

Children With Cancer Deserve The Right To Health

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Topic	Page
Foreword	1
About Us	2
Vision, Values, and Goals	3
Theory of Change	4
Where We Work	5
Highlights	6
Pathway 1 : Access2Care	7
Pathway 2 : Treatment & Continuity of Care	13
Pathway 3 : Multidisciplinary Care	21
Pathway 4 : Policy & Advocacy	35
Pathway 5 : Capacity Building	41
Pathway 6 : Research & Development	43
Staffing	45
Leadership	47
Financials	49
Financial Statement	55



2022–23 was a milestone year—one of both depth and direction. With every passing year, CanKids strengthens its resolve to enable survival, but also to ensure that every child with cancer in India has the right to Health, to education, to holistic care, and to hope.

As we navigated the post-pandemic recovery, we focused on **building back stronger**—not just reaching more children, but reaching them better. From increasing Access2Care by 17% to supporting over 18,800 children holistically, we reinforced what we have always believed: **every child deserves to survive and thrive.**

The theme for the year, "Children with Cancer Can Survive and Thrive", was not just a message. It was a mandate. One we followed through new partnerships with states like Uttar Pradesh, new Home Away from Home facilities, growing numbers in Canshala, and survivor-led initiatives across the country.

This year, our Theory of Change and strategic roadmap clarified our long-term direction: 100% access by 2030, survival rates of 60%, and systems of care rooted in equity and excellence. The work of our Regional and State Care Coordination Centres (Samanvay Kendras), our 132 CHSUs, and our national survivor and parent networks show that our reach is not only wide—it is deep.

But this journey is not easy. Nor is it perfect. There are growing pains, especially as we expand from service delivery to system change, from fragmented support to a comprehensive care continuum. And yet, we press on—with courage, with clarity, and with community.

To every partner, hospital, team member, donor, and survivor who stood with us this year: thank you. This is your journey too. And to every child with cancer—we remain here for you, and with you.

With hope and determination,

Poonam Bagai

Founder Chairman

On Behalf of Board of Governance CanKids KidsCan

Established in 2004 by Ms. Poonam Bagai, a colon cancer survivor and Co-Founder Sonal Sharma (parent of a childhood cancer survivor), our core area of intervention in India is Health care - Childhood Cancer. The vision is to enable global standards of survival of between 70-95% for childhood cancer in India, to provide access to holistic treatment, care, and support, and to secure the Rights of the Health Impaired Child with cancer to Health, Education, Childhood, Pain-free palliative care and the Right to be Heard. This vision drives our approach of working on all aspects that will drive Change for Childhood Cancer in India – from support services for families of children with cancer (age 0-19), to awareness, advocacy, stakeholder engagement, capacity building, quality care, research, and impact.

CanKids' Change for Childhood Cancer in India model aims to strengthen the public health delivery system to the level of Globally accepted standards for childhood cancer treatment services. The strategic model works on delivering "Access to Care," "Improving Survival Outcomes," and "Ensuring patient-centered care" for children with cancer and their families to enable the best treatment, care, and support.

































सत्यमेव जयते Government of Puducherry





























Our Timeline

International Childhood Cancer Day observed for the first time in India, Adopt a Child program launched.

2005

2011

13 new CanKids Hospital Support Units opened, 3,930 children registered under YANA

2012

2006

Sukritham, our **second Home Away from Home inaugurated** in Trivandrum, Kerala. Quality Care, Research, and Impact program launched. Subhita, India's first and only Pediatric Palliative Day Care and Transition Home inaugurated with 10 beds and 24-hour free services

KidsCan Konnect network of teen and young adult child-

Cancer Society to begin India's first Pediatric Palliative

Care Centre. YANA (You Are Not Alone) Model launched.

hood cancer survivors formed. Seed grant from American

2013

Concert by Kailash Kher to raise awareness about Access2Care for children battling cancer

2016

Support New Cankids Hospital Support Units

Bagai receives the Indira Gandhi Priyadarshini Award

All Golden Crab Project launched. CanKids signs MoU with the State Government of Puniab to make Change for Childhood Cancer, the first ever state-level MoU

First Home Away from Home inaugurated in New Delhi. CanKids Hospital

Unit setup at Mahavir Cancer Sansthan, Patna. National Childhood Cancer

Scholarship Program launched with 6 awardees. CanKids President Poonam

2018

CanShala, the school-at-the-hospital, opened at Bai Jerbai Wadia Hospita in Mumbai. Maharashtra. 100 Nurses Project launched. Change for Childhood Cancer launched in Maharashtra as a 5-year project. Partnership with Navva Care launched to provide online expert opinions and care plans for cancer patients. International collaboration with Yangon Children's Hospital, Myanmar

Maharashtra

2010

CanKids signs MoU with the State Government of Maharashtra as knowledge and technical partner for Change for Childhood Cancer

CanKids signs MoU with the State Government of Gujarat and Madhya Pradesh and as knowledge and technical partner for Change for Childhood Cancer. CanKids completes 10 years as a National Society. CanKids signs MoU with the State Government of Puducherry as knowledge and support partner for Change for Childhood Cancer. Workshops organised- PAN India 'best nurses = best Care' Nurses and the 6th PHOSSCON at New Delhi

4 State Care Coordination Centers (SCCC) and Home Away from Homes at Lucknow, Bhopal, Bhubaneswar, Patna. Varanasi and Aurangabad launched. CanKids signs MoU with the State Government of Uttar Pradesh as knowledge and support partner for Change for Childhood Cancer

2023

launched at Lucknow, Mumbai, Rohtak

First Regional Office opened in Mumbai,

6

VISION

To enable Global Standards of Survival for childhood cancer in India.

To ensure Quality of Life and Holistic Care for children with cancer and their families through their cancer.

To secure the five Rights of health impaired children with cancer- health, education, their childhood, pain & pallative care and the right to be heard

VALUES

Engaging patients, parents, survivors and community. Working with passion, dedication and emotion that will always keep children and theirfamilies as central focus.

Creating a strong, sustainable organization to make the Change for Childhood Cancer.

Collaborating and partnership with all stakeholders in India & internationally.

Developing low-cost sustainable models and solutions best suited to resource constrained LMICs.

Working with honesty and transparency.

Working professionally to ensure efficiency and accountability.

Ensuring that 80% of all funds raised are utilized to support the children and their families.

IMPACT GOALS

Secured rights of the health impaired child with cancer to health, education, chilhood pain, and palliative care, and the right to be heard.

