezh State University of Architecture and Civil Engineering (Russia).

Currently an Assistant Professor and former Dean of the Engineering Faculty at Baghlan University, he brings expertise in:

- Infrastructure development
- Engineering software & BIM
- Hydraulic modeling
- Construction oversight

His technical background supports OPHCD's infrastructure, WASH, and construction-related initiatives.

Executive Management Team

Through strong Board leadership, professional executive management, and robust financial oversight, OPHCD continues to operate as a transparent and accountable national NGO.

The combination of technical expertise and operational discipline positions OPHCD as a trusted partner for national authorities and international donors, committed to delivering sustainable impact across Afghanistan.

The Executive Management Team oversees day-to-day operations and ensures implementation of Board-approved strategies.

General Director

Mohammad Aziz Paewaston
Provides overall leadership, donor engagement, strategic direction, and institutional management.

Deputy Director

Dr. Abdul Mukhtar Hamdard
Leads technical implementation and oversees the performance of different projects.

Program Director

Mohammad Yousaf Tayeb (MD, MPH)
Oversees strategic planning, stakeholder coordination, and program implementation.

Grants & Partnership Coordinator

Dr. Syed Nasir Hashimi (MD, MPH)
Coordinates proposal development and partnership coordination.

Technical & Operational Leadership

OPHCD's technical strength is anchored by specialized managers:

- **Dr. Shafiullah Safi – Planning/MEAL Manager**
  Leads monitoring, evaluation, learning, and accountability systems.
- **Dr. Ihsan Ullah Shahid – Health Manager**
  Oversees health program quality and implementation.
- **Habibullah Roshan – Nutrition Manager**
  Leads nutrition programming and IMAM implementation.
- **Naqibullah Mohammadi – Operations Manager**
  Oversees operational planning, logistics, and compliance.
- **Abdul Zahid Danishjo – Human Resources Manager**
  Leads HR management, and workforce planning.

Financial Governance & Internal Controls

OPHCD maintains strong financial management systems aligned with international donor requirements.

Head of Finance

Wali Rahman Safi (MBA, BBA)
Leads budgeting, financial reporting, donor compliance, treasury management, and audit coordination.

Finance Manager

Noorullah Noorzada (CPA)
Oversees financial systems, compliance, and statutory obligations.

Internal Audit & Finance Oversight

Abdul Zaher Nazari
Provides internal audit, financial oversight, and control systems strengthening.

Financial systems include:

- Segregation of duties
- Multi-level authorization controls
- Internal audit reviews
- Donor compliance monitoring
- ERP and accounting software systems

Organizational Culture & Staff Wellbeing

In 2025, OPHCD prioritized staff support and resilience. Initiatives included:

- Remote work facilitation during challenging periods
- Leadership coaching for senior managers
- Mental health and well-being activities
- Capacity development and professional training

OPHCD recognizes that strong governance is inseparable from strong people management and staff wellbeing.

Accountability & Risk Management Framework

OPHCD applies structured risk mitigation systems covering:

- Financial risks
- Operational risks
- Compliance risks
- Safeguarding risks
- Security risks

Policies include:

- Anti-Fraud & Anti-Corruption
- PSEA & Child Safeguarding
- Conflict of Interest
- Environmental & Social Safeguards
- Data Protection

These frameworks ensure donor confidence and community trust.

Success Story 1:

A Midwife Saves a mother and Inspires the Community

Frequent and closely spaced pregnancies pose serious health risks for both mothers and their children, particularly in resource-limited settings. At **Kotal Clinic**, these risks were effectively addressed through timely counseling and quality maternal health services provided by **Ms. Soraya**, a trained midwife.

Walayat Bibi, a mother of a nine-month-old infant, visited the clinic in a fragile state of health compounded by economic hardship. Recognizing the medical risks associated with another immediate pregnancy, Midwife Soraya—who had received comprehensive **family planning training from OPHCD**—provided individualized counseling on birth spacing and reproductive health. Following informed consent, she safely prescribed **combined oral contraceptive (COC) tablets**, ensuring the client understood their proper use. Walayat Bibi left the clinic satisfied, informed, and confident in her decision. Six months later, she returned for follow-up, reporting positive health outcomes and improved wellbeing. Encouraged by her experience, she shared her story with other women in the community, highlighting the importance of family planning for maternal and child health.

As a result, increased numbers of women sought counseling and services at Kotal Clinic, strengthening trust in local health services and promoting healthier choices within the community.

Reflecting on this impact, Midwife Soraya expressed her appreciation to the **OPHCD technical team**, stating:

"It is my honor to see my patients healthy, informed, and confident about their futures."

