SHINE HUMANITY

Partnerships that Empower Change

Annual Report 2024-2025



At the heart of our work is a shared belief, held by our dedicated partners, donors, and communities, that every Pakistani deserves access to quality healthcare.

From the deserts of Sindh to the snowy peaks of Khyber Pakhtunkhwa, Sustainable Healthcare Initiative Now Empowering (SHINE) Humanity's mission to build healthier communities is realized through the unwavering support of our collaborators, advancing primary healthcare in rural Pakistan.

Across Pakistan's vast rural landscape, SHINE Humanity Clinics stand as living proof of what partnership-driven impact can achieve. Shaped by community needs and sustained by the generous support we have received over the years, SHINE clinics have delivered high-quality primary care to underserved populations for over a decade.

Our mission is strengthened by every organization, institution, and individual who walks alongside us. Together, through trust, shared purpose, and long-term commitment, we are transforming healthcare access and creating lasting change for communities too often left behind.

Sehat Sab Ka Haq!

صحت سب کا حق



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Chairman's Message



Kalbe Abbas Dharamsey

Chairman, Pakistan Board
(2023 - Present)



Together, we strengthened healthcare delivery, introduced essential public health programs and ensured that essential services reached those who need them most.

With deep gratitude and renewed purpose, we reflect on a year defined by partnerships that empowered meaningful change for SHINE Humanity. This year reaffirmed a powerful truth: lasting impact is never achieved alone. It is built through collaboration, shared vision, and collective action.

Through the strength of our supporters, we expanded access to quality primary healthcare for underserved populations across rural Pakistan.
Together, we strengthened healthcare delivery, introduced essential public health programs and ensured that essential services reached those who need them most. These collaborations have allowed us not only to grow our reach, but also to deepen our impact in the communities we serve.

As we look ahead, SHINE Humanity remains committed to onboarding and nurturing partnerships that amplify our impact and create sustainable change for our beneficiaries. Together, we will continue to empower communities and advance a future where access to healthcare is a right enjoyed by all, not a privilege afforded to a few.

Sehat Sab Ka Haq!

About us

Founded in 2009 by a group of Pakistani-American doctors and entrepreneurs based out of California, SHINE Humanity was formed to repay the debt they owe to Pakistan.

As our affiliate partner, SHINE Humanity Pakistan was registered under the Societies Act of 1860 in 2013 to move the mission forward and implement it in Pakistan. Since its founding, SHINE Humanity has been active in different parts of the world; at present, our area of concentration is rural Pakistan, where we have primary healthcare facilities providing treatment at grass root levels.

To tackle the growing inequality of healthcare in Pakistan and to promote health literacy and awareness in rural areas, SHINE Humanity has been providing primary healthcare through its clinics in rural Sindh since 2013, and has also expanded its footprint to Mansehra, KPK.

SHINE's operational effectiveness is underscored by its belief in preventative education and empowerment. Through our Community Outreach Program and health awareness workshops, dietary and nutritional counseling, we have also worked towards improving awareness regarding health and hygiene in rural communities.



History

SHINE Humanity started off as a disaster-relief organization in the aftermath of the devastating earthquake that hit the northern regions of Pakistan in 2005. We continued our disaster relief efforts during the catastrophic floods of 2010 and 2011. We rushed to help with relief efforts after the massive Haiti earthquake of 2010 and the 2011 Tsunami in Japan.

We have also participated in medical missions to Peru. In 2017 and 2018, we also provided a rotation of medical professionals to an OBAT Helpers medical clinic, set up in a Rohingya refugee camp in Bangladesh. In April 2019, on the invitation of the Pakistan Army Medical Corps, SHINE Humanity took a week-long 41-member medical mission to Gilgit Baltistan, where we conducted 122 surgeries and treated 4250+ patients.

Vision

Together we give a chance at a better life by providing effective and empathetic primary healthcare to the underprivileged in Pakistan.

Mission

To improve the accessibility and quality of primary healthcare and health education in underserved communities in Pakistan, empowering individuals to lead healthier lives, fostering sustainable health solutions, and equipping local providers with the tools and training to deliver community-driven, lasting care.



Restoring Health, Renewing Hope

Zulekha's journey from severe asthma to full recovery reflects SHINE Humanity's commitment to accessible, quality healthcare and sustained patient support.

When Zulekha first walked into SHINE Humanity's clinic in January 2024, she was exhausted from a battle that had been taking over her life. Breathing, something most people never think twice about, had become a daily struggle for her. Severe shortness of breath, constant coughing and recurring asthma attacks made even the simplest tasks feel overwhelming.

By the time she reached the clinic, her condition had worsened significantly. Each breath felt like effort, and fear quietly followed her, fear of what might happen if things didn't improve. But from her very first visit, Zulekha found something she hadn't felt in a long time: reassurance that her health might improve.

The medical team at the clinic listened patiently, carried out thorough examinations, and explained every step of her treatment with care and clarity. She was started on appropriate asthma medications and carefully guided on inhaler use, lifestyle changes and the importance of follow-up visits.

Month after month, she returned to SHINE. Some days were harder than others, but with every visit, her progress was closely monitored, and slowly, her test results began to show improvement.

By September 2025, Zulekha reached a milestone she once thought was out of reach - she successfully completed her treatment. Today, she breathes with ease, lives comfortably, and carries out her daily activities without the constant worry of an asthma attack. More than physical relief, she gained back her confidence and her joy.

Looking back, Zulekha speaks with deep gratitude. She credits the doctors and SHINE Humanity staff for their unwavering support, compassion, and guidance throughout her journey.

> "They believed in my recovery, even when I was afraid I might never feel better."

Zulekha's story is not just about managing asthma, it is about resilience and the power of accessible, quality healthcare. It is a reminder that when patients are met with empathy and consistency, healing becomes possible not just in the body, but in the heart as well.


"Before SHINE, every breath felt uncertain. Today, I breathe with ease and confidence."

Our Impact

18
Total Clinics

154,000+
Patients Treated (2024–25)



Total Impact 1.7 million lives

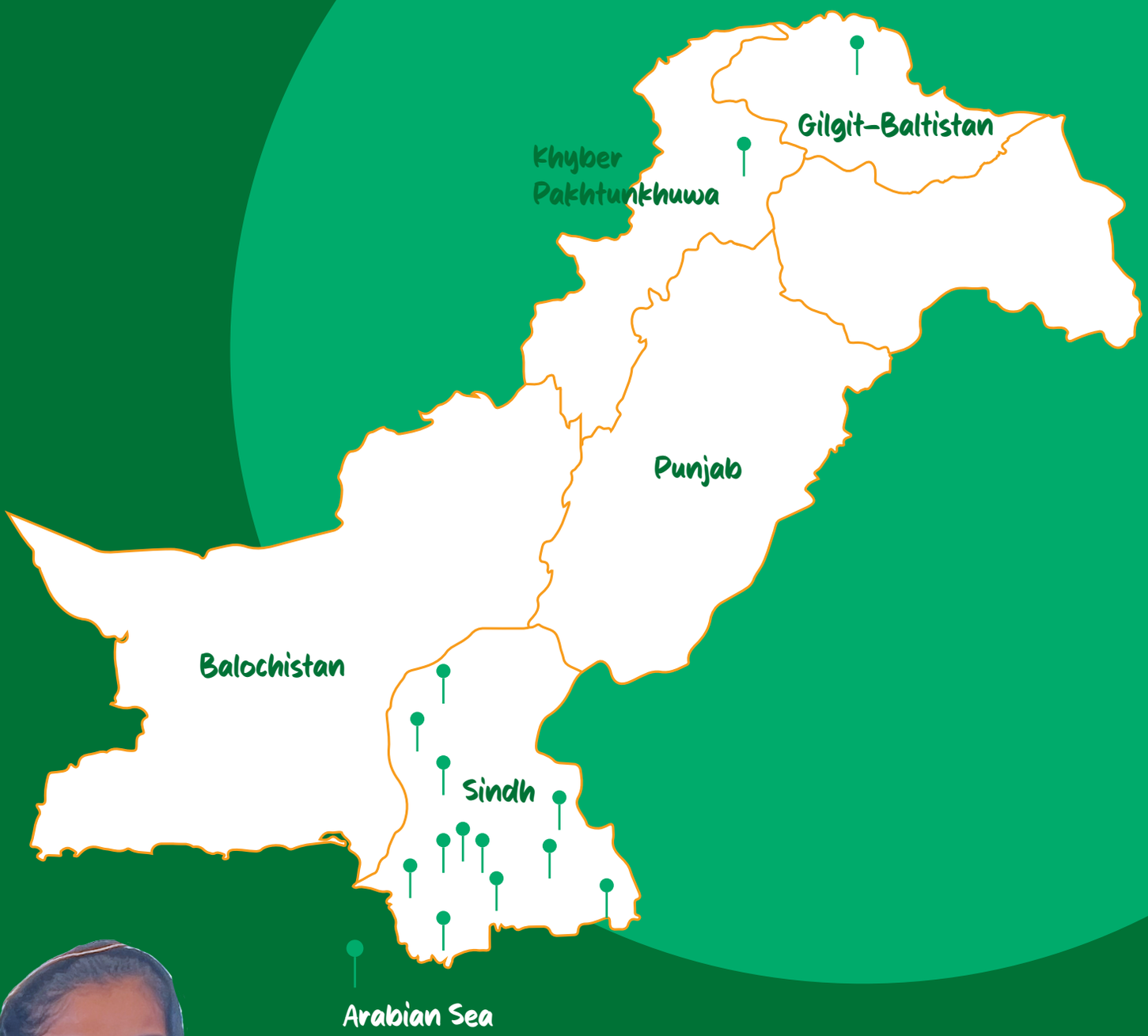


Our Footprint

Our area of concentration is rural Pakistan, where we have 18 primary healthcare clinics providing health services to the under-served.







SHINE Humanity Clinic

Board of Directors
Pakistan



Kalbe Abbas Dharamsey
Chairman

Mr. Kalbe Abbas Dharamsey, is a businessman by profession and his education is specialized in negotiation skills. He is currently serving as a director at Farah International, and is a founding member of The Aziz & Razia Dharamsey Family Foundation, a charitable organization working to help local organizations accomplish their objectives.

Dr. Asghar Naqvi
Board Member

Dr. Naqvi is a graduate of Dow University and has extensive experience in the pharmaceutical industry. He has worked in reputable companies such as Pfizer and Novartis Pakistan. He is also President of the organization, "Friends of Education" which works for eradicating illiteracy in poverty stricken areas.





Fauzi Garib
Board Member

Fauzi Garib is a businessman and a Director in Garibsons (Pvt.) Ltd, a large family business involved in the export and processing of multiple food commodities, and the manufacturing of construction materials. He graduated from the University of Southern California in 1998 with degrees in both Engineering and Computer. Currently serving as the President of The Rotary Club of Karachi Metropolitan, he has been honored with Platinum awards for the best Club in the district, and the best President in the district.

Dr. Lubna Ansari Baig
Board Member

Professor Lubna Ansari Baig is the Founding Dean, APPNA Institute of Public Health at Jinnah Sindh Medical University (AIPH-JSMU) and is presently its chairperson. She started her career as a field Medical Officer at UNICEF, and then got a Master of Public Health Degree from University of Oklahoma, USA. On her return to Pakistan, she joined AKU as an Instructor. She is an experienced medical professional, having worked at Baqai Medical College, and Jinnah Medical and Dental College from 1993 to 1999. In 1998, she was requested by the Federal Ministry of Health to join as Consultant for the Community Oriented Medical Education (COME) Project of the WHO.





Dr. Laila Rizvi
Board Member

Dr. Laila Rizvi brings with her many years of experience of working in the non-profit sector. Her work as the CEO of The Health Foundation has made a lasting impact in the fight against Hepatitis in Pakistan.

Shazina Masud
Board Member

Ms. Masud is a seasoned public health leader, and has spearheaded global humanitarian initiatives. With extensive experience spanning nearly two decades in both private and public sectors, she has served as CEO of organizations like Sindh Integrated Emergency and Health Services, Aman Healthcare Services and Aman Foundation. Her expertise lies in reproductive health, humanitarian response, and social marketing, with a focus on expanding emergency care services.



Ammara Masood
Board Member



Ammara Masood is the Global Industries GM for Banking and Financial Services at Systems Limited and CEO of NdcTech, which was acquired by Systems Limited in July 2022. She has over 29 years of experience in IT, consulting, and entrepreneurship across three continents, with expertise in IT strategy, digital transformation, and governance. Ammara has served on several boards and advisory councils, including the Pakistan Software Houses Association and the ICT Governing Council. She is a two-time winner of the FinTech Futures Leadership Excellence award and holds multiple advanced degrees, including an MBA from California State University and an Executive Diploma from Stanford University.

Management

Faheem Khan
Chief Executive Officer



Faheem Khan has engaged in multiple endeavors through the 20 years of his professional career. He has helped Habib University by creating a world-class Wellness Program for its students which encompasses a holistic approach to learning and being healthy. As part of the development sector, Faheem has also consulted for NOWPDP, an NGO helping People with Disabilities in Pakistan. As COO of SHINE Humanity, a non-profit organization formed to provide compassionate, sustainable and preventative healthcare measures to the underserved communities in Pakistan, Faheem oversaw the administrative, programmatic and operational functions. Now in his role as CEO at SHINE, Faheem provides strategic leadership, oversees program implementation, fosters stakeholder collaboration, and drives innovative, scalable, and sustainable healthcare solutions. Under his leadership, SHINE has submitted 11 abstracts to local and international forums, grown from 2 to 20 digitally connected facilities in rural Pakistan, and has expanded its operations nationally with a clinic in Mansehra, KPK.

Sheikh Danish Ahmed
Senior Manager Finance

Danish is a seasoned finance professional with over 10 years of progressive experience in accounting, financial management, donor funding, audits, and administration across non-profit, corporate, and service sectors. Skilled in financial reporting, compliance, budgeting, and strategic cost control with a strong record of collaborating with international donors, auditors (PwC, EY), and regulatory authorities. Proficient at leading finance teams, driving efficiency, and supporting top management in strategic decision-making.



Dr. Farwa Shahid

Senior Manager Public Health



Dr. Farwa Shahid is a Senior Public Health Specialist with over 12 years of experience in the development sector. After completing an MPH from Baqai Medical University, Dr. Farwa began her public health career with the national NGO BRSP as Health Coordinator. In this role, she led the Malaria Control Program across 23 districts of Balochistan, implemented a school WASH program, established menstrual hygiene clubs, and worked extensively on empowering community health workers. Following this, Dr. Farwa served in the government sector as Additional Medical Superintendent at a THQ hospital for nearly three years. During this tenure, she managed hospital operations, including infection control policy development, ERP generation, stock management, doctors' performance evaluations, and strengthening DHIS digital reporting. Prior to joining SHINE Humanity, Dr. Farwa contributed as a consultant with the World Bank, supporting nutrition and women's empowerment programs across three districts of Khyber Pakhtunkhwa. Currently at SHINE Humanity, she continues to bring expertise and leadership to public health initiatives.

Humair Mumtaz

Manager Operations

Humair Mumtaz is a seasoned development sector professional with over 15 years of experience in program and operations management, compliance, training, and stakeholder engagement. He currently serves as Manager Operations at SHINE Humanity, leading organizational operations, compliance, safeguarding, and stakeholder engagement to strengthen healthcare delivery in underserved communities. Previously, he worked as Provincial Lead for the USAID-funded BHF Project at Greenstar Social Marketing, overseeing operations across 19 districts of Sindh and managing a network of 1,250+ healthcare providers. He has also held leadership roles at Roshni Helpline, Marie Stopes Society, Civil Society Support Program, and the School of Leadership, and contributed as a Family Planning Trainer Consultant with Willows International. A Certified Trainer and Master Trainer, Humair has designed and delivered capacity-building programs in safeguarding, community mobilization, and disaster management in collaboration with leading organizations such as the British Council, USAID, DFID, and GAC. He is currently pursuing an MSPH from SZABIST and holds a Master's degree in Sociology, with a strong academic background in commerce and social sciences.



Program Directors

Dr. Farzana Naqvi (MD, FACP, FACE)

Program Director - SHINE Humanity Diabetes Program



Dr. Farzana Naqvi is one of the founding members of SHINE Humanity and a practicing Endocrinologist in Newport Beach, California. She completed her medical school at Jinnah Sindh Medical University, before moving to New York City for her Internal Medicine residency at Mount Sinai-St. Luke Roosevelt's Hospital. She then completed an Endocrinology fellowship at the University of California, Irvine and is Board Certified in Endocrinology, Diabetes and Metabolism. Dr. Naqvi has also participated in medical missions to Pakistan, Bangladesh, Haiti and Peru. She initiated SHINE's Diabetes, Hypertension, and Hyperlipidemia Program in rural Sindh, and research data from the program was presented at the prestigious International Diabetes Federation World Congress in December 2022. She has also played a major role in launching SHINE's Gestational Diabetes Program for pregnant women.

Dr. Shirin Muzaffar (MD)

Program Director - SHINE Humanity Asthma and Tuberculosis Program

Dr. Shirin Muzaffar has extensive expertise in pulmonary and critical care medicine. Dr Shirin served as the Director of the Medical Intensive Care Unit at Mount Sinai Hospital Chicago for 8 years, showcasing her leadership and clinical acumen. Returning to Cook County Hospital, Dr. Shirin took on the role of Associate Chair of Pulmonary & Critical Care Medicine, subsequently becoming Chair of Pulmonary & Critical Care. During this tenure, she also held the position of Medical Director of the Tuberculosis Section, actively contributing to public health initiatives.