Reach a survival rate of 60% for childhood cancer in India by 2030.



THEORY OF CHANGE CANKIDS 2023-2030

INPUTS

PHASE 1

OUTPUTS

PHASE 2

INTERMEDIATE OUTCOMES

PHASE 3



Awareness and Access

Awareness is created among the healthcare providers and the general public around referral pathways, detection, diagnosis and treatment.



Improved access to medical resources and information on childhood cancer, thus ensuring improved care services and equitable access for all children.

The establishment of hub and spokes model enables patients and their families to access medical services. ultimately strengthening the referral pathway for children with cancer.



Treatment & Continuity of Care

Access to expert pediatric oncologists, affordable drugs, and therapy is provided, along with palliative care and hematological support. during cancer treatment.



A comprehensive continuum of care is established to support cancer survivors. ensuring a seamless and comprehensive care experience for children with cancer.

Implementing improved hygiene practices bolstered patient immunity, and increased availability of blood for treatment and palliative care collectively contributed to a notable reduction in the incidence of treatment abandonment and opportunistic infections.



Multidisciplinary Care

Financial assistance (monetary/accomodation), pschychological support (therapy and other tools), educational support (bedside/ mainstream edn. and livelihood support(opportunities for sustainable income generation).



Ensure a comprehensive care approach and empower patients, survivors and their families.

The safeguarding of patients and their families against financial risks, psychological burdens, disruption in their educational journey, and the potential loss of livelihood serves to provide comprehensive support throughout their reintegration into society following cancer treatment.



Policy & Advocacy

Community awareness, evidence practices. strategic partnerships and stakeholder dialogue is facilitated and improved.



Advocate for impactful policy changes and enhanced cancer care.

Reinforcement of advocacy efforts for childhood cancer as a public health policy plays a pivotal role in promoting regional, national, and global awareness and the fundamental rights of children affected by the disease.



Research & Development



Research papers are published on the latest treatment practices in childhood cancer.

Informing the key stakeholders about best practices and advancements leads to improved adoption of these practices, specifically about childhood protocols.



Capacity & Skill Building



Skill, knowledge, and overall capacity of internal emanagement, program teams, medical community members, and NGOs are enhanced through workshops and sessions.

Improved knowledge and skills among workshop attenddees around latest treatment methods and technology in childhood cancer leads to strengthening of a cadre of healthcare professionals and the CanKids team.

IMPACT

PHASE 4

LONG TERM OUTCOMES

PHASE 5



Secured rights of the health impaired child with cancer to health, education, childhood pain, and palliative care, and the right to be heard.



Reach a survival rate of 60% for childhood cancer in India by 2030.



100% access to holistic healthcare by 2030 for children with cancer in India and their familiy througout cancer journey.



Patients gain access to holistic pallative care that is required by children with cancer.

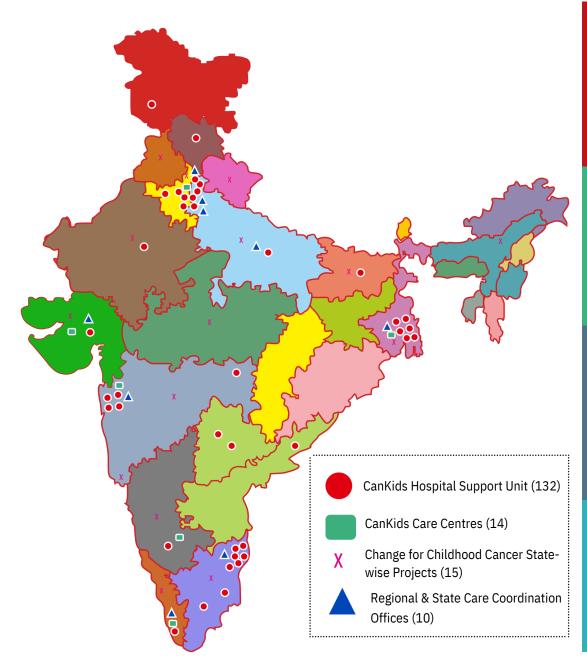


Patients and their families are rehabilitated into society in order to thrive and not suffer longterm financial, psychological, social, neurocognitive difficulty.



Increased prioritisation of childhood cancer at the regional, national and global level.

WHERE WE WORK



CanKid Hospital Footprint

132 | 22 States 57 Cities

North India	48
East India	20
West India	35
South India	29

CanKid Care Centres

| 11 Home Away From Home | 01 Pediatric Palliative Care Centres | 4 | 02 Canshala

Change For Childhood Cancer State-Wise Projects

15

Delhi | Bihar & Jharkhand | Punjab | Rajasthan Uttar Pradesh2 | Odisha | West Bengal | Goa | Gujarat3 Madhya Pradesh / Chattisgarh | Maharashtra | Karnataka | Kerala | Tamil Nadu4 | North East States

1. includes Chandigarh, HP, Haryana, Ladakh, and J&K, 2. includes Uttarakhand, 3. includes Daman/Diu/Dadar/Nagar Havelli, 4. includes Pondicherry

Regional & State Care Coordination Office

10

Delhi-North | Kolkta-East | Mumbai-West | Chennai-South | Lucknow-Uttar Pradesh | Chandigarh-Punjab | Patna-Bihar | Bhopal-Madhya Pradesh | Ahemedabad-Gujarat | Trivandrum-Kerala Reach

18964
CanKids patients under You Are Not Alone (YANA) program

Access
141

Hospital
Partnerships

State Technical Partnerships

3 new MoUs with state governments

2022- Madhya Pradesh 2022- Puducherry 2023 - Uttar Pradesh

Patient Care

257

Manpower provided to partner care centers

Program Budget

34.98 crores
were spent

KEY HIGHLIGHTS

Holistic Care Support

18804

children with cancer were provided complete holistic care support 503
children provided educational support worth

Rs.32 lakhs

1508
survivors enrolled in Passport 2 Life Clinics

1997
are members of Kidscan Konnect

Awareness & Advocacy

Patient Navigators/Advocates

2821

Members of Path Pradarshak Parivarik Sahayak Group (P3SG) group of Cankids Reach
10740
New cases registered under You Are
Not Alone (YANA)

Right To Education

MOU with the
Education Department
TamilNadu to set up
Canshala under Right
to Education

Patient Suport

106
Home Away From
Home Care Centres
providing low cost
accomodation during
treatment to patients
operationalised in 2023



Newly opeational Home Away from Home at Lucknow, Bhopal, Bhubaneswar, Patna, Varanasi and Aurangabad

KEY HIGHLIGHTS

132 Cankids Hospital Support Units (CHSUs) across India

57 cities covered in 22 states

51 Research
Projects currently operational

02 new research projects added in 2023

Patient Suport

2104 families
were provided holistic
accomodation in

16 Home Away from Home

Awareness and Access2Care

The establishment of hub and spokes model enables patients and their families to access medical services, ultimately strengthening the referral pathway for children with cancer.