This success story demonstrates how **capacity building of frontline health workers**, combined with community-based family planning services, can save lives, empower women, and create lasting positive change.

Success story 2:

The Story of Spoogmai: A Mother's Journey to Better Health

Spoogmai, a 31-year-old mother, lives in a remote area of Urozgan province, where she faces the daily challenges of raising her three children. One of her children, Samir, who is just two years old, was weak and struggling to gain weight. He frequently fell ill, which deeply concerned Spoogmai. However, she was unsure of how to address his condition and felt helpless in improving his situation.

When Spoogmai learned about a nutrition program available at a clinic located some distance from her home, she made the difficult decision to travel in search of help for Samir. Upon arriving at the clinic, the nutrition staff conducted a thorough screening and confirmed that Samir was malnourished. The team took the time to educate Spoogmai about the critical importance of nutrition and how supplementary feeding could help improve Samir's health. She was provided with Ready-to-Use Supplementary Food (RUSF) and Super Cereal, not only for Samir but also for herself, as she was diagnosed as malnourished and pregnant at the time. The clinic staff carefully demonstrated how to use the supplements correctly to maximize their benefits.

Spoogmai was encouraged to return regularly for follow-up visits at the clinic to monitor Samir's progress. Over the following months, she diligently followed the nutritional guidelines provided by the program. Gradually, Samir's health began to improve. His energy levels surged, and he started walking and playing with other children in the village. His weight steadily increased to healthy levels. Spoogmai was overjoyed to witness this remarkable transformation, not only in Samir's health but also in her understanding of nutrition for herself and her family.

Impact on the Community

Spoogmai's story is one of many that highlights the transformative role of the TSFP nutrition center in the lives of malnourished children and mothers. The program not only provided immediate relief through supplementary food but also empowered families with essential knowledge about nutrition, health, and the importance of regular medical checkups. As a result, Samir became a healthier child, and Spoogmai emerged as a role model for other mothers in her community. Her experience inspired other women to participate in the program, contributing to an overall improvement in the health and well-being of the entire community.

Success Story 3:

Timely Medical Care Helps Child Recover in Masoom Abad, Nimruz.

PHCD Project – Masoom Abad Basic Health Center (BHC), Nimruz Province.The Primary Health Care Delivery (PHCD) project provides essential health services to remote and underserved communities in Nimruz Province. Masoom Abad BHC serves as a critical access point for emergency care, outpatient consultations, and follow-up treatment for children and families in need. The facility ensures that community members, especially vulnerable populations, receive timely and effective healthcare close to their homes.

Challenge:

On **September 17, 2025**, Farid Ahmad, an 8-year-old boy from Ali Abad village, Zaranj district, was brought to Masoom Abad BHC after a motorcycle accident while collecting cardboard and paper for cooking purposes. He sustained **four scalps. lacerations and other minor wounds**. The family, being economically disadvantaged, relied entirely on the BHC for care. Immediate medical intervention was required to prevent infection and complications.

Intervention:

The health team at Masoom Abad BHC treated Farid's wounds by **suturing four scalp lacerations** and providing proper wound care. Over the next **14 days**, he came for regular follow-up visits:

2nd visit: after 4 days for wound dressing and monitoring.

3rd visit: after 7 days for continued wound care.

4th visit: on the 14th day to ensure full recovery.

The frequent follow-up visits allowed the team to monitor healing, prevent infection, and ensure that Farid returned to normal activity safely.

Impact:

After 14 days of consistent care and monitoring, Farid fully recovered. His wounds healed properly, and his overall condition was satisfactory. The structured follow-up approach prevented complications and reinforced the importance of community-level health services.

Patient Feedback:

Farid's family expressed heartfelt gratitude to the Masoom Abad BHC team for their **dedication, care, and support**, emphasizing the significant impact the facility had on their child's recovery.

*This case highlights the importance of **timely medical intervention and regular follow-up care**, especially for children from vulnerable communities. Accessible health services, combined with committed staff and structured monitoring, can lead to excellent recovery outcomes in rural and underserved areas.*

Looking Forward

OPHCD seeks to further diversify its funding base, strengthen long-term strategic partnerships, and explore innovative financing models that ensure continuity of essential services. OPHCD remains committed to being a trusted, accountable, resilient and results-driven implementing partner, delivering measurable impact for the communities we serve and to:

- Strengthening primary healthcare systems
- Scaling up nutrition interventions
- Enhancing disaster preparedness

- Expanding WASH programming
- Strengthening financial sustainability and partnerships

OPHCD will continue contributing to resilient and healthy Afghan communities through innovation, accountability, exploring committed and strong partnerships with national and international organizations and partners.