Dr. Shirin continues to make significant contributions to healthcare as a Consulting Physician at the Tuberculosis Clinic at Cook County Hospital and the Chicago Department of Public Health. Her dedication to patient care, leadership in medical education, and commitment to advancing pulmonary and critical care medicine underscore her profound impact in the field, as she advises SHINE's asthma program and will be doing so for our Tuberculosis program.



Dr. Naghmana Shafi (MD, FAAP)

Program Director - SHINE Humanity Helping Babies Survive and Malnutrition Program



Dr. Naghmana is an Associate professor of Pediatrics at the California University of Science and Medicine. Graduated from Sindh Medical College , Karachi, Pakistan in 1987, her special interests are medical education and global pediatrics. Dr. Naghmana has been supervising SHINE Humanity 's Sunehra Lamha (Helping Babies Survive) Program for 11 years.

Dr. Anjum Memon (MBBS, DPhil (Oxon), MFPH, FFPH)

Program Director - Honorary Director of Research

Professor Anjum Memon, MBBS, DPhil (Oxon), MFPH, FFPH, is a medically qualified epidemiologist and public health academic. He trained in medicine at Jinnah Sindh Medical University and in epidemiology at University of Oxford under the supervision of Sir Richard Doll, the most eminent and renowned epidemiologist. Anjum is currently Professor and Chair in Epidemiology and Public Health Medicine at Brighton and Sussex Medical School, University of Sussex, UK. He has previously worked at the universities of Oxford, Kuwait and Cambridge. He is also Honorary Consultant in Public Health Medicine at the Office for Health Improvement & Disparities, Department of Health & Social Care, NHS England. Anjum is a Fellow and Board Member of the Faculty of Public Health, Royal Colleges of Physicians of the UK. As Honorary Director of Research at Shine Humanity, Anjum provides strategic direction and academic insight for prevention programs (e.g., diabetes, anemia, asthma, hepatitis), data collection and analyses and scientific publications.



Shazina Masud (MBA, MS)

Program Director - SHINE Humanity Family Planning Program



Ms. Masud is a seasoned public health leader, has spearheaded global humanitarian initiatives, including serving as Chief of Party for USAID's Building Healthy Families project in Sindh and ICT. With extensive experience spanning nearly two decades in both private and public sectors, she has served as CEO of organizations like Sindh Integrated Emergency and Health Services, Aman Healthcare Services and Aman Foundation. Her expertise lies in reproductive health, humanitarian response, and social marketing, with a focus on expanding emergency care services. She holds an MBA from the IBA, and an MS in Creativity in Change and Leadership from Buffalo College, New York.

A message of gratitude



Faheem Khan

CEO
SHINE Humanity Pakistan



To our donors, supporters and partners: you are the force behind every consultation, every treatment, and every life impacted.

As we close the chapters of this year, I am humbled by the scale of what we have achieved together. Impacting the lives of over 150,000 patients this year is a testament to the power of collective action.

To our donors, supporters and partners: you are the force behind every consultation, every treatment, and every life impacted. Your belief in our mission provides more than just funding; it provides the underserved a chance at a healthy future.

While the numbers tell a story of success, it is the human impact - the mothers, children, and elders who now have a chance at a healthier life, that truly defines our year. Thank you for your steadfast partnership and for being an integral part of the SHINE Humanity journey.

We look forward to reaching even greater heights with you in the year ahead.

With gratitude.





Our Clinics

SHINE Humanity Garibsons Clinic

Partner: Garibsons Pvt. Ltd



Patients treated 41,177

Located in Gharo, Sindh and managed in collaboration with Garibsons (Pvt) Ltd, this clinic was SHINE Humanity's first brick-and-mortar healthcare facility. It is run by a dedicated team of six qualified doctors who provide outpatient primary care, preventive health education, and antenatal services.

The clinic is equipped with an in-house pharmacy, ultrasound facilities, and a structured referral system to tertiary hospitals in the city. While patients pay a nominal consultation fee, three days' worth of medications are provided free of cost, and individuals with chronic conditions receive a regular supply of life-saving medicines.

In addition to general healthcare services, the facility also houses an eye clinic and serves as the base for SHINE Humanity's newly launched Mobile Dental Unit, further expanding access to essential and specialized care for the surrounding communities.

GARIBSONS (PVT) LTD



SHINE Humanity
Zia Abbas Haider Memorial Clinic

Partner: Generously supported by the Abbas Family, based in the US



Patients treated 14,795

This 2-doctor clinic is located in Koohi Goth, Malir District and provides primary healthcare to its residents and surrounding communities. Keeping in mind the dire state of maternal and child health in Pakistan, this clinic was first launched as a one-doctor Women's clinic and has been sponsored by Mumtaz and Munawar Haider in memory of their son.



SHINE Humanity Chilya Clinic

Partner: Packages Foundation



Patients treated 9,534

This clinic started off as a basic healthcare container clinic, however with the help of the Livestock and Fisheries Department in Sindh, SHINE has adopted an abandoned dispensary to set up a primary healthcare facility in Chilya.

Catering to a community of fishermen and their families, this clinic is the only source of healthcare within a 40-kilometer radius. With the support of the Packages Foundation, SHINE has developed and now introduced vital healthcare intervention programs including the Hepatitis Eradication and Community Outreach Programs amongst others.



PACKAGES FOUNDATION

SHINE – Aziz & Razia Dharamsey Family Foundation Clinic

Aziz and Razia Dharamsey Family Foundation



Patients treated 8,125

We inaugurated this clinic in February 2022 in collaboration with NOWPDP, a disability inclusive non-profit which runs the "Moriro Markaz"- a school for disabled children. This clinic is situated in the exterior of the Moriro Markaz and is a one-doctor clinic which provides free primary healthcare to the people of Sujawal as well as to the students of Moriro Markaz. We are very grateful to Aziz and Razia Dharamsey Family Foundation for this kind donation.



AZIZ & RAZIA DHARAMSEY FAMILY FOUNDATION

SHINE Humanity
Gul Lot & Ghulam Muhammad Lot Clinics

Partner: Mehran Spices



Gul Lot Clinic

Patients treated 11,061

Ghulam Mohammad Lot Clinic

Patients treated 6,785

Access to healthcare remains a significant challenge for the people of Diplo and Nagarparkar in the Thar Desert, contributing to alarmingly high maternal and child mortality rates. The Thar District of Sindh is among Pakistan's most neglected regions, with limited access to quality healthcare, clean and safe drinking water, and essential nutrition services. Addressing these urgent needs requires sustained partnerships and collective commitment.

With the generous support of Mehran Spices, SHINE Humanity has established two primary healthcare clinics in Thar District to serve underserved communities. The SHINE Humanity - Gul Lot and SHINE Humanity - Ghulam Muhammad Lot Clinics are providing essential primary healthcare services to communities that previously had little to no access to care in the border town of Nagarparkar, extending much-needed healthcare services to some of the most marginalized populations in the district.



Beyond clinical care, SHINE Humanity's women-led Community Outreach Program plays a vital role in extending healthcare beyond clinic walls. Through household visits, the program delivers critical health education, promotes maternal and child well-being, and strengthens early intervention in rural communities.

SHINE Humanity
Sehat Center, New Jatoi

Partner: Karachi Relief Trust



Patients treated 7,434

Moro, like many rural areas of Pakistan, faces significant healthcare challenges, with limited access to medical facilities and high maternal and child mortality rates. To bridge this gap, SHINE Humanity, with the generous support of Karachi Relief Trust, has launched one of a kind digital clinic "Sehat Center" in Moro. This facility will provide quality primary healthcare services to underserved communities, ensuring timely medical assistance for those in need. Additionally, our signature women-led Community Outreach Program aids us in ensuring even greater access to medical care and improved health for families in Moro.



SHINE Humanity
Sehat Center, Mansehra

Partner: Doctors Worldwide

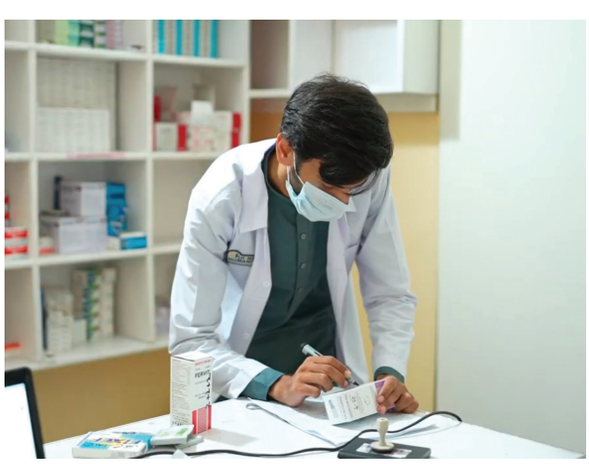


Patients treated 11,832

After a decade of dedicated service transforming the rural healthcare landscape of Sindh, SHINE Humanity marked an expansion of operations into Northern Pakistan, marking a new chapter in the mission to bridge the healthcare gap for the country's most vulnerable populations. In the heart of KPK, Sehat Center in Mansehra represents a significant leap forward in scale and reach.

Sehat Center, Mansehra stands as SHINE's largest and most advanced facility to date. By applying the rigorous standards and digitized medical record systems perfected in it's Sindh clinics, SHINE Humanity is bringing high-quality, data-driven primary care to a region where such resources are often scarce. The center offers comprehensive Outpatient Department (OPD) services and an onsite diagnostic lab, ensuring that patients receive accurate assessments without the burden of long-distance travel. Crucially, staying true to core values, the center provides free medications to all beneficiaries, removing the primary financial barrier that prevents rural families from completing their treatment.

This expansion into KPK signifies more than just a new clinic; it represents the national scaling of a proven healthcare model. From the arid plains of the south to the rugged northern frontier, SHINE's footprint is expanding to meet the diverse needs of Pakistan's rural communities.



Doctors Worldwide

SHINE Humanity
Feroza Abbasi Sehat Center

Partner: Generously supported by the Abbasi Family, based in the US



Patients treated 1,271

Located in the historic city of Sehwan in Sindh, the Feroza Abbasi Sehat Center brings much-needed primary healthcare services to a region where access has long been a challenge.

Surrounded by rural villages and arid terrain, many residents in and around Sehwan face difficulties reaching reliable medical care due to distance, lack of transportation, and limited healthcare infrastructure. Supported by the Abbasi family, this OPD-based facility is designed to bridge that gap, offering consistent, affordable, and accessible outpatient services right at the community's doorstep. Through this initiative, SHINE Humanity is helping to ensure that families in Sehwan no longer have to travel far for basic medical needs, making quality care a reality for all.



SHINE Satellite Clinics



Patients treated 4,113

SHINE Humanity adopted a satellite clinic model to provide healthcare access to remote communities in Thatta. Through weekly visits, our dedicated doctors provide consultations to communities in Harnaro, Kunri, Gul Hassan Samo, Peer Daryabad and Var Town.

ShanShares Shifah Gah - Powered by SHINE Humanity, our newest satellite facility is a primary and preventative healthcare satellite clinic in Kunri, Umerkot, supported by Shan Foods provides health services including doctor's consultation, free medicines and referral services to the underserved families in the community.



SHINE Humanity
Mobile Urgent Care Clinics



Patients treated 21,572

SHINE has three state-of-the-art Mobile Urgent Care Units which are equipped with all the tools needed to provide effective and immediate care to under-served communities. These clinics have a dedicated medical staff consisting of doctors and nurses, medicines and medical equipment on board, and move from one area to another, providing services along the way.



SHINE Humanity Dental Unit, Gharo



Patients treated 704

SHINE Humanity has launched its first Mobile Dental Care Unit at the SHINE Humanity Gharo Clinic, marking a significant step toward expanding access to quality oral healthcare for underserved communities. Recognizing that dental health is often one of the most neglected aspects of overall well-being, this initiative brings essential dental services directly to patients in need. The unit is a fully equipped, state-of-the-art mobile facility offering a range of services including dental check-ups, cleanings, fillings, extractions, and oral hygiene education. Built with patient safety and comfort in mind, it features modern dental equipment, sterilization systems, and an onboard water and power supply.



Sehat Ghar
Nutrition Center, Sujawal and Chilya



Sehat Ghar, holistic Nutrition Centers in Sujawal and Chilya, Sindh have been established to improve the health and development of children under five. The centers integrate multiple evidence-based interventions, including nutritional supplementation (Unimapp for mothers, Pediasure for at-risk children), immunization awareness, breastfeeding education, anemia screening, and maternal health support. It also focuses on deworming and preventive strategies to curb malnutrition progression, ensuring sustainable health outcomes for mothers and children.







Special Initiatives

Electronic Medical Records System

Electronic Medical Records (EMR) are digital versions of paper charts to store patient data, which streamline clinical documentation and help share information securely.

This optimizes workflow and automates tasks. SHINE EMR consists of an extensive system of primary health care data recording, in which doctor's modules, and that of registration and vitals, are some of the most expansive in the global South.

Data collection on the EMR is scalable and adaptable to different programmatic-settings. Our Board of Advisors oversees its monitoring and evaluation via regular reports. Our EMR Data Analysts extract insights from records to support research, decision-making, quality improvement, population health and patient engagement.

Objectives

Facilitate the tracking of health trends and disease patterns, helping in the early detection and management of outbreaks in rural communities.

Assist in the efficient allocation of healthcare resources.

Use aggregated and anonymized data from EMRs to contribute to health research and public health initiatives.



PAANI Project

RO plants are perhaps the most environmentally friendly way of treating industrial wastewater. Their use lessens the need for plastic water and are more energy efficient than other typical ways of attaining water.

Moreover, the cause behind most gastrointestinal diseases which ail the local community lies in usage of contaminated water. In 2020, we started the PAANI Project to tackle the root cause behind the outbreak of waterborne diseases in rural communities. Through robust collaborations with the local communities, we aim to provide clean drinking water to rural areas, and have installed multiple RO plants in the outskirts of Karachi and in rural communities across Sindh.

To date we have installed several RO plants in various locations in interior Sindh, including Ibrahim Hyderi, Sujawal and Mirpur Khaas. Through robust collaborations with the local communities, we aim to provide clean drinking water to rural areas

Beneficiaries

500,000+




SHINE
HUMANITY



Our Programs

JB Azariah Sehat Agahi (Community Outreach)

Health education is one of the most effective tools for prevention, especially in rural settings where access to care is limited. The Community Outreach Program, supported by the JB Azariah family, empowers households with the knowledge and resources needed to take charge of their health.

Our Community Health Workers (CHWs) deliver door-to-door awareness sessions, distribute medical and hygiene kits, and link families to clinical services. Topics covered include maternal and child health, reproductive health, hygiene practices, and prevention of chronic and infectious diseases. By focusing on education and empowerment, the program builds healthier, more resilient communities.

This year, the program expanded its footprint, reaching new villages and addressing stigmatized issues such as women's reproductive health more openly. We expanded our team of 10 CHWs to 30 CHWs and partnered with Vital Pakistan Trust to deliver expanded door-to-door Family Planning services along with our regular health and awareness services. Stronger coordination with clinics ensured timely referrals for medical care, while household visits fostered trust and consistent engagement.

We also worked towards digital literacy of our community health workers and real-time monitoring of the data for efficiency through incorporation of RedCap, a data collecting software for our CHWs' door-to-door visits.

We also strengthened their training and monitoring through weekly assessments, covering each topic from every module followed by a final exam at the end of each module. This helped us build capacity of our CHWs through constant education, peer learning, and strict surveillance.

Total community awareness sessions conducted 17,589

Total households covered each month 200



The program also introduced monthly mega sessions where each CHW conducted a large scale community awareness session every month, with pre-post analysis and incorporation of a monthly 'baithak' concept which built awareness, trust, and rapport with the community, aiding greatly in behavior change communication strategies.



Diabetes, Hyperlipidemia and Hypertension

Partners:
Aziz and Razia Dharamsey Family Foundation
Memon Medical Complex
Hussaini Labs



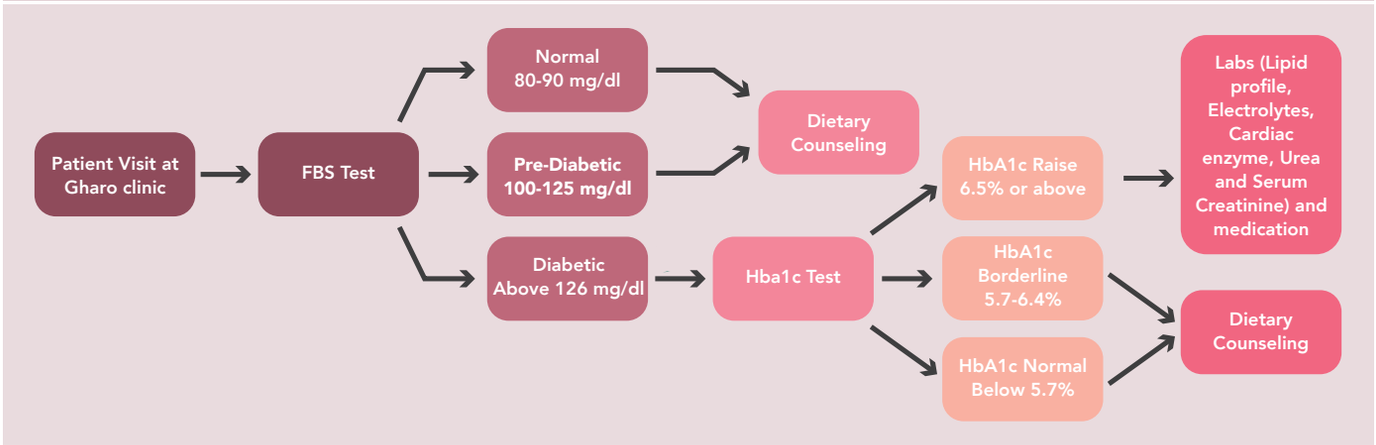
574 active patients in rural Sindh

As of 2024, the adult (ages 20–79) population in Pakistan is estimated at about 130.4 million. The age-standardised prevalence of diabetes among adults in Pakistan is now 31.4%. This corresponds to about 34.5 million adults living with diabetes in Pakistan in 2024. It's also reported that around 26.9% of adults with diabetes remain undiagnosed. This number is alarmingly high and continues to rise each year.