National Outreach Program

Cankids Hospital Support Unit (CHSU) Projects

Change for Childhood Cancer (CC) States Projects

Regional and State Care Coordination Centres

Cankid Care Centres



ROOM

A. Cankids Hospital Support Unit (CHSU) Projects

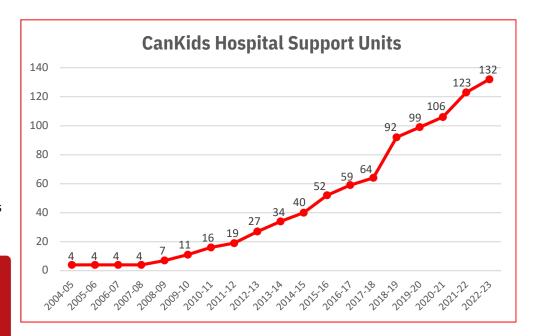
CanKids Hospital Support Units (CHSUs) are partnerships between CanKids and childhood cancer treatment centers and hospitals. The support provided under the CHSU projects include (i) Identify needs and gaps, (ii) Provide social support teams and holistic social support services (social workers, database managers, psychologists, nutritionists, teachers, and parents and childhood cancer survivors who work as patient navigators and advocates), (iii) Build capacities of health and social support professionals, (iv) Promote and supporting research and impact assessment, (v) Advocate for children with cancer and their families to treating teams and hospital administrations.

132 Cankids Hospital Support Units (CHSUs) across India covering **57** cities and **22** states. **9** hospital partnerships achieved in 2022-23.

B. Change for Childhood Cancer (CCC) State Projects

We work with all relevant stakeholders, including State Governments, to ensure that families get the best access to care through appropriate knowledge of where to go, timely diagnosis and treatment, shared care and continuity of care, awareness, and access to care information and resources. A State by State focus helps in looking at epidemiology, mapping out centers treating childhood cancer, systematically building a network of access to care and support, creating awareness, and advocating for childhood cancer control plans, policies, and programs to State Governments.

In 2022-23, we signed Knowledge and Technical Partnership State MoUs with Madhya Pradesh, Puducherry, and Uttar Pradesh, taking the State MoUs in operation to eight. Through our **15** State Projects, CanKids covers **89%** of the total states and Union Territories (UTs). The total reach through our state project in 2022-23 is **32394** (**42%** of the total incidence, an increase of **17%** over 2021-22).



Reach through Change of Childhood Cancer State by State Projects

CCC Project	Commenced	Incidence	Access	Reach
Punjab and UT of Chandigarh	2017	4420	35%	32%
Delhi NCR	2017	971	78%	294%
UP and Uttarakhand	2016/2020	15363	24%	15%
Rajasthan	2016	4836	18%	17%
Bihar & Jharkhand	2020/21	10328	20%	11%
Gujarat	2019	3666	54.7%	
MP and Chattisgarh	2021	6626	9.36%	
Maharashtra	2018	6317	58.9%	
Goa	2019	67	73.1%	
Karnataka	2020	3405	33.4%	
Kerala	2020	1624	88%	
North East States	2018	3018	23.8%	
West Bengal	2017	5265	32.3%	
Odisha	2021	2493	30%	

as per CanKids National Outreach Project mapping exercise

C. Regional and State Care Coordination Centres (SAMANVAY Kendra)

Our Regional and State Care Coordination Centres (RCCC/SCCC) act as Hubs for Change for Childhood Cancer. These centres perform the following six functions:



Mapping state for 4 tier network and referral pathways



Providing healthcare information - Resource directories and Helplines



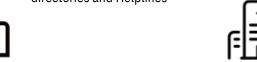
Creating Awareness and fighting stigma

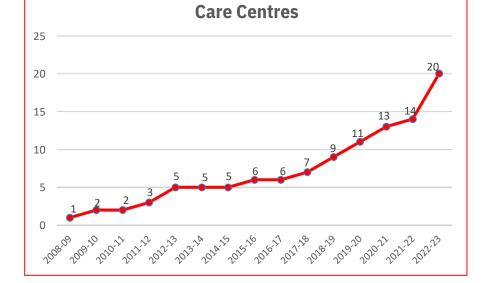


Partnering and supporing hospitals treating childhood cancer



Care coordination accross states and institutions -Home Away from Home, Pediatric Pallative Care Centres, Canshala





In 2022-23, 4 State Care Coordination Centers(SCCC) established at Lucknow, Bhopal, Bhubaneswar and Patna. Currently there are 11 Regional & State Care Coordination Offices.



Deeksha, resident of Sikhobad village, UP, comes from an economically marginalised family. She had swelling and recurrent pain in her right leg. When treatment from local doctors did not yield results, Deeksha's family sought treatment at an Agra hospital, where after a biopsy, she was diagnosed with cancer and referred to IRCH, AIIMS, for further

The family receives support services from CanKids Pediatric Palliative Care Centre (PPCC), including accommodation. Deeksha has undergone five chemotherapies before the surgery and four post-surgery. Referring to the support received from Cankids, Babli Yadav, Deeksha's mother, said, "We had never thought someone would stand by us during

these difficult times. My family and I will never forget this help. I pray that you (Cankid) continue to support helpless families like us. God will bless you."



D. Cankid Care Centres

To help patients receive treatment and continuity of care, CanKid has established 20 Care Centres.