SHINE launched its first Diabetes Program in 2021 at the Gharo Clinic, and has since expanded to the Koohi Goth Clinic. It encompasses medical treatment, lifestyle management and nutritional counseling for patients with Type II Diabetes Mellitus. We maintain vigilant follow-ups to ensure the community gets the help they need. Screening is done based on HbA1C, a revolutionary step in rural areas, followed by routine blood tests for a holistic point of care.

Our Diabetes Program now supports 574 active patients in rural Sindh, providing them with free medications and regular follow-ups. Patients receive a range of diagnostic tests at highly subsidized costs, ensuring comprehensive care. Additionally, the program emphasizes nutritional counseling, recognizing its crucial role in the management of Diabetes. This holistic approach not only addresses the immediate medical needs of our patients but also promotes long-term health and well-being. HBa1C is now performed for each patient every 4th month.

Process Map of DHH Clinic



The clinic is equipped with an in-house pharmacy, ultrasound facilities, and a structured referral system to tertiary hospitals in the city. While patients pay a nominal consultation fee, three days' worth of medications are provided free of cost, and individuals with chronic conditions receive a regular supply of life-saving medicines.

In addition to general healthcare services, the facility also houses an eye clinic and serves as the base for SHINE Humanity's newly launched Mobile Dental Unit, further expanding access to essential and specialized care for the surrounding communities.

41,177 Patients treated

Naseeba's Fight Against Diabetes



Naseeba Ali is a patient from a financially disadvantaged family in Noshahro Feroze, Sindh who has been living with Diabetes for the past 16 years. She was initially diagnosed in her village and received treatment from nearby clinics and hospitals. However, due to inadequate disease management, her condition did not improve and gradually worsened, eventually leaving her bedridden.

During this difficult period, her village was severely affected by flooding, forcing her and her family to relocate to Karachi. While living in a rented home, she continued seeking treatment from various clinics and hospitals, but her health showed little improvement. Later, she was referred to SHINE Humanity's Clinic in Koohi Goth.

At her first visit, comprehensive Diabetes-related investigations were conducted, revealing an HbA1c level of 8.4. The clinic's medical team initiated a structured treatment plan that included appropriate medication management, patient education, guidance and regular follow-up. With this consistent care and Naseeba's active involvement in managing her health, her condition began to improve significantly.

After conditions improved in her village, Naseeba returned home. Despite the long distance of approximately 345 kilometers from her village to the Clinic, Naseeba remains committed to her treatment. She travels overnight by train to attend her follow-up appointments.

As a result of her dedication and continued treatment, her Diabetes is now well controlled, with her HbA1c reduced to 6.4. Naseeba is taking excellent care of her health and has expressed great satisfaction with the clinic staff, environment and treatment approach at SHINE Humanity.

Naseeba's journey highlights the importance of patient commitment and consistent medical care. Her story stands as an inspiring example that positive outcomes are achievable when patients actively engage in their treatment.

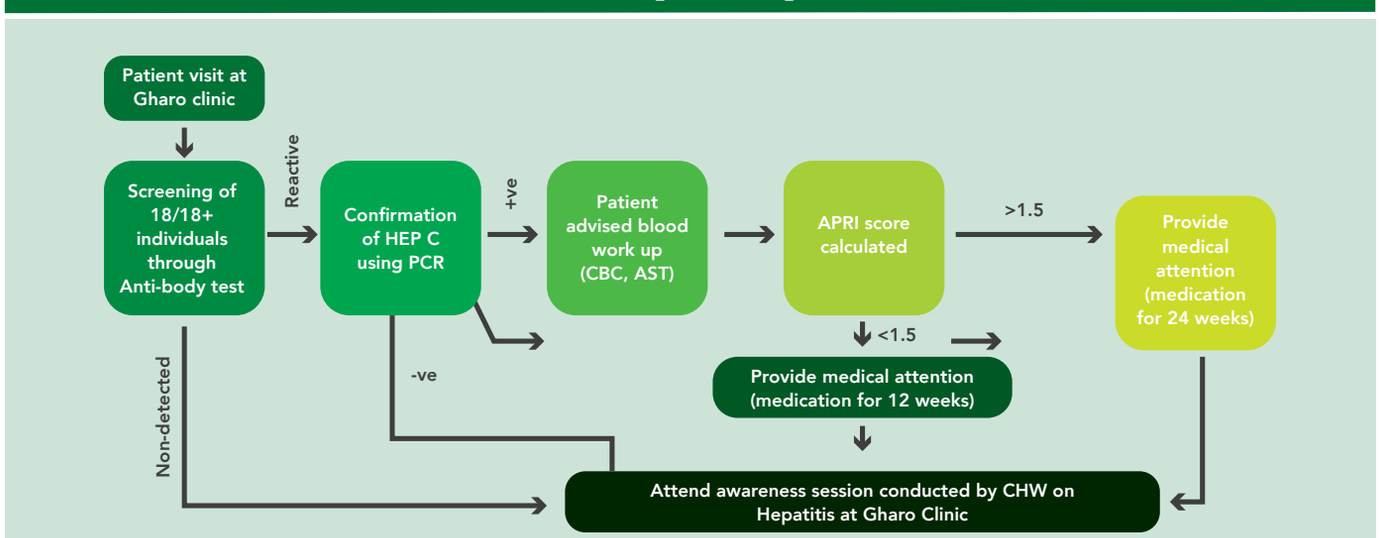
Hepatitis

Partner:
Government of Sindh



The Hepatitis Program was launched in 2021, in collaboration with the Government of Sindh and The Health Foundation. Upon confirmation of PCR testing, patients are enrolled in our Hepatitis Program following a CBC (Platelet count) and Aspartate Aminotransferase (AST) to calculate the APRI score.

Process Map of Hepatitis C



The ultimate end goal of the Hepatitis Program is to reduce both morbidity and mortality associated with the disease.

Impact Numbers (2024 - 2025)

5,958 Total screening

2,427 Total vaccinated

134 Total Positive cases



Did you Know?

A prevalence of Hep C from all clinics was derived from April 2021 to September 2024. A total of 13,334 patients aged 15+ were screened, out of which 1,829 patients were found positive on anti-HCV antibodies. This revealed a prevalence of 13.7%. The PCR test was positive for 905 (49.5%) indicating inactive HCV infection. Among the PCR positive cases 325 (36.1%) were male and 578 (63.9%) were females. Overall prevalence of active HCV infection, based on the positive PCR test was about 6.8%.

Sukhi Hepatitis C Care at Chilya Clinic



In the village of Babu Makrani in Chato Chand, Sukhi lived a simple life with her family. Like many women in the community, she spent her days caring for her home and loved ones, often putting her own health last. For years, she had experienced occasional fatigue but dismissed it as part of her daily routine. She never imagined it could be something more serious.

One day, encouraged by her family, Sukhi visited the SHINE Humanity Clinic in Chilya for a routine check-up. She walked into the clinic unaware that this single visit would become a turning point in her life. As part of the clinic's standard screening, she was tested for Hepatitis C, and a sample was collected for a PCR test.

A few days later, the results came back positive. Sukhi was shocked and afraid, like many in her village, she had heard of Hepatitis C but knew little about its treatment. Sensing her worry, she was reassured that she was not alone and that effective treatment was available. She was immediately enrolled in the Hepatitis Program, and her journey toward recovery began.

For three months, Sukhi visited the clinic regularly to receive her medicine. The medical staff greeted her warmly, answered her questions, and encouraged her throughout her treatment.

By the time she completed her full course of medication, Sukhi felt like her life had been given back to her. The constant fatigue was gone, replaced by a renewed sense of well-being. She often shared with the clinic staff how grateful she felt, not only for the medicine, but for the compassion, support, and dignity she received throughout her journey.

Today, Sukhi speaks with deep appreciation for SHINE Humanity, thankful for the treatment that restored her health and the kindness that strengthened her spirit. Her story is a reminder of how timely care and dedicated medical support can transform lives, especially in underserved communities.

Malaria

Partner:
The Rural Support Programmes Network (RSPN) and funded by the Global Fund

NRSP
National Rural Support Programme



Since its inception in 2017, our Malaria Program has grown significantly, now operating in four SHINE clinics: Gharo, Sujjawal, Chiliya, and Kohi Goth. This expansion marks a substantial effort in combating Malaria in these regions, demonstrating our commitment from detection to eradicating this preventable disease and improving public health outcomes.

This program screens the population for malaria using screening kits. Each confirmed case is followed until completely treated and preventative solutions like mosquito repellents are provided for complete care. In Gharo, we have started microscopic screening. In the rest of the clinics, tests are conducted using RTDs.

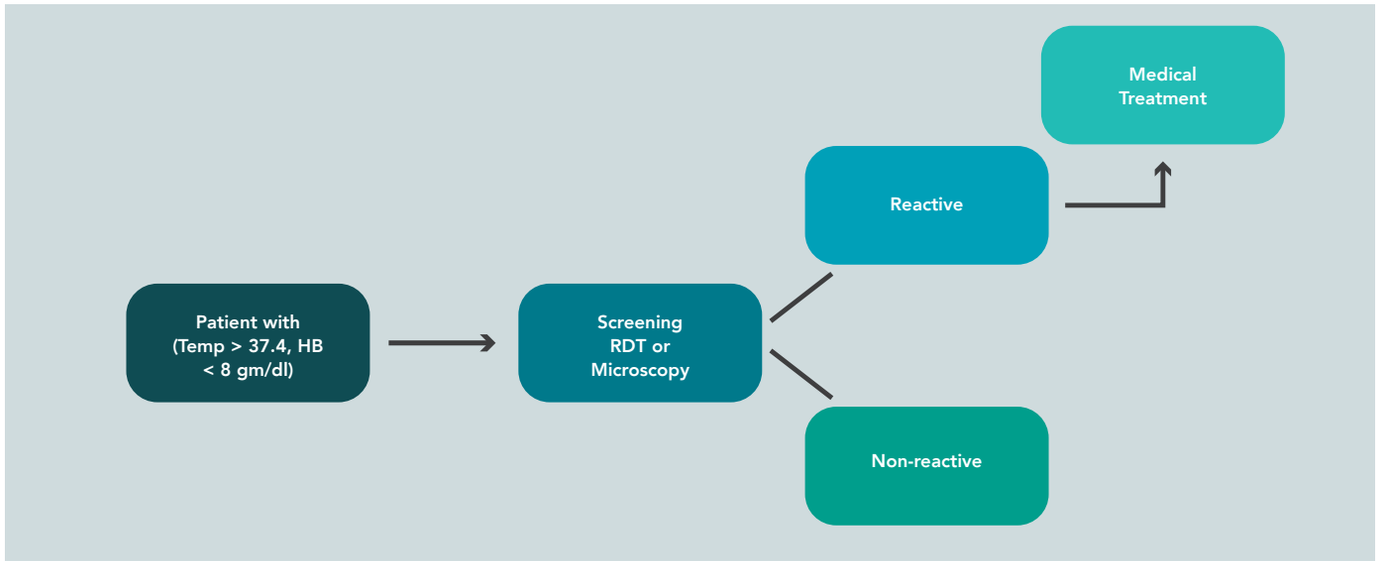


Impact Numbers (2024 - 2025)

5,958
Total screening

2,427
Total vaccinated

Malaria Process Map





Malnutrition

Partners:
Aziz and Razia Dharamsey Family Foundation

Trust for Malnutrition and Stunted Growth



Impact Numbers (2024 - 2025)

2,727 Patients Screened

1,425 Patients Enrolled

415 Total Recovered

3,336 Follow-up Visits

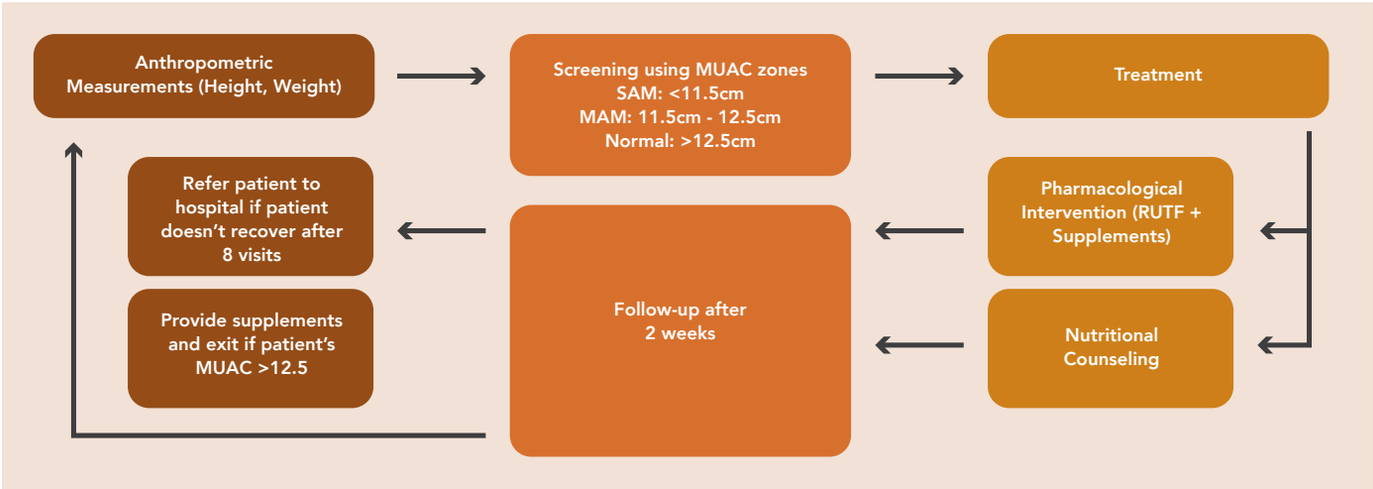
The Malnutrition Program was launched at the SHINE Garibsons Clinic in Gharo in 2022 in collaboration with Trust for Malnutrition and Stunted Growth (TMSG), and has since expanded to our Nagarparkar, Mansehra, and Koohi Goth clinics. Through this program, we aim to screen and rescue children suffering from SAM (Severe Acute Malnutrition) and MAM (moderate acute Malnutrition) in our program catchment area.

This year, we also launched the Malnutrition Center - Sehat Ghar, where we provide holistic care to malnourished children through;

- CMAM approach (screen, identify, treat, and followup malnourished children)
- Diarrhea treatment
- Anemia treatment
- IYCF counseling
- Maternal and child micronutrient supplementation
- Milestone analysis
- Identify and treat mild malnutrition

The Community Outreach Program works in conjunction with the Malnutrition Program and Center to screen children using basic health questionnaires and by physically examining the child, who is then treated by a nutritionist using counseling, RUTF (Ready To Use Therapeutic Packets), and supplementation.

Malnutrition Process Map



Patient Lifecycle

Number of sachets dispensed per patient depends on the zone and the category the patient falls in:

<11.5 Red Zone	11.5 - 12.5 Yellow Zone	>12.5 Green Zone

*MUAC: mid-upper arm circumference (MUAC)

Disengagement

- Recovered Patients: Malnourished patients receive nutritional interventions and their participation in the program is maintained until they reach the green zone (>12.5)
- They are thoroughly counseled and provided with micronutrient supplementation to address hidden deficiencies post-RUTF treatment at the exit visit.
- Default Patients: Those with 3 consecutive missed visits are removed from the program and are therefore considered default.

Our Malnutrition Program aims to achieve sustainable improvements in the nutritional status of children aged between 5 months to 59 months, ultimately eradicating malnutrition. This includes addressing immediate health concerns, promoting long-term nutritional well-being, and enhancing resilience against future nutritional challenges.