D.1 Home Away From Home

Provide outstation families with affordable, child appropriate accommodation and other support services



Accomodation



Transportation to and from hospital



Nutrition and hygiene suppor t



Education & recreational activity



Psychological support, counselling & expressive therapy



Skills for income generation and reintegration

D.2 Pediatric Pallative Care Centre (SUBHITA)

Provide outstation families with affordable, child appropriate accommodation and other support services



Pain & Symptom Management



Wound Management & IV Antibiotics



Terminal Care, Bereavement Support



Psychological support ser vices



Medical, financial and other patient support



Shared care as a tier 1 centre



D.3. CANSHALA

Schooling adapted to the child's cancer treatment



Formal education in classroom & extra curricular

Non formal (OPD & Ward based) assessment

education



Personalised education program with diagnostics



Child Life school excursions, outings celebration & award



Tutoring and mentoring



Therapeutic educationto children with cancer and sur vivorship

As on March 2023, **19 CanKid Care Centres** are in operation which includes **16 Home Away From Home** (capacity of **236 families** covering in **14 cities**), **1 Pediatrict Pallative Care Centre** and **2 Canshala**. In 2022-23, 6 new Home Away from Home established.

Cankids Hospital Support Unit (CHSU) Projects

DELHI

- a. AIIMS Dr. B. R. Ambedakar Institute of Rotary Cancer Hospital
- b. AIIMS Department of Pediatrics, Division of Pediatric Oncology
- c. AIIMS Dr. Rajendra Prasad, Centre for Opthalmic Sciences
- d. Vardhaman Mahavir Medical College and Safdarjung Hospital
- e. Kalawati Saran Children Hospital
- f. Maulana Azad Medical College
- g. Shroff's Eye Center Delhi
- h. Batra Hospital
- i. Sir Ganga Ram Hospital
- j. Rajiv Gandhi Cancer Institute -RGCI
- k. Indraprastha Apollo Hospital
- I. Max Superspeciality Hospital
- m. Guru Teg Bahadur Hospital -GTB
- n. Dr. Ram Manohar Lohia Hospital

RAJASTHAN

- a. Bhagwan Mahaveer Cancer Hospital & Research Centre
- b. Acharya Tulsi Cancer Research Institute
- c. JK Lon Jaipur
- d. Sawai Man Singh Hospital SMS

PUNJAB

- a. Advanced Cancer Institute, Bhatinda
- b. Post Graduate Institute of Medical Education and Research, Chandigarh
- c. Fortis Hospital Mohali
- d. Dayanand Medical College, Ludhiana
- e. Christian Medical College CMC, Ludhiana

MAHARASHTRA

- a. Govt Medical College
- b. HCG, Manavata, Nashik
- c. Bharati Vidyapeeth Hospital
- d. Deenanath Mangeshkar Hospital
- e. Government Cancer Hospital
- f. Mahatma Gandhi Mission Hospital

Mumbai

a. KEM Hospital b. CTC-PHO-BMT, Mumbai c. Tata Memorial Hospital d. B.J Wadia e. LTMGH Sion f. BYL Nair Hospital

GUJARAT

- a. Gujarat Cancer Research Institute
- b. Tejani Cancer Institute, Surat
- c. SAACHI Hospital, Surat

KARNATAKA

- a. Narayana Hrudayalaya, Bangalore
- b. Shri sankara cancer hospital & Research centre
- c. Kidwai memorial Institute of Oncology
- d. Manipal Comprehensive Cancer Center
- e. Kasturba Medical College, Mangalore
- f. KLE Hospital and JN Medical College

KERALA

- a. Regional Cancer Center Medical College
- b. MVR Kozikode
- c. Baby Memorial Hospital

PUDUCHERRY

- a. Jawaharlal Institute of Postgraduate
- b. Medical Education and Research, JIPMER

WEST BENGAL

- a. Saroj Gupta Cancer Center & Research Institute, SGCCRI
- b. Medical College Kolkata, MCK Hematological Division
- c. Tata Medical Centre, TMC
- d. Medical College Kolkata ,MCK Pediatric Surgery
- e. Seth Sukhlal Karnani Memorial Hospital SSKM
- f. Nil Ratan Sarkar Medical College, NRS
- g. Mission Hospital Durgapur
- h. Narayana Superspecialty Hospital
- a. Institute of Child Health (ICH) Kolkata
- b. King George's Medical University
- c. Kamla Nehru Memorial Hospital

UTTAR PRADESH

- a. Super Speciality Pediatric Hospital, Noida
- b. Banaras Hindu University
- c. Sanjay Gandhi Postgraduate

- d. Institute of Medical Sciences
- e. Homi Bhabha Cancer Hospital Varanasi

BIHAR

- a. Mahavir Cancer Sansthan, MCS
- b. AIIMS. Patna
- c. Indira Gandhi Institute of Medical

GUWAHATI

- a. Dr. B. Borooah Cancer Institute
- b. Shankar Netrayala
- c. Cachar Cancer Hospital & Research Centre
- d. Guwahati Medical College
- e. Assam Medical College

ASSAM

a. AMCH, Dibrugarh

TAMILNADU

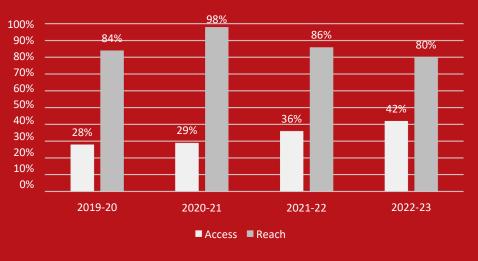
- a. Shri Ram Chandra Medical Center, SRCM
- b. Apollo Hospital
- c. Kanchi Kamakothi Child Trust Hospital, KKTCH
- d. Adyar Cancer Center
- e. ICH Hematology Chennai (Institute of Child Health and Hospital for children)
- f. Rajiv Gandhi Government General Hospital (MMC) Chennai
- g. ICH Pediatric Surgery
- h. Christian Medical College -Vellore
- i. Kauvery Medical Hospital Trichy
- j. TMGMSS Hospital Chennai
- k. Meenakshi Mission Hospital and Research Centre
- a. SKS Salem

42% Access (A2C)

(%age of pediatric cancer incidence reaching cancer centres in India)

80% CanKid Reach

(%age of pediatric cancer hospital patients availing treatment at Cankid partner cancer centres)



Statewise Access Footprint

CCC State Project	CHSUs	Care Centres	Samanvay Kendra
Andhra and Telengana	3		
Punjab and adjoining states	11	1	1
Delhi NCR	15	3	2
UP and Uttarakhand	12	2	1
Rajasthan	5		
Bihar	5	1	1
Gujarat	9	1	1
MP and Chattisgarh	6	1	1
Maharashtra	19	3	1
Goa	1		
Karnataka	7	1	
Kerala	4	1	1
North East States	5		
West Bengal	11 4	1	1
Odisha	1 '	1	1
Tamil Nadu & Puducherry	15 122	1	1
Total	132	17	12