Kainat and Abdul's Recovery from Malnutrition at SHINE

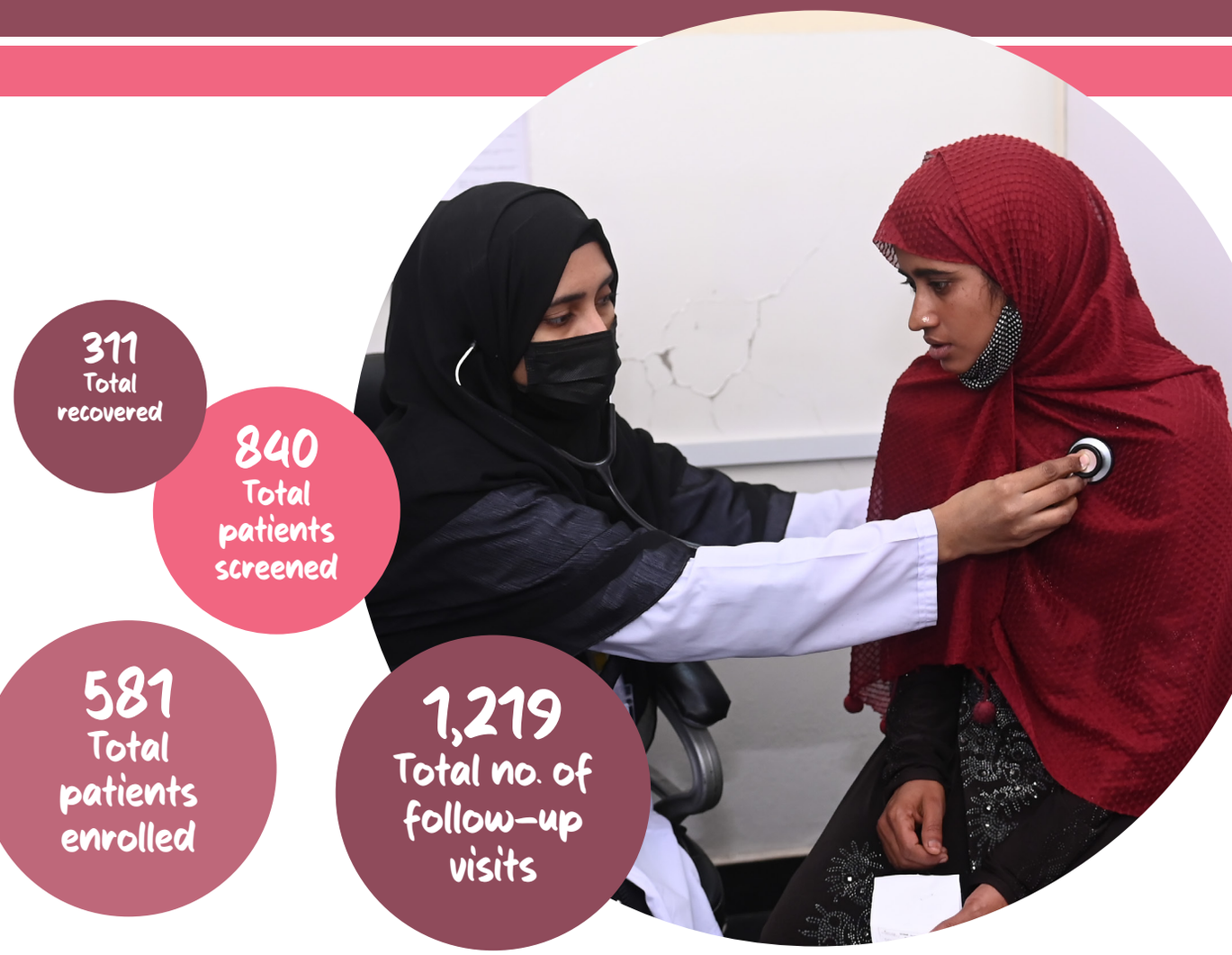


Kainat Saeed Ahmed was enrolled in the malnutrition program on 3rd September at the age of 7 months as a Severely Acute Malnourished (SAM) child. At the time of enrollment, her MUAC was 11.2 cm and weight was 4.6 kg, indicating a critical nutritional status. Through regular follow-ups, consistent counseling, and timely nutritional support, Kainat showed steady improvement. On 22nd December, she was declared recovered, with her MUAC improving to 13.4 cm and weight increasing to 6.4 kg. Her recovery highlights the importance of consistent follow-ups, caregiver compliance, and early intervention in managing severe acute malnutrition.

Abdul Basit, a 1-year-old child, was enrolled on 20th October as a Moderately Acute Malnourished (MAM) case. At enrollment, his MUAC was 11.5 cm and weight was 5.7 kg. With continuous monitoring, nutrition counseling, and adherence to recommended feeding practices, Abdul Basit showed significant improvement in a short period. He was declared recovered on 2nd December, achieving a MUAC of 12.8 cm and weight of 6.4 kg. This case demonstrates how early detection and timely nutritional interventions can effectively prevent the progression of malnutrition and support healthy growth.



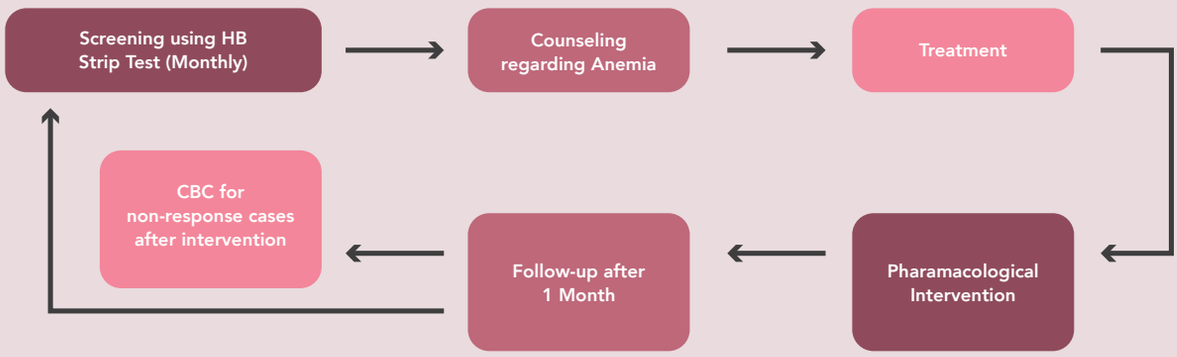
Anemia



SHINE introduced a new program for women of reproductive age in Nagarparkar this year. The research-based program addressed one of the most prevalent yet neglected public health issues affecting women between 13 - 45 years. Nationally, anemia affects nearly half of all women in this age group, with prevalence rates often exceeding 60% among pregnant women. Left untreated, anemia significantly increases the risk of maternal morbidity, low birth weight, postpartum hemorrhage, and intergenerational cycles of malnutrition.

Our program combined screening through hemoglobin strip testing, classification of anemia severity, and evidence-based treatment with iron and folic acid supplementation. Special emphasis was placed on socio-demographic and reproductive risk factors unique to the Tharparkar region, ensuring interventions were both culturally appropriate and sustainable. The program was designed not only to treat current cases but also to build preventive awareness in the community by engaging women in nutrition education and behavior change.

Anemia Process Map



A Medical Milestone

We completed screenings of 840 women of reproductive age in just 6 months, out of which 541 were anemic and enrolled in our program, making anemia present at a surprising rate of 64%.

Did you know?

After analysis, nearly 95% of women of reproductive age in Nagarparkar are anemic, with an average hemoglobin level of just 9.1 g/dL. The majority suffer from moderate (45%) or severe (26%) anemia, conditions strongly linked to undernutrition and low body mass index. Alarmingly, only 18% of women reported regular dairy intake, and this was significantly associated with anemia, while other food groups showed weaker links. These findings highlight how limited dietary diversity, food insecurity, and lack of awareness have created an extreme burden of anemia in desert communities, underscoring the urgent need for iron supplementation, food fortification, and nutrition education.

How Ashia Overcame Anemia



50 year old Ashia had been struggling with severe anemia. Her body had grown weak, simple tasks felt impossible, and every day was marked by exhaustion and worry. For months, her family watched helplessly as her condition continued to decline, unable to afford treatment.

Upon a SHINE Community Health Worker's visit to her village, Ashia was recommended a visit to the SHINE Humanity clinic, recently launched a short distance away from her home, where after a thorough assessment the doctor explained her condition calmly and clearly, ensuring her family understood every detail. For the first time in months, they felt relief, as Ashia was grateful to receive a diagnosis and a path forward.

Ashia's treatment began with an accurate diagnosis, proper medication, and regular follow-ups. The clinic staff stayed connected with the family, guiding them step by step, always ready to answer questions and offer reassurance.

By the time she completed the full course of treatment, Ashia was healthy, stable, much improved from her initial assessment. With deep emotion, she shared her gratitude:

"From the doctor to the entire staff, everyone treated us with love, respect, and professionalism. Allah has placed shifa in their hands. We are truly grateful that SHINE Humanity brings quality healthcare to our area."

Asthma and COPD Management

Launched in 2022, this program was in response to a baseline that showed that no intervention was in place for rural communities suffering from Asthma and other respiratory issues to decrease the morbidity caused by Asthma and COPD in rural communities.



The program aims to identify and treat people with respiratory illnesses and screening is conducted through a spirometry test. For patients who show obstructive or restrictive lung disease, we provide inhalers and life-saving medication, as well as educational material in the regional language on smoking cessation and other contributing factors.

Patients coming to the general OPD with a history of wheezing, shortness of breath, chest tightness, cough and/or exposure to smoking, open fire, are referred to the Asthma clinic by the General Practitioner where they undergo spirometry testing. Once the results have been confirmed by the consultants who supervise the program virtually, the patient is enrolled in the Asthma Program.

After the enrollment process concludes and a patient is registered in our program, we determine their treatment plan, which may include a prescription for an inhaler, medication, or a combination of both, depending on the severity of their condition. The treatment follows the GINA guidelines for a duration of three months.

Impact Numbers (2024 – 2025)

53
Total patients enrolled

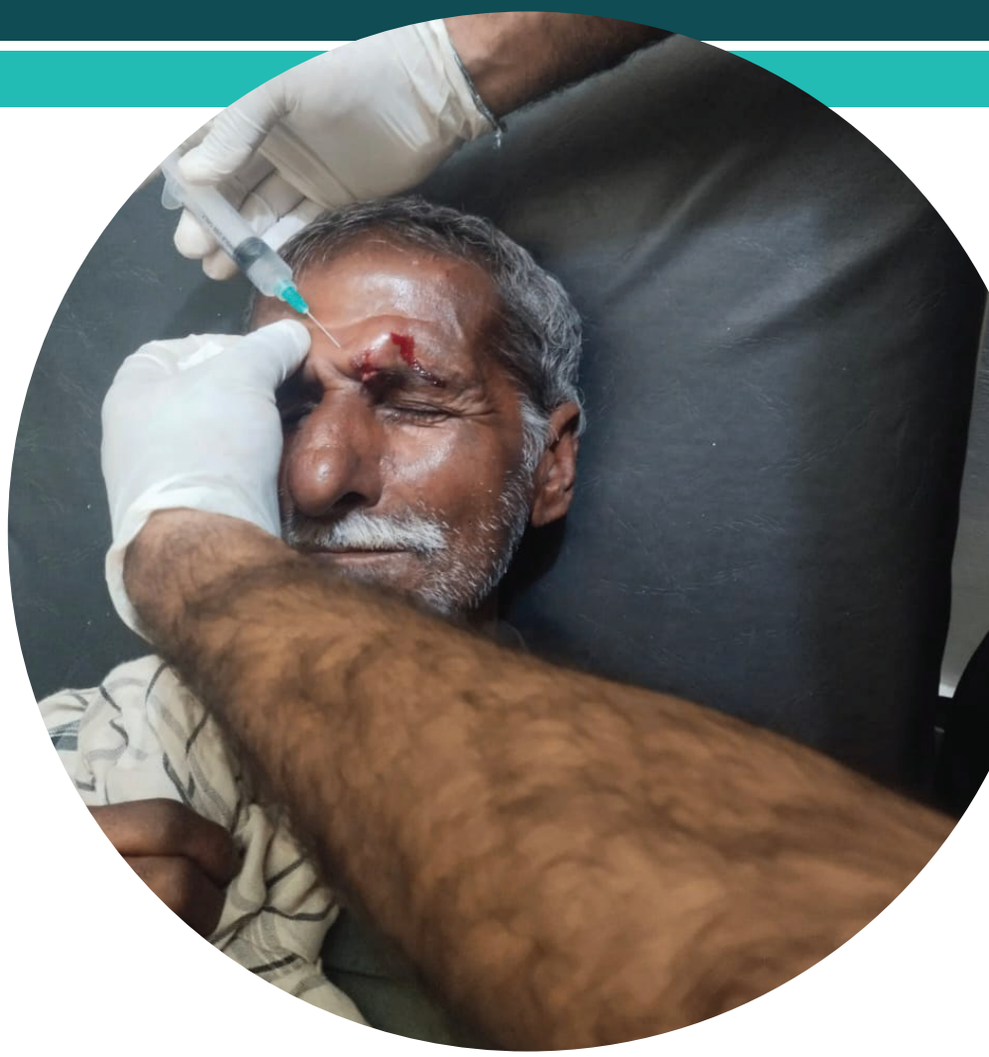
396
Total patients screened

53
Total no. of follow-up visits



Rabies Program

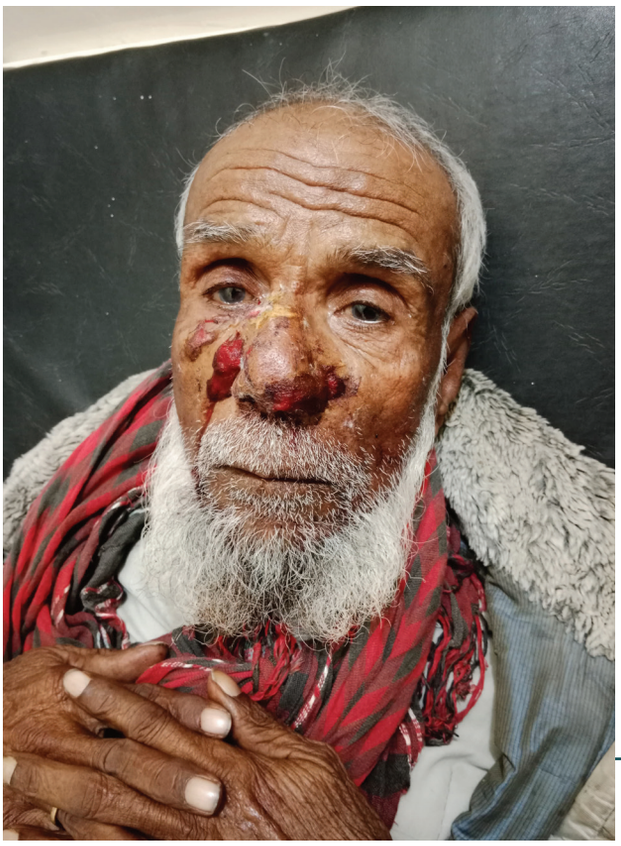
Rabies remains a critical public health concern globally, significantly impacting both human and animal populations. Despite being a preventable viral disease, Rabies is almost always fatal once symptoms appear, underscoring the importance of prevention and early intervention.



In the past year, we have expanded our rabies program, which initially was running only in Gharo, to Chiliya as well. Through comprehensive vaccination programs and community education initiatives, we have made notable strides in Rabies prevention and control. Our efforts reflect our unwavering commitment to safeguarding public health and ensuring a future free from this devastating disease. So far, we have successfully provided treatment to 73 dog bite patients this year, by providing them proper wound care, administering post-exposure prophylaxis in the form of Rabies Vaccine, rabies toxoid and tetanus toxoid.

Furthermore, we also conducted Anti-rabies training for 4 of our staff members through Indus Hospital.

Our work not only addresses the immediate needs of those affected by dog bites but also utilizes a robust awareness building mechanism for a preventative approach to avoid rabies-related deaths, ultimately contributing to the complete prevention of human Rabies through targeted case-based interventions and public awareness



Impact Numbers (2024 - 2025)

73
Total patients enrolled

61
Total patients (on-going)

12
Total patients recovered

Finding Help in Gharo: Allah Bakhsh's Rabies Treatment



24 year old Allah Bakhsh belongs to a small town in Gharo, Sindh. He works as a daily wage laborer and farmer, earning his livelihood through hard work.

One day, while walking along the road, he was suddenly attacked by a dog, which had mistakenly assumed that Allah Bakhsh was attempting to take her puppies, leading to the attack. During the incident, the dog bit Allah Bakhsh on the face, resulting in an injury to his nose.

Following the incident, he was taken to a nearby doctor, where he received basic first aid treatment. Considering the severity and sensitivity of the case, the doctor immediately referred him to the SHINE Humanity Garibsons Clinic for further management.

Upon arrival at our clinic, Allah Bakhsh was promptly assisted. A thorough initial assessment was conducted, after which the wound was properly washed with soapy water in accordance with standard protocol. As part of the recommended treatment, he was administered the RIG (Rabies Immunoglobulin) injection.

After Allah Bakhsh's condition became stable, he was provided with complete preventive guidance and follow-up instructions before being discharged from the clinic.

Tuberculosis (TB) Program

Partner:
Bridge Consultant

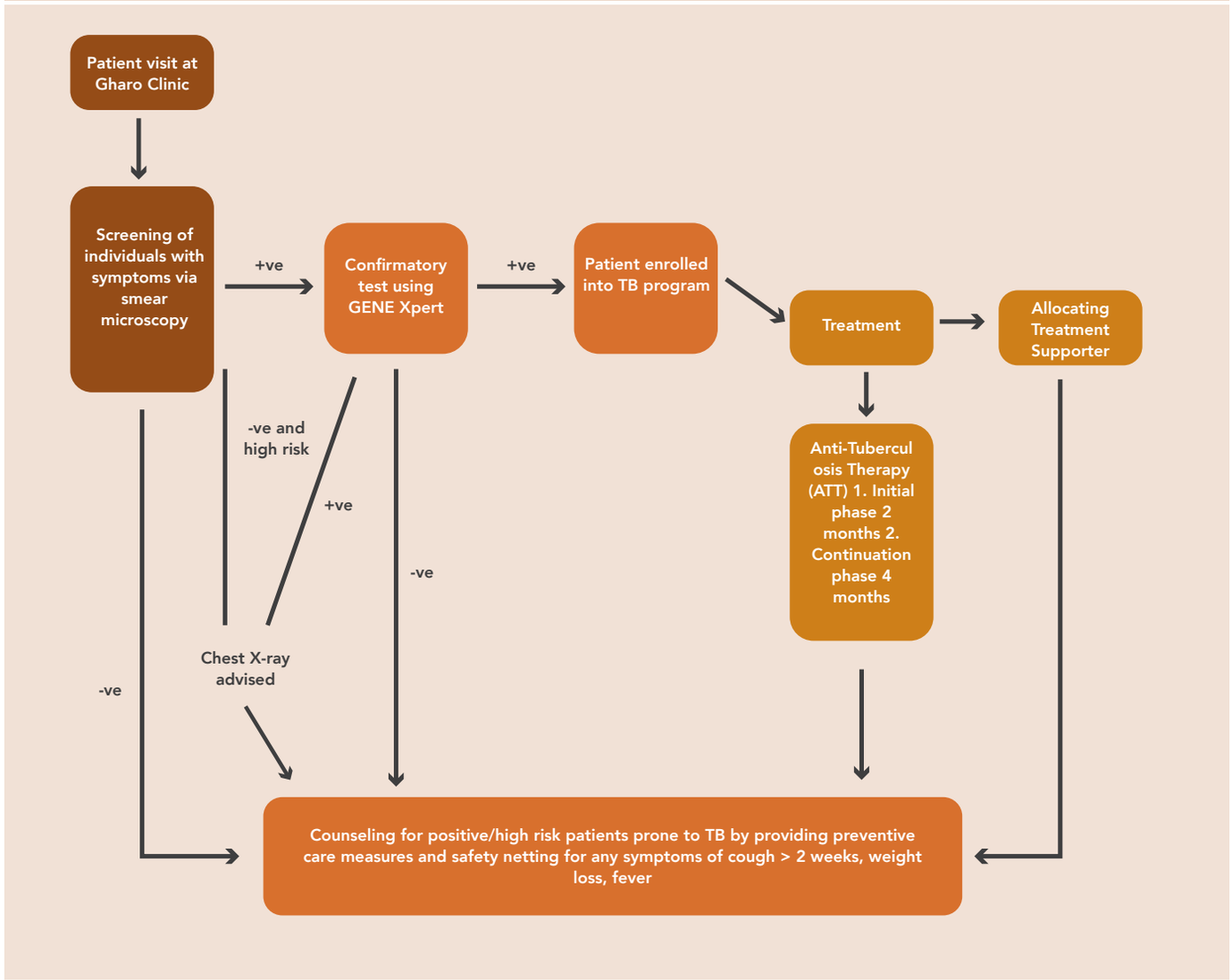


Pakistan remains among the top five high-burden countries for tuberculosis, with an estimated incidence of 264 cases per 100,000 population and prevalence around 340 per 100,000. TB causes nearly 47,000 deaths annually, and while over 600,000 cases are registered through the National TB Control Program, underreporting persists. These figures underscore the urgent need for greater awareness, early detection, and stronger health system responses.

Our TB program runs in partnership with Bridge Consultant. In the past year, we have screened 492 patients exhibiting symptoms and conducted sputum analysis. Of these, 22 tested positive for TB. Confirmatory tests using the Gene Xpert testing were then conducted to validate the diagnosis.

Patients confirmed with TB are enrolled in our program and initiated on a six-month course of medications. Each patient is assigned a treatment supporter and receives monthly follow-ups. Our program also includes contact tracing to screen and treat close contacts of the patients.

Process Map of Tuberculosis





HIV Program

Partner:
Govt. of Sindh



1,242
Total patients screened

SHINE Humanity initiated the HIV Program in March 2025 to respond to the growing HIV burden in Sindh. It combines awareness, prevention, screening, and linkage to care under one framework.

Community Health Workers conducted awareness sessions on safe practices, stigma reduction, and the importance of testing. Individuals were screened through confidential rapid tests, and those with positive results were referred to government-supported centers for confirmatory testing and enrollment in Antiretroviral Therapy (ART).
Patients receive adherence counseling, partner notification support, and ongoing psychosocial guidance to manage stigma and treatment fatigue.

Helping Babies Survive (HBS)



17
Total workshops conducted

HBS has been a part of SHINE Humanity's maternal and child health strategy. It equips healthcare providers and medical students with lifesaving neonatal care skills.

Conducted in collaboration with Jinnah Sindh Medical University, the program follows WHO and American Academy of Pediatrics–endorsed modules.

The process includes training sessions with lectures, hands-on practice with neonatal manikins, and practical assessments. Participants (nursing students, OBGYN residents, house officers, and MBBS students) learn neonatal resuscitation, essential newborn care, and infection prevention. This ensures that new graduates entering Pakistan's healthcare system are competent in managing the most common causes of neonatal mortality: asphyxia, sepsis, and hypothermia.

This year, our trainers increased their training sessions to reach more beneficiaries, visiting 2-3 institutions each month.

Family Planning Program

Partners:
Vital Pakistan Trust

Population Welfare Department



597
Total registered users

The Family Planning Program started in collaboration with PWD on 24th June 2024, and later, on 1st July 2025 turned into a collaboration with Vital Pakistan. It integrates reproductive health into SHINE Humanity's clinical and outreach services.

Our program, in collaboration with Vital Pakistan Trust, is being implemented across seven clinics located in Gharo, Koohi Goth, Sujawal, Chilya, New Jatoi, Diplo, and Nagarparkar, as well as through community outreach by CHWs.

These CHWs are providing awareness sessions, counseling, and family planning methods including RC and medications within the community. To strengthen their capacity, SHINE Humanity and Vital Pakistan jointly conducted three days of in-person training in Karachi on 6th, 7th, and 8th August.

During these sessions, CHWs were trained on data entry using ECR and the Vital app, received counseling demonstrations, participated in FGDs and discussions, and learned about long-term family planning methods. Each clinic has three CHWs along with a Community Health Supervisor (CHS), who have been assigned monthly case targets to achieve.

Through this program, we aim to build the capacity of our staff and educate the community on Family Planning, along with breaking the stigma in our communities around women's health and birth spacing.

Umeed Se – Antenatal Program

Partner:
Rotary Club of Sunset Millennium





153
Total patients enrolled

SHINE Humanity has launched an Antenatal Care program this year, on 17th April 2025 in partnership with the Rotary Club of Karachi Sunset Millennium, the 'Umeed Se' Program is SHINE Humanity's flagship antenatal care initiative focused on improving pregnancy outcomes in underserved communities. Recognizing Pakistan's high maternal mortality rate (186 per 100,000 live births, UNICEF 2023) and the critical impact of poor maternal nutrition, this program provides structured, trimester-specific care to expectant mothers.

The program begins with an initial assessment in the first trimester, where women are screened for weight, height, and hemoglobin levels. Nutritional and medical support includes folic acid, vitamin B complex, and anti-nausea medication as needed. Follow-up visits are scheduled every six weeks, ensuring that each mother's health is continuously monitored.

In the second and third trimesters, women receive comprehensive supplementation: iron, calcium, Unimapp multivitamins, and Supplement M. Each trimester visit also includes the administration of a high-dose Vitamin D3 injection and routine CBC testing to track progress. Continuous dietary counseling and monitoring help prevent anemia, low birth weight, and pregnancy complications, while preparing mothers for safe delivery and improved newborn health.

The program not only provides supplements and monitoring but also empowers women with health education, enabling them to make informed decisions for themselves and their babies. By ensuring consistent, structured care across all trimesters, the program aims to reduce maternal malnutrition, improve birth outcomes, and strengthen the health of both mothers and infants.



Highlights 24-25



Partnerships



SHINE Humanity and Rotary Club Karachi collaborate to Uplift Maternal Health

SHINE Humanity, in partnership with Rotary Club Karachi, introduced the Umeed Se Program, a new maternal health and nutrition initiative focused on supporting expectant mothers in underserved communities across Pakistan.

With high maternal mortality and poor nutritional access still posing serious risks, we stepped in to provide trimester-specific prenatal supplements, health check-ups, and nutritional counseling, all in one care package.



Partnering with Shan Foods Team Up to Bring Quality Healthcare to Kunri, Sindh

In collaboration with Shan Foods, we inaugurated ShanShares Shifah Gah, our newest clinic in rural Pakistan. Located in Kunri, this new facility is dedicated to providing accessible and quality primary healthcare to underserved communities.

This impactful partnership highlights the power of collective action in delivering sustainable, community-centered healthcare solutions. With Shan Foods' support, we continue to bridge critical healthcare gaps, uplift vulnerable populations, and drive long-term positive change where it's needed most.



Serving Karachi Eat 2025 as Official First Aid Provider

SHINE Humanity proudly served as the official first aid partner for Karachi Eat 2025, held at Beach View Park. With our Mobile Urgent Care (MUC) unit on-site, we provided timely medical assistance to attendees, ensuring a safe and enjoyable experience for everyone.

This partnership highlights SHINE's commitment to community health and safety, showcasing our dedication to providing accessible and quality healthcare services. We are grateful to Karachi Eat for trusting us to be a part of this vibrant event and allowing us to make a positive impact.



Team SHINE meets with National Foods to expand our healthcare services

Team SHINE met with representatives from National Foods Limited to explore impactful avenues for collaboration aimed at expanding access to quality healthcare in underserved communities. The meeting centered around aligning SHINE Humanity's healthcare expertise with National Foods' strong commitment to corporate social responsibility, with the goal of building sustainable, community-centered health initiatives. From supporting medical camps and maternal-child health programs to strengthening public health awareness, both organizations discussed potential strategies to create long-term impact. This promising partnership reflects a shared vision of fostering healthier, more resilient communities across Pakistan.



Vital Pakistan Trust visit to our flagship clinic in Gharo

SHINE Humanity was honoured to host the team from Vital Trust Pakistan at its flagship clinic in Gharo. United by a shared commitment to accessible, quality healthcare, both organizations discussed aligned efforts to improve health outcomes for underserved communities. Vital Trust's work in Rehri Goth to reduce maternal and child mortality closely complements SHINE Humanity's mission, reinforcing a collective vision to strengthen healthcare systems and empower communities for a healthier future.



SHINE Humanity x AIESEC (IBA) Bring Medicathon 2025 to Tando Allah Yar

SHINE Humanity proudly partnered with AIESEC (IBA) for Medicathon 2025, a youth-led initiative focused on delivering essential healthcare services to underserved communities in Tando Allah Yar. The collaborative medical camp offered vital primary care to individuals and families lacking regular access to healthcare, embodying SHINE Humanity's mission of accessible treatment for all. The event also brought together enthusiastic medical students and volunteers, highlighting the transformative power of youth engagement in advancing public health and strengthening community well-being.



Events



Helping Babies Survive Training at Ziauddin University

Under the Sunehra Lamha program, SHINE Humanity, in collaboration with JSMU master trainers, conducted a Helping Babies Survive training at Ziauddin University. The session equipped medical students with essential neonatal resuscitation skills to save newborn lives during the critical first minute after birth, with hands-on demonstrations ensuring practical readiness for emergency situations.



Hepatitis Awareness Camp in Chilya, Sindh



On August 15, SHINE Humanity and VFAHT-JSMU hosted a hepatitis awareness, screening, and vaccination camp in Chilya, Thatta. More than 100 locals were educated on prevention and treatment, and over 30 people were screened and vaccinated, helping to address stigma and misinformation around hepatitis.

Our Mobile Urgent Care Unit Responds to Floods in Sujawal, Sindh

The devastating monsoon rains displaced thousands across rural Sindh. On the request of the Sindh Government, SHINE deployed its Mobile Urgent Care Unit (MUC) to Kot Alama village in Sujawal, treating nearly 200 patients. The unit played a vital role in preventing the spread of waterborne diseases and providing immediate relief to flood-affected families.



Expanded Programme on Immunization (EPI) Launched at Sehat Center, Mansehra

In partnership with the DHO office, the Expanded Programme on Immunization (EPI) was launched at Sehat Center, Mansehra.

This program ensures that children in the mountainous region remain immunized against preventable diseases, further strengthening SHINE's healthcare ecosystem in the region.



Building Partnerships to Expand Quality Primary Healthcare in Northern Pakistan

In September, SHINE Humanity advanced its partnerships and expansion efforts through the inaugural meeting of the Health for All Collective in Islamabad, followed by the official inauguration of the Sehat Center in Mansehra. The meeting convened public health stakeholders and thought leaders to formally introduce the Sehat Center and strengthen collaboration toward improving access to quality primary healthcare nationwide.

Subsequently, the Sehat Center was officially inaugurated by Mr. Kalbe Dharamsey, Chairman of SHINE Humanity, and Mrs. Hina Dharamsey. As SHINE's largest facility to date, the two-doctor polyclinic provides outpatient consultations, laboratory services, and free medications to underserved mountainous communities. Since opening in July, the center has served over 900 patients, marking SHINE Humanity's first expansion beyond Sindh.



Atlanta Chapter Mobilizes Donor Support Through Two Successful Fundraisers

We successfully hosted our third fundraiser in Atlanta, Georgia with the generous SHINE Humanity's Atlanta Chapter played a vital role in advancing the organization's mission by hosting two successful fundraising events during the year. These events demonstrated strong community engagement and donor commitment to expanding access to quality preventive and primary healthcare for underserved populations in Pakistan.

The fundraisers brought together dedicated supporters and provided an opportunity to reflect on SHINE's impact and future direction. Attendees heard from organizational leadership, including Dr. Faisal Khan, Chairman; Dr. Salman Naqvi, Founding Member; and Naila Ahmed, Executive Director, who shared insights into SHINE's progress and the critical importance of sustained support.





SHINE Partners with Karachi Eat 2025 as Official First Aid Provider

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LA Fundraiser

Our LA Fundraiser was a tremendous success, thanks to the support of our US Chapters. With the support of our incredible donors, we continue providing life-saving healthcare to those who need it most. Your generosity fuels our mission - together, we are making a real difference!



SHINE Humanity Provides Vital First Aid Support at Karachi Literature Festival 2025

SHINE Humanity was proud to serve as the official first aid partner at the esteemed Karachi Literature Festival 2025. Our dedicated team ensured a safe and secure environment for all attendees, providing immediate medical assistance throughout the event.

Our state-of-the-art Mobile Urgent Care (MUC) unit was stationed on-site, offering prompt and expert care to those in need. This partnership with KLF underscores SHINE Humanity's commitment to making quality healthcare accessible to all communities, highlighting the importance of good health in every aspect of life - including cultural and literary events.



Iftar Fundraiser – Strengthening Our Mission

As the first Ashrah of Ramadan ended, we came together to raise essential funds for the underserved communities in rural Pakistan. This support will ensure that those in need receive vital medical care.

Through the kindness of our incredible donors, we are able to extend our reach, offering consultations, treatments, and medicines to those who lack access to basic healthcare.

We deeply appreciate our donors and their commitment to our cause!



CEO Perspective Shared on FM91's "Dost Kya Scene Hai with Dino"

Our CEO, Faheem Khan, was featured on FM91's radio program Dost Kya Scene Hai with Dino, where he highlighted our mission and impact in expanding access to quality healthcare for underserved communities in Pakistan. The discussion emphasized the importance of accessible medical services and community-driven solutions to address critical healthcare gaps.

We appreciate FM91 and the program's host for providing a platform to amplify awareness of our work. Such media engagements play an important role in strengthening public understanding, fostering support, and advancing collective efforts toward improved healthcare outcomes.



SHINE Humanity relaunches its Public Health internship program with a seminar at Jinnah Sindh Medical University

SHINE Humanity has officially relaunched its Public Health Internship Program with an engaging seminar at Jinnah Sindh Medical University (JSMU), in collaboration with JSMU Communications. Aimed at broadening medical students' understanding of healthcare beyond diagnosis and treatment, the program offers a unique blend of academic and field-based learning.

Each month, two dedicated interns will be selected to participate in research writing workshops, community outreach initiatives, and hands-on field visits to SHINE Humanity's clinics across Sindh. Through this immersive experience, students will gain valuable insights into real-world public health challenges and contribute meaningfully to improving healthcare access in underserved communities.



SHINE Humanity's CEO Faheem Khan Speaks at Impact 2025 on Purpose-Driven Leadership

Faheem Khan, Chief Executive Officer at SHINE Humanity, recently took the stage at Impact 2025 to share his insights on leading with purpose and driving change through humanitarian innovation.

With a vision grounded in service, sustainability, and compassion, Faheem spoke about the importance of aligning strategy with empathy to create lasting impact in communities that need it most.

We are proud to have him represent SHINE Humanity and contribute to vital conversations that bridge.





Conducting A Free Malnutrition Camp in Chilya, Sindh with Support of the Packages Foundation

SHINE Humanity successfully conducted a one-day Free Malnutrition Camp in Chilya, offering vital screenings, nutritional assessments, and care to children and families in need. This initiative aimed to address rising malnutrition concerns in underserved communities and provide timely, life-improving support.

The success of this camp was made possible through the generous support of the Packages Foundation. Their contribution played a key role in helping SHINE deliver essential healthcare services to those who need it most.



Advancing Midwifery Training Across Karachi

SHINE Humanity successfully concluded its second training session at Lady Dufferin Hospital & Midwifery, uniting participants from leading midwifery institutes across Karachi. Hosted by Lady Dufferin Hospital, the session reflects SHINE's ongoing commitment to advancing healthcare training across the city.