Access and Reach Indices

Indices	North	East	West	South	Total
Access Under CCC Project / Incidence	9981/35918	5532/10776	8852/16676	8029/13 433	32394/76805
Children Registered/ Supported	487 7/8916	933/1658	3170/5752	1760/2923	10740/18804
CHSUs	48	20	35	29	132
Team Strength	97	32	56	29	214
RCCC/SCCC	New Delhi, Chandigarh, Lucknow, Patna	Kolkata, Bhubaneshwar	Mumbai, Ahmedabad, Bhopal	Trivandrum	
MOU	State Govt. of Punjab (2017)	State Govt. of West Bengal- 2020	State Govt. of Maharashtra -2019 Govt. of Madhya Pradesh-2022 Govt. of Gujarat- 2022	Govt. of Tamil Nadu- 2021 Govt. of Puducherry -2022	
Coverage	Bihar, Haryana, Himachal Pradesh, Punjab, Rajasthan, Uttarakhand, Uttar Pradesh, Chandigarh, Jam- mu & Kashmir, Ladakh	West Bengal, Odisha, Jharkhand & North East States	Maharashtra, Gujarat, Madhya Pradesh, Goa, Dadar & Nagar Haveli, Daman & Diu, Chhattisgarh	Tamil Nadu, Kerela, Karnataka, Telangana, Andhra Pradesh, Puducherry, Andaman & Nico- bar Islands, Lakshadweep	

Treatment & Continuity of Care

Access to expert pediatric oncologist, affordable drugs, and therapy is provided, along with pallative care and hematological support, during cancer treatment.

YANA – You Are Not Alone

Medical Support Program

Treatment Support Program

One Cancer At A Time (OCAT)

Palliative Care

Virtual Tumour Board



A. Medical Support Program

The Medical Projects and Support Services works to increase availability and affordability of quality diagnostics, drugs, and treatment interventions to children with cancer and their families.

A.1 Direct Services: Working with drug and pharma companies, distributors, retailers, and hospitals to get the lowest/discounted rates for patient support for:



Drugs and diagnostics



Bone marrow transplants (BMT)



Radiation and chemotherapy



Palliative care



Prosthesis



After Cancer Treatment (ACT)



Financial assistance

(Common funds GMA, EMA, AAC, ACT etc/ Disease specific funds - Sajeev Cankids RB Fund, Golden Crab ALL Fund, Srinavas Cankids APML Fund)

A.2 Indirect Services: Helping families access government welfare schemes and insurance, or other financial sources:



Ayushman Bharat Yojana (PMJAY)



Rashtriya Aarogya Nidhi (Health Minister's Cancer Patients Fund)



Prime Minister's/ Chirf Minister's Relief Fund

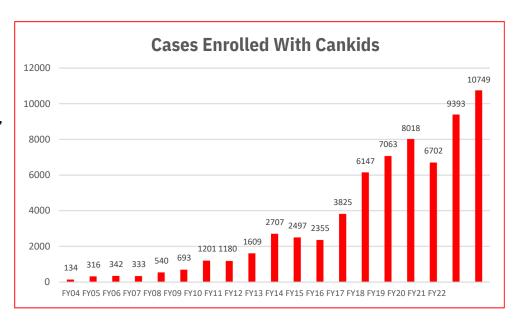


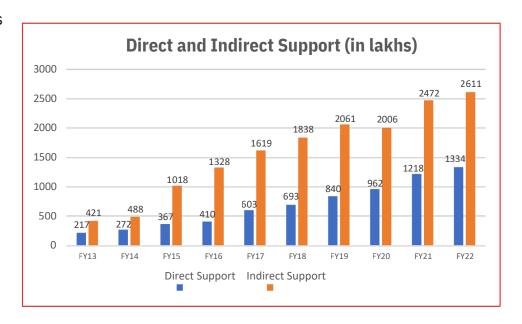
Individual donors/Partners



I being the HOD of Medical Oncology of Medical College Hospital, treat the bulk of paediatrict ALL (Acute Lymphoblastic Leukemia) and other oncology cases. The activity of CANKIDS under the leadership of Social Worker and other supporting staff is instruental in child care, i.e.. supplying the crugs in time, counselling their parents, brining their grievances into quick notice, nutritional assessment, following up the regular cases and building up ALL database. Kudos for their support.

Dr. Swarnabindu BanerjeeAsst Prof and Acting HOD,
Depaartment of Medical Oncology,
Medical College, Kolkata





10749

New Patients Registered

(increase of 15% over FY21)

Rs. 1334 lakhs
Total Direct Support

(Increase of 10% over FY21)

8428

Direct Medical Support Patients

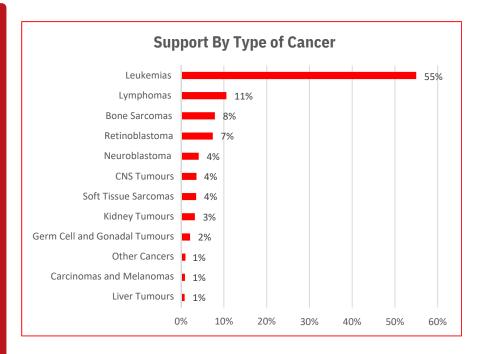
(65% boys and 34% girls)

Rs. 2611 lakhs
Total Indirect
Support

(Increase of 5% over FY21)

Direct Medical Support (2022-23)

Par ticulars	Number	Percent	Amount INR (in lakhs)
Drugs	4948	4 4.4%	637
Diagnostics	3646	32.8%	328
MRD	873	7.8%	74
Surgery	133	1.2%	37
Prosthesis & Implant	281	2.5%	46
Radiation	26	0.2%	11
BMT	39	0.4%	36
ACT	6	0.1%	0.07
Total	11,128		1,330





B. Treatment Support Program



Nutrition management services include assessment, diet counseling, and supplementation to children and survivors, food and rations to needy families, and dieticians at our cancer treatment centers. **15,022** nutrition assessments were done, and **22,462** meals were provided; our team of **14** dietitians and **4** coordinators managed our feeding program.



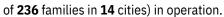
Hygiene and infection control services are provided by educating children, parents, and survivors about water, sanitation, and hygiene (WASH) and providing hospital equipment. **14,669** hygiene sessions were undertaken.