In 2024, SHINE trained 273 participants through seven focused workshops. Remarkably, within just the first 1.5 months of this year, from mid-April to May 31, 451 participants have already been trained. These participants represent top institutions, including JSMU Nursing Institute, City Institute of Nursing & Health Sciences, Ziauddin Nursing Institute, Ziauddin University (MBBS), Lady Dufferin Hospital, and others.

Backed by a dedicated team of 53 active trainers and supported by 10–12 recently retired professionals, SHINE Humanity is equipped to expand its efforts even further. Each session reinforces SHINE's mission to enhance healthcare education and build stronger, more skilled medical communities across Pakistan.





Employee Engagement



World Mental Health Day – Prioritising Mental Health in the Workplace

For World Mental Health Day, Ms. Saba Khalid, Associate Clinical Psychologist at CareForHealth, held a workshop on Maximizing Mental Health and Well-being for our Head Office employees. With topics ranging from mindfulness techniques, positive self-affirmations, and building resilience, our staff felt empowered and more knowledgeable about their own mental well-being.

With the revamp of SHINE's Mental Health Program, we are committed to bringing this vital service to rural Pakistan, and ensure we reduce stigmas attached to mental well-being and promoting ethical counseling.

Thank you to CareForHealth for collaborating with SHINE for an engaging session and creating a healthier workspace.



JPMC-Led Training Empowers Physicians and Paramedics in Family Planning Services

SHINE Humanity's physicians and paramedics recently completed a full six-day training in counseling skills, LARC (Long-Acting Reversible Contraception), PPFP (Postpartum Family Planning), PAFP (Post-Abortion Family Planning), and infection prevention practices.

This workshop, organized by the Population Welfare Department (PWD) and delivered by JPMC, demonstrates our dedication to ongoing learning and professional development. By empowering our healthcare providers, we ensure high-quality, patient-centered treatment.



SHINE Ki Iftar – Honouring Our Clinic Staff

At SHINE Humanity, our impact is only possible because of our incredible clinic staff. This Ramadan, we gathered to celebrate their dedication, compassion, and unwavering commitment to healthcare.

Their efforts transform lives daily and were instrumental in our KHI Awards 2025 win. This iftar was our way of saying thank you for the care they provide and the difference they make - ensuring accessible, quality healthcare for all.





Celebrating Women's Day at the SHINE Head Office

This International Women's Day, we honoured the dedication and hard work of our female staff with a small token of appreciation. Their passion and commitment drive our mission forward every day.

Here's to empowering women, uplifting communities, and making a difference together!





Shaping the Future of Healthcare Through Strategic Dialogue with Dr. Bari from Indus Hospital

SHINE Humanity remains committed to expanding its services and programs to ensure that quality primary healthcare is accessible to all, especially in underserved regions. In line with this mission, Team SHINE recently had a meaningful conversation with Dr. Abdul Bari, CEO of Indus Hospital & Health Network, to explore avenues for collaboration and knowledge sharing. The discussion focused on exchanging insights around sustainable healthcare delivery models, community outreach, and capacity building. Engaging with visionary leaders like Dr. Bari reinforces our belief in the power of collective action and collaboration to strengthen healthcare systems and drive lasting impact across communities.

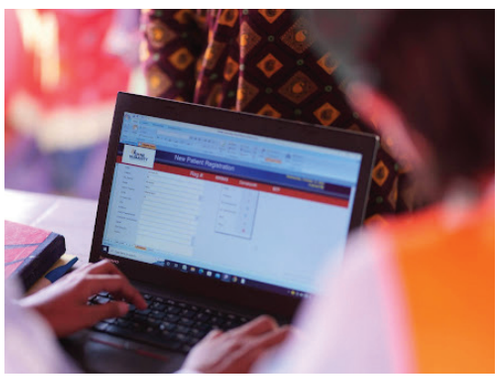


New Services



Digitizing Healthcare in Rural Sindh with an expansion of EMR at SHINE Clinics

SHINE Humanity expanded the use of Electronic Medical Records (EMR) across its rural Sindh clinics, including Diplo, Sehwan, and New Jatoi. EMR allows our healthcare teams to systematically collect and store patient data, track disease trends, and contribute to national and international research. By reducing reliance on paper records, the system minimizes errors, ensures confidentiality, enhances transparency with donors, and reduces environmental impact.





Medical Camp in Badin



In partnership with NOWPDP, SHINE Humanity organized a medical camp in Badin, Sindh, serving 330 patients. Our Mobile Urgent Care Unit, supported by the Aziz and Razia Dharamsey Family Foundation, was equipped with physicians, a pharmacy, and lab facilities, making it possible to provide healthcare in flood-affected and inaccessible areas.

Engagement with Governor Sindh Leads to Inauguration of Mobile Urgent Care Unit

We met with the Honorable Governor of Sindh, Mr. Kamran Tessori, to discuss shared efforts to advance healthcare access and strengthen community services across Sindh, including initiatives focused on youth empowerment.

Following this engagement, we inaugurated our Mobile Urgent Care Unit (MUC) at the Governor House, with Governor Tessori leading the ribbon-cutting ceremony. The unit provides essential medical care to staff, residents, and visitors, reinforcing our commitment to accessible, high-quality healthcare through innovative service delivery.



SHINE Launches Clinic in New Jatoi, Sindh

The SHINE Humanity team came together to establish our newest clinic in Jatoi. From setting up branding to final touches, every team member played a role in bringing Sehat Center, New Jatoi to life.

This milestone was made possible through the generous support of Karachi Relief Trust, helping us bring essential healthcare closer to those in need.



Strengthening Primary Healthcare in Sehwan, the City of Saints

SHINE Humanity is excited to announce the expansion of its healthcare services with the launch of a new clinic in Sehwan, a city rich in history and culture in Sindh. The newly established SHINE Humanity Feroza Abbasi Health Center marks a meaningful advancement in the organization's ongoing efforts to deliver quality and accessible primary healthcare to those who need it most.

This achievement has been made possible thanks to the remarkable generosity of the Abbasi family, whose support has been instrumental in bringing this vital healthcare facility to life.





Bringing accessible healthcare to Diplo, Sindh

SHINE Humanity successfully launched the Ghulam Muhammad Lot Clinic in Diplo, Sindh, expanding access to quality primary healthcare in an underserved region.

The clinic provides OPD services, diagnostic laboratory facilities, and free medications. Aligned with SHINE's evolutionary healthcare delivery model, the clinic also integrates targeted healthcare programs developed in response to identified local disease trends.



SHINE Launches Mental Health Initiative

In collaboration with IRD Global, we successfully completed a three-day intense training session for our dedicated trainers, community health workers, nurses, and nutritionists. This marks the formal beginning of our Mental Health Program, a significant step forward in our commitment to delivering accessible and effective mental health support in rural Pakistan.

Through this program, we hope to equip our employees with improved skills and knowledge, allowing them to provide compassionate, effective, and holistic care to all of our beneficiaries. As we expand our services, we remain committed to enhancing the mental health and well-being of the communities we serve.



Awards & Achievements



Engaging with Health Leadership

SHINE Humanity's leadership met with Dr. Azra Fazal Pechuho, Provincial Minister for Health, and Ms. Nida Khuhro, Parliamentary Secretary, to discuss SHINE's ongoing efforts to expand access to quality primary healthcare. The Minister appreciated SHINE Humanity's work and expressed support for continued collaboration. SHINE remains committed to delivering equitable, high-quality healthcare services to underserved communities across Sindh, reaffirming our belief that Sehat Sab Ka Haq.



Solar Power Installed at Gul Lot Clinic, Nagarparkar, Sindh

The Gul Lot Clinic in Nagarparkar was powered through a solar energy system to ensure a reliable and sustainable electricity supply for uninterrupted healthcare service delivery. In remote areas such as Nagarparkar, access to stable electricity remains a persistent challenge.

The installation of solar panels addressed this gap by enabling consistent clinic operations. This renewable energy intervention enhanced the clinic's sustainability and operational efficiency, made possible through the generous support of SHINE Humanity's donors.



Distinction in Poster Presentation at Liaquat National Hospital Symposium

We were recognized at the Liaquat National Hospital Symposium as our Public Health Specialist, Dr. Farwa Shahid, presented key findings on the prevalence of undiagnosed Type 2 Diabetes, Hyperlipidemia, and Hypertension in rural Sindh. Her presentation earned the Best Poster Presentation Award, underscoring SHINE's commitment to addressing critical public health challenges and promoting healthier, well-informed communities.



Recognition for Excellence in Public Health at KHI Awards 2025

The K- Electric annual KHI Awards honour and support organisations that are making a significant impact on the city of Karachi, its people, and the environment through initiatives across multiple sectors. In recognition of this commitment to positive change, we were honoured with the KHI Awards 2025 in the Public Health (Primary Healthcare) category, acknowledging our dedication to providing accessible, high-quality healthcare services to underserved communities across Pakistan. This recognition reflects the collective efforts of our team, partners, and supporters in strengthening primary healthcare systems and advancing SHINE Humanity's mission to create lasting, meaningful impact.



Amplifying SHINE Humanity's Impact on Shan-e-Ramzan Live

SHINE Humanity was proudly featured on ARY Digital's Shan-e-Ramzan, with COO Faheem Khan and Public Health Specialist Dr. Farwa joining hosts Waseem Badami and Iqrar-ul-Hassan for an insightful discussion. The live session highlighted SHINE's mission, the impact of Zakat in healthcare, and how generous contributions can transform lives. We are grateful for the opportunity to share our work during this blessed month and thank everyone who tuned in to support our cause.



Connecting with Emerging Talent at Pakistan's First Reverse Career Expo

We were honoured to take part in Pakistan's First-Ever Reverse Career Expo 2025, held at the National Aerospace Science & Technology Park (NASTP) in Karachi. This groundbreaking event placed candidates with disabilities at the forefront, giving them a platform to showcase their skills and experiences directly to recruiters.

By flipping the traditional career fair model, the expo fostered a more inclusive hiring environment, one where talent was recognized for its true value, beyond stereotypes or limitations.





UK Meet & Greet Strengthens Donor and Community Engagement

We celebrated the success of our first-ever UK Meet & Greet, graciously hosted at the home of Dr. Farheen Mirza-Rizwan. The event united supporters and friends committed to advancing access to compassionate healthcare for underserved communities. It also marked the official introduction of SHINE Humanity UK Trustees, Dr. Anjum Memon, Dr. Imran Aziz, Dr. Farheen Mirza-Rizwan, and Maryam Ijaz, whose leadership will guide the organization's efforts in the region. This milestone gathering signifies the beginning of a promising chapter, as SHINE Humanity UK works to broaden its reach and amplify its impact.





Testimonials



Syeda Dua e Zehra

I joined Helping Babies Survive in 2020 after attending an awareness session that genuinely felt meaningful and “real,” not just another talk. Since then, I’ve had the privilege of serving as a Master Trainer, participating in multiple training sessions across different hospitals. We trained midwives, doctors, and nurses on essential neonatal care, with a strong emphasis on the “golden minute” and why those first moments after birth can be critical.

This experience helped me grow in ways I didn’t expect. Beyond clinical content, I built real confidence in teaching, breaking down concepts clearly, explaining the “why” behind practices, and engaging healthcare teams with different levels of experience.

I strongly recommend joining this organization. It’s genuinely fun to be part of, and it feels impactful. HBS has now even grown into different sub-groups, and the work now goes beyond hands-on teaching into research and marketing as well, which makes it even more valuable if you want to contribute academically and practically.

What I appreciate about HBS is that they’re not limiting efforts to major centers. They also hold multiple awareness and training sessions in rural and underdeveloped areas too. That’s the direction that matters, and it’s clear that HBS is only going to expand its impact further.

Lamia Sehban



I am Lamia Sehban, and a Final year medical student from Jinnah Medical University.

I got to know about SHINE Humanity from their project Helping Babies Survive. I have been working with helping babies survive for 3 years now. And my experience with SHINE has been nothing short of transformative and enlightening.

Not only did I learn about large data sets of patients across the clinics. I got to visit the clinics in person. I got to see first hand how SHINE Humanity operates and how they are serving the underserved communities.



Fatimah Kashif Rasool

Working with the Helping Babies Survive program was a deeply meaningful for me. In a country like Pakistan, which ranks 18th in neonatal mortality, it felt like I was doing my part not just as a medical professional, but as a citizen committed to the wellbeing of our community.

Serving as a Master Trainer allowed me to grow in ways beyond clinical knowledge. I developed my presentation, teaching and mentoring skills, and had the privilege of training fellow medical students who would one day take over my role and continue this work.

Knowing that the impact would extend beyond my own efforts, every person I trained could go on to save a newborn's life. It was rewarding seeing hesitant trainees grow confident enough to act in emergencies.

Our Partners




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& HEALTH NETWORK

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SINA
Health, Education
& Welfare Trust

Mehran
مہران
Established
in 1975


INFAQ
Foundation

SHIFA TAMEER-E-MILLAT UNIVERSITY
STMU

THF
THE
HEALTH
FOUNDATION
for a Hepatitis-Free Pakistan

EHSAAS

HUSAINI
KEEPING HOPE ALIVE SINCE 1979

Hunar
ghar

FRIP

GARIBSONS (PVT) LTD

SHJ
SALIM
HABIB
UNIVERSITY
(FORMERLY BARRETT HODGSON UNIVERSITY)

NRSP
National Rural Support Programme

nowpdp
A PART. NOT APART.

IRD
Interactive Research & Development

CPI
COMMUNITY
PARTNERS
INTERNATIONAL

CHEST
FOUNDATION

JINNAH SINDH MEDICAL UNIVERSITY

JDC
FOUNDATION
PAKISTAN

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Worldwide

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kahani

Martin Dow
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SAVERA
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AZIZ & RAZIA DHARAMSEY
FAMILY FOUNDATION

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PACKAGES FOUNDATION





Financials

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Independent Auditor's Report to the Board of Directors of Shine Humanity Pakistan

Opinion

We have audited the annexed financial statements of Shine Humanity Pakistan (the Society), which comprise the statement of financial position as at June 30, 2025, and the statement of income and expenditure, the statement of changes in net surplus and the statement of cash flows for the year then ended, and notes to the financial statements, including material accounting policy information.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Society as at June 30, 2025, and its financial performance and its cash flows for the year then ended in accordance with the approved accounting and reporting standards as applicable in Pakistan.

Basis for Opinion

We conducted our audit in accordance with the International Standards on Auditing (ISAs) as applicable in Pakistan. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Society in accordance with the International Ethics Standards Board for Accountants' Code of Ethics for Professional Accountants as adopted by the Institute of Chartered Accountants of Pakistan (the Code), and we have fulfilled our other ethical responsibilities in accordance with the Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Management and the Board of Directors for the Financial Statements

The Board of Directors is responsible for the preparation and fair presentation of the financial statements in accordance with the approved accounting and reporting standards as applicable in Pakistan, and for such internal control as the Board of Directors determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

The Board of Directors is responsible for overseeing the Society's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

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

A. F. FERGUSON & CO., Chartered Accountants, a member firm of the PwC network, State Life Building No. 1-C, I.I. Chundrigar Road, P.O. Box 4716, Karachi-74000, Pakistan
Tel: +92 (21) 32426682-6/32426711-5; Fax: +92(21) 32415007

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KARACHI LAHORE ISLAMABAD

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

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Society's internal control.

- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.

- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Society's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Society to cease to continue as a going concern.

- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

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

The engagement partner on the audit resulting in this independent auditor's report is Syed Muhammad Hasnain.



A. F. Ferguson & Co.
Chartered Accountants
Karachi

Dated: June 03, 2026

UDIN: AR202510073TmPrFpls8

Statement of Financial Position

As at June 30, 2025

	Note	2025 Rupees	2024 Rupees
ASSETS			
NON-CURRENT ASSETS			
Property, plant and equipment	3	**59,120,428**	39,247,247
Intangible assets	4	**4,602,693**	4,920,732
Long-term deposits		**1,903,000**	1,174,000
		65,626,121	45,341,979
CURRENT ASSETS			
Inventory	5	**19,107,123**	12,435,927
Advances and prepayments	6	**5,488,245**	2,839,530
Donation receivables	7	**33,483,483**	29,277,650
Short-term investment	8	**82,594,072**	68,373,842
Cash and bank balances	9	**16,217,851**	11,054,807
		156,890,774	123,981,756
TOTAL ASSETS		**222,516,895**	169,323,735
LIABILITIES			
NON-CURRENT LIABILITIES			
Fixed assets' fund	10	**5,769,661**	6,889,315
CURRENT LIABILITIES			
Accrued and other payables	11	**29,533,994**	24,597,074
Deferred liablility - Restricted	12	**12,424,875**	12,424,875
Advance from donors - Restricted		**3,549,237**	-
		45,508,106	37,021,949
TOTAL LIABILITIES		**51,277,767**	43,911,264
CONTINGENCIES	13		
NET ASSETS		**171,239,128**	125,412,471
NET ASSETS			
Accumulated surplus		**171,239,128**	125,412,471
		171,239,128	125,412,471

The annexed notes 1 to 24 form an integral part of these financial statements.

Chairman

Director

Statement of Income & Expenditure

For the Year Ended June 30, 2025

	Note	2025 Rupees	2024 Rupees
INCOME			
OPD income		**8,166,493**	4,748,314
Donation income	14	**248,674,431**	167,386,664
Zakat	15	**92,537,493**	80,652,048
Profit on investment	16	**9,567,536**	7,621,576
Gain on disposal of property, plant and equipment		**-**	2,455,531
Unwinding of fixed assets' fund	10	**1,119,654**	1,426,379
Other income		**466,859**	237,423
		360,532,466	264,527,935
EXPENDITURES			
Operating expenses	17	**(266,186,250)**	(172,191,389)
Administrative expenses	18	**(48,519,559)**	(36,010,888)
		(314,705,809)	(208,202,277)
Surplus for the year		**45,826,657**	56,325,658

The annexed notes 1 to 24 form an integral part of these financial statements.