Blood support services, through blood donation camps, donor registries, and delivering blood products to children in need. **Data needed**



Holistic accommodation services are available through CanKids' Home-Away-from-Home units. **16** Home Away From Home (capacity





Patient transport services to and from hospitals and home, both within cities and across state borders.



Cankids' holistic approach to children with childhood cancer is greatly appreciated. Children undergoing treatment from SSGCH are now continuing their treatment with medication, diagnosis, and support provided by Cankids. Cankids conduct education and various celebrations to entertain children and their families during the treatment phase. The support provided by Cankids enables us to provide optimal care to children from underprivileged families. I wish them all the best for their future endeavors.

Dr Sandeep Nemani Hemat-Oncologist, Shri Sidhivinayak Ganpati Cancer Hospital, Mirai



C. CanKids Pediatric Palliative Care Center (SUBHITA)

In 2012, Cankids inaugurated India's first standalone Pediatric Palliative Care Center – a 10-bed inpatient and outpatient service in Gautam Nagar, barely 2 km away from All India Institute of Medical Sciences and Safdurjung Hospital. The only one of its kind for children's palliative care in India, this Inpatient and Outpatient service is a flagship project to provide direct palliative care service to children being treated for cancer in Delhi hospitals and for training and building capacities in Children's Palliative Care across the country. The PPCP is manned by a 25-member team comprising doctors, nurses, nursing aides, physical therapists, and psychologists. The facility has its own Morphine Licence as a recognized medical institution for palliative care. The Subhita-PPCC complies with the WHO Essential Package of Pediatric Palliative Care and Symptom Relief. Seamless transfer to PPCC from the hospitals ensures a better continuum of care. The services provided at the PPCC include the following:

Patient support services



Round the clock operation



Medical and financial support



Terminal care and bereavement support



10 cubilcle ward amd OPD



Physiotherapy ser vices



Pain and symptom management



Psychological support services



Wound management and ambulatory care



Therapy and wellness center



Parent Education and training for Care givers & professionals

Patient support services



Kitchen cafeteria and nutrition support



Entertainment and education



Spiritual support

CanKids Pediatric Palliative Care Centre (SUBHITA)

	2022-23	till date
Cases Registered	1248	937
Patient Admission	101	108
Unique Patient	1248	937
OPD Service	1183	860
Ambulatory Service	503	557
Social Support OPD	1183	860
Morphine Tablets	45	57



D. One Cancer At A Time

The objective of OCAT is

- Make an impact on specific cancers improving outcomes significantly over the next few years.
- To ensure the quality of life and holistic care of children with all cancers under the OCAT projects and their families in India throughout the cancer journey.
- To address the issues of survivorship such as follow-up clinics, P2L.
- To promote and support the quality of research to achieve the outcomes.
- To create awareness in the community.

Cancer Covered under OCAT are



Acute Lymphoblastic Leukemia



Bone and soft tissue sarcoma



Retinoblastoma Project



Hodgkin's Lymphoma



Wilms tumor



Acute promyelocytic leukemia



Burkitt lymphoma



Low-grade glioma

5 OCAT projects in operation as on March 2023 (**3** additional OCAT projects on the anvil for in FY 23-24)

CANKIDS is an NGO working with the Department of Paediatric Surgery, Madras Medical College/ Institute of Child Health since 2016. They provide yeoman service to the children and parents of cancer-affected, many times going beyond the call of duty. They provide physical and psychological support to the kids and their families to tide/cope with the disease and situation. CANKIDS has helped our department to bridge the last mile of care for such children and their families. I hope their organization goes from strength to strength to further the care of cancer patients and lighten their lives.

Dr. R. VelmuruganProf & HOD,
Department of Paediatric Surgery,
Masrad Medical College

Patients provided support through OCAT

Financial Year	Enrollment	Children benefitted
No. of OCAT	5	5
New Cases Registered	3612	4328
Total Cases Supported	5988	6522



E. Paediatric Oncology Nursing Program

Increasing the number of dedicated nurses working in cancer treating units nationwide. The project aims to optimize the nurse-to-patient ratio and improve the education and training of all nurses working in pediatric oncology units across India.

Capacity Building of Nurses

- 1-day nurses workshops completed at Kailash Cancer Hospital, Vadodara, August 2022.
- The 2 days best Nurses=best Care Pediatric Oncology conference successfully completed (supported by St. Jude Children's Research Hospital, Memphis, USA)
- More than 80 nurses from 31 childhood cancer treating centers participated
- Total of 5 faculty nurses and more than 15 faculty doctors participated.
- Pocket guidebook on "Practical Aspect in Pediatric Oncology Nursing" developed and distributed.



CanKid Nurses at Cancer Treating Units

Hospital	Nurses
LTMGH Sion	3
ICH Chennai	3
SAFD Delhi	2
CTC Borivali	2
MMC Chennai	1
JK Lone	2
JIPMER	2
Gov. Rajaji Clinic	1
AIIMS POD	1
AIIMS RPC	1
NRS Surgery	1
Apollo Delhi	1
SMS(BCC) Jaipur	1
SGPGI Lucknow	1
KGMU	1
IMS & SUM Hospital	2
PPCC (Subhita)	6

Total CanKid Sanctioned Nurses: **36** | Total CK Nurses (Filled Positions): **31** | CK (PPCC) Nurses (Filled Positions): **6** | Cankids Supported Hospitals: **18**

F. Virtual Tumour Board

Cankids started Outreach Clinics at Centers where there are no designated pediatric oncologists, and this service is currently being provided by either a pediatrician or a medical oncologist.

The primary aim of this service is to provide expert pediatric oncology input and support to the treating pediatrician/ medical oncologist, as the case may be, to improve knowledge and skills among treating teams.

As of 31st March 2023 we have **13** VTBs of which **11** in North and **2** in East regions total **3343** cases were discussed (including repeat ones).

Cankids has been providing immense support for us in delivering standard treatment for childhood cancer in our hospital, which is located in Trichy, a tier II city of Tamil Nadu. Thanks to Cankids for providing chemotherapy drugs free of cost for children from financially underprivileged families receiving chemotherapy treatment in our hospital. This year, they have increased their support to our department, providing a dedicated Social Worker to work with the affected children and their families to tackle their social issues on treatment. Also, they have extended support in getting investigations

done through their services. This has reduced the financial burden of the affected families, thereby facilitating the children's completion of the treatment without interruptions. This treatment abandonment rates also come down with the constant support from Cankids. I wholeheartedly wish the organization to grow stronger and touch the lives of many more children.

Dr. Vinod Gunasekaran

Consultant, Paediatric Hematology, Oncology & BMT Kauvery Hospital, Cantonment, Trichy, Tamil Nadu,

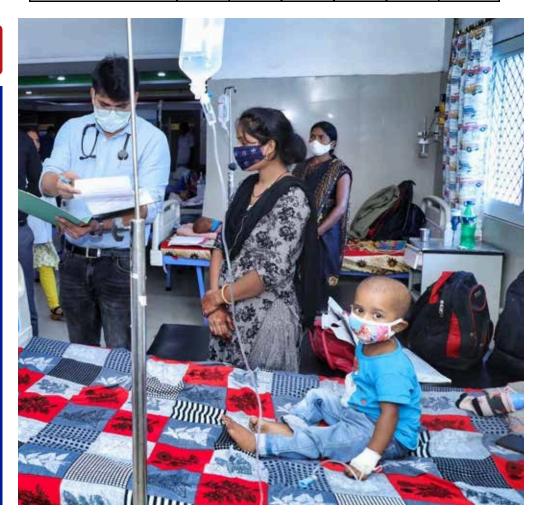
It's an immense pleasure and privilege to share testimonials for Cankids. The great contribution of Cankids in treating and supporting children with cancers in India and our unit at Kidwai Memorial Institute of Oncology is commendable. Programs like HAH, which provides free accommodation, ration, and transport for children with cancer, are greatly appreciated by the highest level of our management team, and this has significantly reduced treatment abandonment at our center. The social worker (Ms. Kavya PS) provided by Cankids helps us manage routine activities and actively participates in providing holistic care to our patients. This group of motivated and hardworking people has paved the way for treating underprivileged children who could not afford quality care in India. I pray God will give you more strength and bless you all on this beautiful journey.

Dr. Arun Kumar AR

Associate Professor and HOD, Department of Paediatric Oncology, Kidwai Memorial Institute of Oncology, Bangalore

Virtual Tumour Board

Financial Year No. of	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23
hospitals under VTB Total	3	3	3	4	8	13
medical advisors Total	2	2	2	3	8	9
doctors from the hospital	3	3	3	4	10	12
Total VTBs conducted	26	29	31	69	157	243
Total cases processed	466	562	660	2063	3405	3343



Multidisciplinary Care

Ensure a comprehensive care approach and empower patients, survivors and their families

Direct Support Program

Education Program

Survivorship Clinics

Patient Navigation, Advocacy & Family Engagement

Network of Caregivers/ Parents/Survivors

Livelihood & Empowerment

Paediatric Psycho - Oncology Program

Direct Support Program

- The safeguarding of patients and their families against financial risks, psychological burdens, disruptions to their educational journey, and the potential loss of livelihood serves to provide comprehensive support throughout their reintegration into society following cancer treatment.
- 2. Patients and their families are rehabilitated into society to thrive and not suffer long-term financial, psychological, social, and neurocognitive difficulties.

There is **12%** increase in overall direct patient support in the last year with **14%** increase in medical, **39%** increase in PPOP and **21%** in PNAFE programs.



Positha is an 11-year-old girl from Chittoor District in Andhra Pradesh from a lower middle-class background. Her father is an unskilled worker and the only breadwinner of the family. Her mother is a housewife, and she has one younger brother.

Treatment history

In June, Positha had a fever and dry cough. Her parents took her to the PHC, and after blood investigations, she was referred to the Institute of Child Health Hospital in Egmore, Chennai, for further treatment. The family met Dr. Ravichandran, and after an assessment, the treating doctor referred the child for bone marrow aspiration and biopsy. With the support from Cankid social workers, the diagnostic test was done, and the child was diagnosed with

B-ALL. Initially, the parents refused to take treatment; however, after sustained counseling by Ms. Premalatha, Cankid's social worker, the parents relented. The child is now doing well and is in the maintenance phase of chemotherapy.

YANA and Medical support

Positha has been provided YANA, four diagnostic, and one drug support worth Rs. 31817.

Accommodation and TSP support

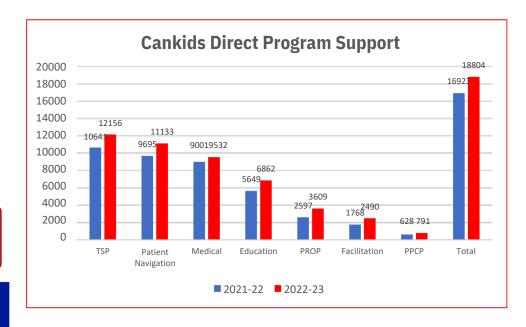
The child has been provided accommodation at the Cankid Home Away from Home(HAH) facility. At HAH, Positha has also received dietary support and 3 RUTF pockets, 4 nutrition supplements, attended 1 hygiene session, and 10 nutrition counseling sessions under the TSP program.

PPOP Intervention

Mindfulness and relaxation with the 5 senses, meditation, and psychoeducation were given to make her understand the treatment procedure and that cancer is treatable.

Non-formal education and psychological support

The child attended 31 non-formal education sessions conducted by Cankid teachers and did a lot of activity sessions with the volunteers. The HAH psychologist assessed the child and mother and



	North	East	West	South	Total
Direct Program Support	4578	910	2359	1098	8934
Medical Facilitation	990	348	957	196	2490
TSP	6274	1002	2982	1887	12133
PPCP	690	5	34	18	747
PPOP	1373	616	1158	466	3609
Education	4078	653	1793	199	6716
Patient Navigation	5117	939	3349	1778	11133
Total	8916	1658	5372	2923	18804
Total % of total support	47%	9%	29%	16%	100%

provided the required psychological support so the parents and the child were free of stigma and fear. The psychologist did three special intervention sessions for children and parents. The child and mother also attended three group therapies.

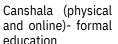
Prognosis

The child completed the treatment and has returned home. Mr Dhanraj, Positha's father, acknowledged the support from Cankid and mentioned that because of the assistance, he could continue to work and also ensure Positha's treatment. The HAH made them feel confident and safe, and the transport and accommodation support reduced their financial burden.