Chairman

Director

Statement of Changes in Net Surplus

For the Year Ended June 30, 2025

	Accumulated surplus	Fixed Assets' Fund	Total
		(Rupees in '000)	
Balance as at July 01, 2023	69,086,813	8,315,694	77,402,507
Unwinding of fixed assets' fund	-	(1,426,379)	(1,426,379)
Surplus for the year ended June 30, 2024	56,325,658	-	56,325,658
Balance as at June 30, 2024	**125,412,471**	**6,889,315**	**132,301,786**
Unwinding of fixed assets' fund	-	(1,119,654)	(1,119,654)
Surplus for the year ended June 30, 2025	45,826,657	-	45,826,657
Balance as at June 30, 2025	**171,239,128**	**5,769,661**	**177,008,789**

The annexed notes 1 to 24 form an integral part of these financial statements.

Chairman

Director

Statement of Cash Flows

For the Year Ended June 30, 2025

	Note	2025 Rupees	2024 Rupees
CASH FLOWS FROM OPERATING ACTIVITIES			
Surplus for the year		**45,826,657**	56,325,658
Adjustment of non-cash and other items:			
Depreciation		**12,691,880**	10,020,165
Amortisation expense		**502,039**	616,628
Provision for slow moving and expired inventory	5.1	**335,775**	55,607
Unwinding of fixed assets' fund	10	**(1,119,654)**	(1,426,379)
Unrealised loss on short-term investment		**175,917**	692,772
Dividend income on short-term investment		**(8,464,017)**	(7,066,614)
Gain on disposal		**-**	(2,455,531)
		4,121,940	436,648
Cash generated from operating activities		**49,948,597**	56,762,306
EFFECT ON CASH FLOWS DUE TO WORKING CAPITAL CHANGES			
Increase in current assets			
Inventory		**(7,006,971)**	(4,654,832)
Advances and prepayments		**(2,648,715)**	(2,438,194)
Donation receivable		**(4,205,833)**	(29,277,650)
		(13,861,519)	(36,370,676)
Increase in current liabilities			
Advance from donors - Restricted		**3,549,237**	-
Deferred liablility - Restricted		**-**	(2,092,474)
Accrued and other payable		**4,936,920**	12,846,321
		8,486,157	10,753,847
		44,573,235	31,145,477
Long-term deposits paid		**(729,000)**	(190,000)
Net cash generated from operating activities		**43,844,235**	30,955,477
CASH FLOWS FROM INVESTING ACTIVITIES			
Payments for acquisition of property, plant and equipment		**(32,565,061)**	(13,046,950)
Proceeds from dispoal of property, plant and equipment		**-**	6,450,000
Short-term investment made		**(16,025,704)**	(62,000,000)
Proceeds from short-term investment		**10,093,574**	-
Payments for acquisition of intangibles		**(184,000)**	(565,565)
Net cash used in investing activities		**(38,681,191)**	(69,162,515)
Net increase / (decrease) in cash and cash equivalents		**5,163,044**	(38,207,038)
Cash and cash equivalents at the beginning of the year		**11,054,807**	49,261,845
Cash and cash equivalents at the end of the year		**16,217,851**	11,054,807

The annexed notes 1 to 24 form an integral part of these financial statements.

Chairman

Director

Notes to the Financial Statements

As at June 30, 2025

1. STATUS AND NATURE OF ACTIVITIES

The Shine Humanity Pakistan ('the Society') was registered under the Societies Registration Act, XXI of 1860 on June 4, 2013 and is working as a 'not for profit organisation' dedicated to provide quick, efficient and compassionate medical and humanitarian relief to needy and poor people in rural and urban areas purely on non-profit basis. The purpose for which the Society is organised is to build and operate self-sustainable healthcare facilities in poor and neglected communities in Pakistan and to provide humanitarian and disaster relief when feasible.

In order to achieve this, the Society invites solicits specific donations in order to run the aforementioned programs / campaigns. Moreover, the Society invites general donations and organises fund raising events.

The geographical locations and addresses of the Society's head office, storage facility, treatment sentinel sites and project offices are as under:

- Head Office - 401 & 402, 4th Floor, Building No. 19-C, Lane 4, Khayaban-e-Shahbaz, DHA, Phase VI, Karachi, Sindh.
- Gharo - Main National Highway near Police Station, Shine Humanity Garib Sons Clinic, Gharo, District Thatta, Sindh.
- Nagarparkar - Shine Humanity Gul Lot Clinic, near Girdhari restaurant, Pooran Wah, Nagarparkar, District Tharparkar, Sindh.
- Sujawal - Aziz & Razia Dharamsey Foundation, Sujawal Clinic, Main Park Road, near Chandia School, District Sujawal, Sindh.
- Chilya - Shine Humanity Chilya Clinic, Village Muhammad Ramzan Mirbhar, Chilya, U/C Chatto Chand, District Thatta, Sindh.
- Kohi Goth - Gadap Town, UC - 6, Malir District, Karachi, Sindh.
- Gul Hasan Samo - Village Gul Hassan Samo, near Wind Power Foundation, District Thatta, Sindh.
- Peer Daryabad - Village Haaji Ismail Katiyar, Peer Daryabad, District Thatta, Sindh.
- Var Town - Var Town Village, Muhammad Qasim Maraai, District Thatta, Sindh.
- New Jatoi - New Jatoi Clinic, near City New Jatoi, Taluka Moro, Sindh.
- Mansehra - Sehat Center Mansehra, near LRBT Eye Hospital, Balakot Road, Reerh Gala, Mansehra, KPK.
- Kunri - Sami Ullah Colony, District Kunri.
- Sehwan - Feroza Abbasi Sehat Center, Shine Humanity Pakistan, opposite Wapda Office, Sehwan Sharif, Sindh.
- Sehat Ghar - Nutrition Center, Sujawal Main Park Road, near Chandia School, District Sujawal, Sindh.
- Diplo - Ghulam Muhammad Lot Clinic, near HBL Micro Finance Bank, back side Mithi Road, Diplo.
- Sehat Ghar - Nutrition Center, Chilya, Village Muhammad Ramzan Mirbhar, U/C Chatto Chand, District Thatta, Sindh.
- Harinaru - near Masjid Azra Shah Qutub foundation, Village Harinaru.

2. MATERIAL ACCOUNTING POLICY INFORMATION

The material accounting policies applied in the preparation of these financial statements are set out below.

2.1. BASIS OF PREPARATION

2.1.1 Statement of Compliance

These financial statements have been prepared in accordance with the accounting and reporting standards as applicable in Pakistan. The accounting and reporting standards applicable in Pakistan comprise of:

- International Financial Reporting Standards for Small and Medium Sized Entities (IFRS for SMEs) issued by the International Accounting Standards Board (IASB) as notified under the Companies Act, 2017;

- Accounting Standards for Not for Profit Organizations (Accounting Standards for NPOs) issued by the Institute of Chartered Accountants of Pakistan and as notified under the Companies Act, 2017; and

- Provisions of, directives and notifications issued under the Societies Registration Act, 1860 (the Act).

Where provisions of, directives and notifications issued under the Act differ from the IFRS for SMEs or the Accounting Standards for NPOs, the provisions of directives and notifications issued under the Companies Act, 2017 have been followed.

2.1.2 Accounting Estimates, Judgements And Financial Risk Management

The preparation of financial statements in conformity with accounting and reporting standards, as applicable in Pakistan, requires management to make judgments, estimates and assumptions that affect the application of policies and the reported amounts of assets, liabilities, income and expenses.

The estimates and associated assumptions are based on historical experience and various other factors that are believed to be reasonable under the circumstances; the results of which form the basis of making the judgments about the carrying values of assets and liabilities that are not readily apparent from other sources. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimates are revised if the revision affects only that period, or in the period of the revision and future periods if the revision affects both current and future periods.

There are no judgments made by management in the application of accounting and reporting standards as applicable in Pakistan, that have significant effect on the financial statements and estimates with a significant risk of material adjustment in the next year.

2.1.3 Changes in accounting standards, interpretations and pronouncements

a) Standards and amendments to approved accounting standards that are effective

There are certain amendments and interpretations to the accounting and reporting standards which are mandatory for the Society's annual accounting period which began on July 1, 2024. However, these do not have any significant impact on the Society's financial reporting except for an accounting standard issued by the Institute of Chartered Accountants of Pakistan (ICAP) on 'Financial Statement Disclosure of Zakat received by an entity' and notified by SECP vide SRO 240(1) / 2024 which shall be followed by entities that receive zakat, and are required to prepare their financial statements in confirrnity with the financial reporting standards as applicable in Pakistan.

b) Standards and amendments to approved accounting standards that are not yet effective

There are certain amendments and interpretations to the accounting and reporting standards which are mandatory for the Society's annual accounting period which began on July 1, 2025. However, these do not have any significant impact on the Foundation's financial reporting.

2.2 Basis of measurement

These financial statements have been prepared on the basis of historical cost convention except as stated otherwise in these financial statements.

2.3 Functional and presentation currency

These financial statements are presented in Pakistan Rupees, which is the functional and presentation currency of the Society and are rounded off to the nearest rupee.

2.4 Property, plant and equipment

These are stated at cost less accumulated depreciation and impairment, if any. Depreciation on all property, plant and equipment is charged using the reducing balance method in accordance with the rates specified in note 3 to these financial statements.

Depreciation on acquisition is charged from the month in which the property, plant and equipment is put to use whereas no depreciation is charged in the month of disposal.

The Society adds to the carrying amount of an item of property, plant and equipment the cost of replacing parts of such an item when that cost is incurred, if the replacement part is expected to provide incremental future benefits to the Society. The carrying amount of the replaced part is derecognised. All other repairs and maintenance are charged to statement of income and expenditure during the period in which they are incurred.

Gains and losses on disposals of property, plant and equipment, if any, are included in statement of income and expenditure.

The management assesses at each balance sheet date whether there is any indication that a fixed asset may be impaired. If such indication exists, the carrying amounts of such assets are reviewed to assess whether they are recorded in excess of their recoverable amount. Where carrying amounts exceeds the estimated recoverable amount, assets are written down to the recoverable amount.

2.5 Inventory

Inventories include goods donated by the Provincial Government and other donors at nil consideration. These inventories are initially recognised at their retail value, with a corresponding credit recorded directly to Grant Income.

This policy reflects the immediate recognition of income, as the donated goods are intended for distribution within a period of less than one year.

Provision made against expired inventory is recognised as an expense in the income and expenditure statement, with a corresponding reduction in the carrying value of inventories. Inventories also include medicines purchased by the society on its own, Zakat and donations. These are valued at lower of cost and current replacement cost, as the inventory is held for treatment of patients at no charge. Cost is determined using first-in-first-out method.

2.6 Revenue recognition

Income from donations is recognised on an accrual basis. Cash donations received from donors without conditions are recorded as income when received. Donations related to expenses incurred on behalf of donors are recognised in the same period as those expenses, in accordance with the matching principle. Donation receivables, together with the corresponding income, are recognised when it is virtually certain that reimbursement will be received.

Income from donations is classified as restricted or unrestricted. Restricted income refers to amounts provided by donors for specific purposes designated by them, while unrestricted income is available for general use. Both restricted and unrestricted donations are recognised immediately in the statement of income and expenditure.

2.7 Other revenue

OPD Income and the other income is recognised in the statement of income and expenditure when it is earned.

OPD income is the nominal amount collected from patients who visit clinics for consultations, minor treatments, or diagnostic services without being admitted as in-patients.

Other income primarily consists of foreign exchange gains arising from donation receivables and income from the provident fund.

2.8 Donations, zakat and government grants

Donations not restricted in their use by the donor (general donations) are recognised on a receipt basis in the income and expenditure statement. Donations restricted in their use by the donor (specific donations) relating to capital assets are capitalized, while restricted cash donations and zakat are recognised in the income and expenditure statement when received.

Government grants are recognised on a receipt basis at retail value when there is reasonable assurance that all related conditions will be met. Items received under government grants generally consist of inventory with a useful life of less than one year and are recognised accordingly.

2.9 Deferred income

Where the grant received is in the form of capital asset, it is recorded as deferred revenue and charged to income and expenditure statement in equal amounts over the expected useful life of the related asset through depreciation, amortisation and / or disposal.

2.10 Taxation

As per Section 100C of the Income Tax Ordinance 2001, (the Ordinance) read with the Rule 212 of the Income Tax Rules, 2002, the income of the Society is eligible for a tax credit equal to one hundred percent of the tax payable, including minimum tax and final taxes payable, provided that the Society files its income tax return, deducts or collects the withholding tax required under the Ordinance and the withholding tax statement has been filed with the authorities. Accordingly no provision for tax has been recognised.

2.11 Provisions

Provisions are recognised when the Society has a present legal or constructive obligation as a result of past events, it is probable that an outflow of resources will be required to settle the obligation and a reliable estimate of the amount can be made. However, provisions are reviewed at each statement of financial position date and adjusted to reflect current best estimate.

2.12 Accrued and other liabilities

Accrued and other liabilities are recognised initially at fair value and subsequently measured at amortised cost using the effective interest rate method.

2.13 Advances, deposits and prepayments

These are stated initially at fair value and subsequently measured at amortised cost using the effective interest rate method.

2.14 Investments - at fair value

Investments are initially recognised and carried at fair values, with any changes in the fair values taken to statement of income and expenditure if the investments have been made from general donations and to deferred income in case of investments made from specific donations for capital asset. Investments are derecognised when the right to receive

cash flows from the investments has expired or has been transferred and the Society has transferred substantially all the risks and rewards associated with ownership. Gains and losses on disposal of investments are included in the statement of income and expenditure in case of investments made from general donations and to deferred income in case of investments made from zakat and specific donations in the period in which these arise.

2.15 Cash and cash equivalents

Cash and cash equivalents are carried in the statement of financial position at cost. For the purposes of the statement of cash flows, cash and cash equivalents comprise cash in hand, balances with banks on current, savings and deposit accounts with original maturities of three months or less that are readily convertible to known amounts of cash and which are subject to an insignificant risk of changes in value.

		Note	2025 Rupees	2024 Rupees
3.	**PROPERTY, PLANT AND EQUIPMENT**			
	Operating fixed assets	3.1	**59,120,428**	39,247,247

3.1 Operating Fixed Assets

	Plant & machinery	Computers	Vehicles	Furniture and fixtures	Office and medical equipments	Generator	Containers	Total
	(Rupees)							
Net carrying value basis Year ended June 30, 2025								
Opening net book value	4,150,175	3,713,637	9,454,774	6,271,492	10,654,417	196,602	4,806,150	39,247,247
Additions	1,380,000	5,525,089	6,375,000	5,877,860	12,541,832	865,280	-	32,565,061
Disposals	-	-	-	-	-	-	-	-
Depreciation charge	(742,994)	(1,875,779)	(2,752,848)	(1,399,421)	(5,186,546)	(248,337)	(485,955)	(12,691,880)
Closing net book value	**4,787,181**	**7,362,947**	**13,076,926**	**10,749,931**	**18,009,703**	**813,545**	**4,320,195**	**59,120,428**
Gross carrying value basis At June 30, 2025								
Cost	6,710,466	11,977,558	23,121,765	14,124,806	29,750,086	1,505,280	5,791,335	92,981,296
Accumulated depreciation	(1,923,285)	(4,614,611)	(10,044,839)	(3,374,875)	(11,740,383)	(691,735)	(1,471,140)	(33,860,868)
Net book value	**4,787,181**	**7,362,947**	**13,076,926**	**10,749,931**	**18,009,703**	**813,545**	**4,320,195**	**59,120,428**
Net carrying value basis Year ended June 30, 2024								
Opening net book value	3,408,319	3,025,144	15,746,639	5,330,666	7,310,947	293,436	5,099,780	40,214,931
Additions	1,469,500	1,942,012	877,000	1,856,819	6,663,584	-	238,035	13,046,950
Disposals	-	-	(3,994,469)	-	-	-	-	(3,994,469)
Depreciation charge	(727,644)	(1,253,519)	(3,174,396)	(915,993)	(3,320,114)	(96,834)	(531,665)	(10,020,165)
Closing net book value	4,150,175	3,713,637	9,454,774	6,271,492	10,654,417	196,602	4,806,150	39,247,247
At June 30, 2024								
Cost	5,330,466	6,452,469	16,746,765	8,246,946	17,208,254	640,000	5,791,335	60,416,235
Accumulated depreciation	(1,180,291)	(2,738,832)	(7,291,991)	(1,975,454)	(6,553,837)	(443,398)	(985,185)	(21,168,988)
Net book value	4,150,175	3,713,637	9,454,774	6,271,492	10,654,417	196,602	4,806,150	39,247,247
Depreciation Rates	**15%**	**30%**	**25%**	**15%**	**30%**	**33%**	**10%**	

4. INTANGIBLE

	2025 Rupees	2024 Rupees
Opening balance	**4,920,732**	4,971,795
Purchases during the year	**184,000**	565,565
	5,104,732	5,537,360
Amortisation charged during the year	**(502,039)**	(616,628)
	4,602,693	4,920,732
Amortisation rate	**10%**	10%

5. INVENTORY

	Note	Medicines	Vaccines	Kits	Total
		Rupees			
As at June 30, 2025					
Owned		**13,961,272**	**153,894**	**126,920**	**14,242,086**
Donations in kind		**2,128,026**	**-**	**-**	**2,128,026**
Donations received through government grant		**407,474**	**1,675,226**	**990,086**	**3,072,786**
		16,496,772	**1,829,120**	**1,117,006**	**19,442,898**
Less: Provision for slow moving stock	5.1	**(335,775)**	**-**	**-**	**(335,775)**
		16,160,997	**1,829,120**	**1,117,006**	**19,107,123**
As at June 30, 2024					
Owned		7,704,521	37,800	53,080	7,795,401
Donations in kind		675,363	-	-	675,363
Donations received through government grant		1,588,879	994,943	1,436,948	4,020,770
		9,968,763	1,032,743	1,490,028	12,491,534
Less: Provision for slow moving stock	5.1	(55,607)	-	-	(55,607)
		9,913,156	1,032,743	1,490,028	12,435,927

5.1 Provision for slow moving stock

	2025 Rupees	2024 Rupees
Opening balance	**55,607**	-
Provision made during the year	**301,849**	116,414
Write offs of expired stock	**(21,681)**	(60,807)
Closing balance	**335,775**	55,607

5.2 As at June 30, 2025, inventories has been written down by Rs. 0.64 million (June 30, 2024: Rs. 0.42 million) to arrive at its net realisable value of Rs. 19.11 million (June 30, 2024: Rs. 12.44 million).

6. ADVANCES AND PREPAYMENTS

	2025 Rupees	2024 Rupees
Loan to staff	**20,828**	258,101
Advance to vendors	**3,843,645**	954,216
Prepaid insurance	**553,975**	508,065
Prepaid rent	**1,069,797**	1,119,148
	5,488,245	2,839,530

7. DONATION RECEIVABLES

Donation receivables	**33,483,483**	29,277,650

7.1 This amount includes donation receivable from Shine Humanity USA of Rs. 20.36 million (June 30, 2024: Rs. 24.03 million).

8. SHORT-TERM INVESTMENT

At fair value through profit or loss

Open-ended mutual funds

2025 (Number of units)	2024		2025 Rupees	2024 Rupees
8,259,407	6,837,384	NBP Islamic Daily Dividend Fund	**82,594,072**	68,373,842

The above investment is stated at fair value at the year-end, using the year-end Net Asset Value (NAV).

9. CASH AND BANK BALANCES

	2025 Rupees	2024 Rupees
Cash at bank	**15,940,652**	10,708,758
Cash in hand	**277,199**	346,049
	16,217,851	11,054,807

10. FIXED ASSETS' FUND

Opening balance	**6,889,315**	8,315,694
Unwinding of fixed assets' fund	**(1,119,654)**	(1,426,379)
Closing balance	**5,769,661**	6,889,315

10.1 The fixed assets' fund pertains to operating fixed assets and intangibles received as donation in kind.

11. ACCRUED AND OTHER PAYABLES

	2025 Rupees	2024 Rupees
Salaries payable	**15,136,976**	12,656,137
EOBI payable	**615,736**	394,858
Audit fee payable	**1,050,000**	500,000
Medicine liabilities	**4,213,701**	7,765,489
Provident fund payable	**671,725**	610,615
Other payable	**7,845,856**	2,669,975
	29,533,994	24,597,074

12. DEFERRED LIABILITY - Restricted

This represents donations received for the purpose of acquiring trucks that remained unutilised as of June 30, 2025.

13. CONTINGENCIES AND COMMITMENTS

There are no contingencies and commitments as at June 30, 2025 (2024: Nil).

	Note	2025 Rupees	2024 Rupees
14. DONATION INCOME			
General donations	14.1	**223,270,695**	147,475,862
Donations in kind - medicines		**8,602,586**	5,901,948
Donations received through government grant		**16,801,150**	14,008,854
		248,674,431	167,386,664
14.1 General Donations			
- Unrestricted donations		**155,031,795**	96,817,518
- Restricted donations	14.1.1	**68,238,900**	50,658,344
		223,270,695	147,475,862

14.1.1 This represents donation amount received related to specific projects of clinics.

	Note	2025 Rupees	2024 Rupees
15. ZAKAT			
Zakat income	15.1	**92,537,493**	80,652,048

15.1 This includes zakat received from Shine Humanity US amounting to Rs. 85.32 million (June 30, 2024: Rs. 66.01 million)

	Note	2025 Rupees	2024 Rupees
15.2 Zakat available for utilisation			
Opening balance of zakat		**-**	-
Zakat received during the year		**92,537,493**	80,652,048
		92,537,493	80,652,048
Zakat utilised during the year			
Zakat utilised on providing medicines to patients		**18,683,140**	17,321,317
Zakat utilised on lab tests		**4,998,236**	4,544,781
Zakat utilised for general and administrative purpose		**68,856,117**	58,785,950
		92,537,493	80,652,048
Closing balance of zakat		**-**	-
Closing balance of the zakat is represented by:			
Cash and bank balances related to zakat balances	15.3	**-**	-
Less: zakat related accrued expenditures		**-**	-
		-	-

15.3 The bank balance related to zakat is reported as zero, reflecting the netting of the corresponding impact against the zakat liability.

16. PROFIT ON INVESTMENT

The profit on investment relates to daily dividend on short-term investment in NBP Islamic Daily Dividend Fund, which carried dividend rate ranging between 11.53% to 14.97% (June 2024: 19.7%) per annum.

	Note	2025 Rupees	2024 Rupees
17. OPERATING EXPENSES			
Inventory consumed	17.1		
- Government grants		**17,897,050**	10,013,973
- Own purchases		**40,228,934**	31,639,040
- Donations in kind		**7,142,861**	5,776,234
		65,268,845	47,429,247
Salaries, wages and other benefits		**111,586,608**	72,289,455
Printing and stationery		**2,126,152**	1,132,528
Communication & internet		**2,099,726**	1,092,029
Utilities		**2,992,848**	2,879,057
Rent, rates & taxes		**5,643,797**	3,168,355
Advertisement		**2,485,121**	691,416
Meals & entertainment		**2,435,529**	1,428,726
Depreciation		**10,033,989**	7,957,783
General supplies		**952,067**	975,917
Traveling and conveyance		**10,219,343**	2,058,173
Insurance		**1,485,921**	25,000
Fuel		**7,194,510**	5,099,989
Amortisation expense		**428,020**	572,488
Laboratory expenses		**9,347,535**	6,299,702
Cleaning		**1,604,028**	548,960
Training and development		**1,107,974**	-
Charity		**7,497,459**	10,874,558
Repair and maintenance		**20,633,284**	7,369,004
Legal and professional charges		**636,448**	68,708
Bank Charges		**27,090**	-
Other expenses		**379,956**	230,294
		266,186,250	172,191,389

17.1 Inventory Consumed

Opening stock		**12,435,927**	7,836,702
Purchases - net		**46,536,305**	32,117,670
Donations-in-kind		**8,602,586**	5,901,948
Donations received through government grant		**16,801,150**	14,008,854
Closing stock	5	**(19,107,123)**	(12,435,927)
Inventory consumed		**65,268,845**	47,429,247

18. ADMINISTRATIVE EXPENSES

	Note	2025 Rupees	2024 Rupees
Salaries, wages and other benefits		**17,148,314**	14,224,481
Printing and stationery		**493,322**	251,627
Communication & internet		**469,065**	340,805
Utilities		**1,887,051**	1,095,724
Rent, rates & taxes		**3,223,544**	2,470,332
Meals & entertainment		**1,211,115**	466,000
Training and development		**107,007**	241,177
Cleaning		**652,298**	225,290
Advertisement		**6,409,213**	5,107,267
Auditor's remuneration	18.1	**550,000**	500,000
Legal and professional charges		**1,587,708**	915,438
Depreciation		**2,657,891**	2,062,382
Amortisation expense		**74,019**	44,140
Traveling and conveyance		**725,468**	1,002,650
Insurance		**2,487,476**	2,522,161
Fuel		**1,034,600**	1,020,492
Repair and maintenance		**5,804,645**	2,079,838
Bank charges		**1,597,433**	1,265,824
Other expenses		**399,390**	175,260
		48,519,559	36,010,888

18.1 Auditor's remuneration

	2025 Rupees	2024 Rupees
Audit fee	**500,000**	450,000
Out-of-pocket expenses	**50,000**	50,000
	550,000	500,000

19. FINANCIAL RISK MANAGEMENT

19.1 Financial risk factors

The Society's activities expose it to variety of financial risks: market risk (including currency risk and interest rate risk), credit risk and liquidity risk. The Society's overall risk management program focuses on having cost effective funding as well as managing financial risk to minimise volatility.

19.1.1 Financial assets and liabilities by category and their respective maturities

	Non-interest bearing		
	Maturity up to one year	Maturity after one year	Total
	Rupees		
2025			
FINANCIAL ASSETS			
At amortised cost			
Cash and bank balances	**16,217,851**	**-**	**16,217,851**
Donation receivables	**33,483,483**	**-**	**33,483,483**
Advances and prepayments	**5,488,245**	**-**	**5,488,245**
Long term deposits	**-**	**1,903,000**	**1,903,000**
	55,189,579	**1,903,000**	**57,092,579**
At fair value			
Short-term investment	**82,594,072**	**-**	**82,594,072**
	137,783,651	**1,903,000**	**139,686,651**
FINANCIAL LIABILITIES			
At amortised cost			
Accrued and other payables	**29,533,994**	**-**	**29,533,994**
Fixed assets' fund	**889,238**	**4,880,423**	**5,769,661**
Advance from donors - Restricted	**3,549,237**	**-**	**3,549,237**
Deferred liablility - Restricted	**12,424,875**	**-**	**12,424,875**
	46,397,344	**4,880,423**	**51,277,767**
2024			
FINANCIAL ASSETS			
At amortised cost			
Cash and bank balances	11,054,807	-	11,054,807
Donation receivables	29,277,650	-	29,277,650
Advances and prepayments	2,839,530	-	2,839,530
Long term deposits	-	1,174,000	1,174,000
	43,171,987	1,174,000	44,345,987
At fair value			
Short-term investment	68,373,842	-	68,373,842
	111,545,829	1,174,000	112,719,829
FINANCIAL LIABILITIES			
At amortised cost			
Accrued and other payables	24,597,074	-	24,597,074
Fixed assets' fund	1,119,654	5,769,661	6,889,315
Advance from donors - Restricted	-	-	-
Deferred liablility - Restricted	-	12,424,875	12,424,875
	25,716,728	18,194,536	43,911,264

19.2 Credit risk

Credit risk is the risk which arises with the possibility that one party to a financial instrument will fail to discharge its obligation and cause the other party to incur a financial loss. The Society attempts to control credit risk by monitoring credit exposures, limiting transactions with specific counterparties and continually assessing the creditworthiness of counterparties.

Concentrations of credit risk arise when a number of counterparties are engaged in similar business activities or have similar economic features that would cause their ability to meet contractual obligations to be similarly effected by changes in economic, political or other conditions. Concentrations of credit risk indicate the relative sensitivity of the Society's performance to developments affecting a particular industry.

The Society seeks to minimise the credit risk exposure through having exposures only to parties considered credit worthy and obtaining securities where applicable. The carrying values of financial assets which are neither past due nor impaired are as under:

	2025 Rupees	2024 Rupees
Advances and prepayments	**5,488,245**	2,839,530
Long-term deposits	**1,903,000**	1,174,000
Donation receivables	**33,483,483**	29,277,650
Short-term investment	**82,594,072**	68,373,842
Cash and bank balances	**16,217,851**	11,054,807
	139,686,651	112,719,829

Bank balances represent low credit risk as these are placed with banks having good credit rating assigned by credit rating agencies. The credit ratings of the Society's bank accounts assessed by external credit ratings are as follows:

Banks	**Rating agency**	**Ratings**
JS Bank Limited	PACRA	A1+
NBP Islamic Daily Dividend Fund	MUFAP	AA+

The management does not expect any losses from non-performance by these counter parties.

19.3 Liquidity risk

Liquidity risk is the risk that the Society will encounter difficulty in meeting the obligations associated with its financial liabilities that are settled by delivering cash or another financial assets. The Society's approach to managing liquidity is to ensure, as far as possible, that it will always have sufficient liquidity to meet its liabilities when due, without incurring losses or risking damage to the Society's reputation.

	2025		
	Carrying amount	**One to two years**	**Two to five years**
Financial liabilities		**Rupees**	
Accrued and other payables	**29,533,994**	**29,533,994**	**-**
Fixed assets' fund	**5,769,661**	**1,603,945**	**2,075,837**
Advance from donors - Restricted	**3,549,237**	**-**	**3,549,237**
Deferred liablility - Restricted	**12,424,875**	**-**	**12,424,875**

	2024		
	Carrying amount	One to two years	Two to five years
Financial liabilities		Rupees	
Accrued and other payables	24,597,074	24,597,074	-
Fixed assets' fund	6,889,315	2,008,892	2,506,690
Advance from donors - Restricted	-	-	-
Deferred liablility - Restricted	12,424,875	-	12,424,875

Currency risk

Currency risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in foreign exchange rates. At reporting date, the Society does not have financial instruments exposed to currency risk.

Interest rate risk

Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market interest rates.

a) Fair value sensitivity analysis for variable rate instruments

At the reporting date, the Society does not hold any variable rate instrument.

b) Fair value sensitivity analysis for fixed rate instruments

As at reporting data, the Society does not hold any fixed rate instruments.

Other price risk

Other price risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices (other than those arising from interest rate risk or currency risk). At reporting date, the Society does not have financial instruments exposed to other price risk.

Fair value of financial instruments

Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

The carrying values of the financial instruments approximate their fair values as at June 30, 2025 as these are of short term nature

20. FAIR VALUES OF FINANCIAL ASSETS AND LIABILITIES

Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction in the principal (or most advantageous) market at measurement date under current market conditions (i.e. an exit price) regardless of whether that price is directly observable or estimated using another valuation technique.

As at June 30, 2025, all financial assets and financial liabilities are carried at amortised cost except as stated otherwise in these financial statements.

The Society classifies fair value measurements using a fair value hierarchy that reflects the significance of the inputs used in making the measurements. The table below analyses financial instruments carried at fair value by valuation method. The different levels have been defined as follows:

a) Quoted prices (unadjusted) in active markets for identical assets or liabilities (level 1).

b) Inputs other than quoted prices included within level 1 that are observable for the asset or liability, either directly (that is, as prices) or indirectly (that is, derived from prices) (level 2).

c) Inputs for the asset or liability that are not based on observable market data (that is, unobservable inputs) (level 3).

	Level 1	Level 2	Level 3
	Rupees		
June 30, 2025			
Assets carried at FVTPL			
- Short-term investment	**82,594,072**	**-**	**-**
	82,594,072	**-**	**-**
June 30, 2024			
Assets carried at FVTPL			
- Short-term investment	68,373,842	-	-
	68,373,842	-	-

The Society recognises transfers between levels of the fair value hierarchy at the end of the reporting period during which the transfer has occurred.

The Society's policy for determining when transfers between levels in the hierarchy have occurred includes monitoring of the following factors:

- changes in market and trading activity (e.g. Significant increases / decreases in activity).

- changes in inputs used in valuation techniques (e.g. Inputs becoming / ceasing to be observable in the market.

There were no transfers between level 1, 2 and 3 of the fair value hierarchy during the year.

21. TRANSACTIONS WITH RELATED PARTIES

Relationship	Nature of transactions	2025 Rupees	2024 Rupees
Trustees	Donations received	285,000	10,000
Organisations where Trustees are Trustees / Directors / Partners / Sponsors	Donations received	21,467,000	19,643,068
Key management personnel and their close relatives	Reimbursement of expenses	449,004	85,150
	Donations received	500,000	70,000

Following are the details of related party organisations with whom the Society had entered in to transactions during the year:

S.No	Company Name	Basis of relationship
1	Garibsons (Private) Limited	Common directorship
2	The Friend of Education Foundation	Common directorship
3	Network of Organizations Working for People with Disabilities Pakistan (NOWPDP)	Common directorship
4	M/s Aziz & Razia Dharamsey Family Foundation	Common directorship
5	Naseeb Online Services (Private) Limited - Rozee. Pk	Common directorship

22. CORRESPONDING FIGURES

Corresponding figures and balances have been rearranged / reclassified, wherever considered necessary, for the purpose of comparison and better presentation, the effects of which are not material to the financial statements.

	2025	2024
23. NUMBER OF EMPLOYEES		
Number of employees including contractual employees at June 30	**183**	115

24. DATE OF AUTHORISATION FOR ISSUE

These financial statements have been approved for issue on May 21, 2026 by the Board of Directors of the Society.

Chairman

Director

Ways to Donate



Bank Transfer

For Zakat Only

Bank Title: JS Bank
Account Title: SHINE Humanity Pakistan
Account Number: PK58JSBL9606000001571061

For Other Donations

Bank Title: JS Bank
Account Title: SHINE Humanity Pakistan
Account Number: PK07JSBL9606000000615074

Donate Online

www.shinehumanity.org/donate


Purpose
that drives
progress.

Conceptulization and Design by
The Art Store
www.theartstore.biz

I envision a world in which everyone can live healthy, productive lives, regardless of who they are or where they live.



Dr. Tedros Adhanom Ghebreyesus
Director-General World Health Organization

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