A. Reintegration Through Education Program(CANSHALA)

There are four education tracks provided for children during treatment and posttreatment. They include







Learning activity in care centers and hospitals



Chattai classes-

Learning activity

clinic at OPDs







Scholarships to enable continuing of schooling and higher education

A.1 CanShala: CanShala, the first of its kind in India, was launched in 2012 at the Tata

Memorial Hospital in Mumbai. Based on the 'School in the Hospital' concept, it combines the school service in a cancer hospital and local schooling adapted to the child's cancer treatment. A public-private partnership between the state government and CanKids, CanShala also operates in Bai Jerbai Wadia Hospital for Children, Lokmanya Tilak Municipal General Hospital, and other cancer centers in Mumbai. CanKids also has a school bus service for children in various hospitals and Dharamshalas. In October 2020, we launched CanShala Online to help children continue their education remotely during the lockdown. We have distributed 1084 tablet computers to help children study, stay connected with their teachers, and reach out for medical, food, or transport assistance.

A.2 Learning Activity: Delivering formal and nonformal education, CanKids operates Learning Activity Clinics inwards and OPDs of partnering hospitals across India and our Home-Away-from-Home units. We provide a 'topic-based' syllabus to children aged 3 to 14, covering the 3 "R"s, WASH-C, theatre, speech and vocabulary, and general knowledge. Our Learning Activity Clinics also provide DIY arts and crafts kits, conduct prayers, and organise outings and celebrations to ensure childhood is never on hold. In 2023-23, LAC started in HAHChandigarh & HAH Bhopal and three hospitals - KNHM Allahabad, TMC Kolkata, and AIIMS Rishikesh..

A.4 CanKids Education Scholarship Program: For cancer survivors or those undergoing treatment, CanKids awards scholarships to cover expenses for school or college admissions, exam fees, private tuition, school uniforms, school books, transport, vocational courses, training, and career counseling.

CanShala Enrollment

	Students attended CanShala	CanShala online students	Total students attending CanShala	Reintegration into school/ college
2018-19	427	0	427	79
2019-20	408	0	408	86
2920-21	651	279	930	162
2021-22	580	1271	1851	98
2022-23	642	888	1530	107
Total	2708	2438	5146	532

Scholarships

	Total number of students	Old students	New students	Amount disbursed (INR Lakhs)			
2018-19	523	253	270	31.55			
2019-20	519	300	219	31.18			
2920-21	420	280	140	26.62			
2021-22	653	338	315	39.02			
2022-23	503	271	232	31.55			
Total	2618	1442	1176	159.66			

Stone flower youth festival Cancer kids in India connect with Russia

Our children got this opportunity to ensure that their individuality and creativity could be expressed and to learn more about Russia and the city of Pyshma. 137 students participated in this project and made models on Russian city monuments under the guidance of our teachers at 23 CHSUs. Through this project, the children learned various skills such as teamwork, cooperation, neatness, different techniques of arts and crafts, general knowledge, and using various materials for their projects.

B. The Annual National Childhood Cancer Excellence Award

The Annual National Childhood Cancer Excellence Awards were instituted in 2007 to recognize the indomitable courage and honor the bravery and spirit of children who have fought cancer. These awards encourage and motivate cancer-affected children to pursue a regular academic and extra-curricular life while proving to society that cancer is a disease that can be faced with a positive attitude and spirit. Over the last 14 years of the awards program, over **8000** children with cancer have been recognized, and **251** have been awarded..

The 14th Annual National Childhood Cancer Excellence Awards

- Received 2800+ applications which is approx. 20% increase in the number of applications from the last ANCCEA 2021-22
- The event was held online via zoom on 30th March 2023 and awardees joined from their homes or hospital units.
- The applications were first shortlisted by the Internal committee and the awardees finalised by an external committee.



We had ~300 participants pan- India including, awardees, their parents, Donors, CK Staff

14th ANCCEA Awardees

	Winner Name	Age	CanKids Hospital Unit	City	Categor y
1	Durva Nawkhare	15	Tata Memorial Hospital	Mumbai	Academic Award 11-15 yrs
2	Aleema Duaa	7	MVR Cancer Center & Research Institute	Kerala	Academic Upto 10 Years
3	Nasim Gazi	8	Nil Ratan Sircar Hospital	Kolkat	Academic Upto 10 Years
4	Gauri Rawat	11	AIIIMS RPC	a N.	Academic 11-15 years
5	Kirteelekha Nayak	8	AIIIMS RPC	Delhi	Academic Upto 10 Years
6	Shreyash Sharma	14	AIIIMS RPC	N.	Academic 11-15 years
7	Pranjal Gupta	17	AIIIMS RPC	Delhi	Academic above 15 years
8	Snehal Suryawanshi	18	Bharati Vidyapeeth Homoeopathic Medical College	N. Pune Delhi	Academic above 15 years
9	Soumyadip Samanta	18	Nil Ratan Sircar Hospital	м, Kolkata	Academic above 15 years
10	Dharshini Kumar	10	Institute of Child Health & Hospital	Chennai	Creative upto 10
11	Sanskar Sharma	7	JK Lone Hospital	Jaipur	Creative upto 10
12	Komal Kumari	8	Guru Teg Bahadur Hospital	N, Delhi	Creative upto 10
13	Mukesh Thakur	20	Guru Teg Bahadur Hospital	N, Delhi	кск
1	Moupiya Das	14	Nil Ratan Sircar Hospital	Kolkata	Creative 10 to 15 Years
4	Aadish Prakashan	15	Institute of Child Health & Hospital	Chennai	Creative 10 to 15 Years
\$ 6	Abdul Jamadar	14	Kolhapur Cancer Centre	Kolhapur	Creative 10 to 15 Years
17	Debraj Chatterjee	27	Saroj Gupta Cancer Centre and Research Institute	Kolkata	Creative above 15 years
18	Kashif Bashir	18	Dayanand Medical College	Ludhiana	Creative above 15 years
19	Soumiparna Mitra	16	Institute of Child Health	Kolkata	Creative above 15 years
20	Deepak Tiwari	22	Gujarat Cancer & Re- search Institute	Ahmed- abad	Science & Technology
21	Sumit Kataria	22	Safdarjung Hospital	N. Delhi	Sports
22	Aradhya Singh	16	AIIMS POD	N. Delhi	Regional Award - North
23	Oindrila Paul	16	Saroj Gupta Cancer Centre and Research Institute	Kolkata	Regional Award - East
24	Sharif Alam	17	King Edward (VII) Memo- rial Hospital	Mumbai	Regional Award - West
25	Gourinandana D S	8	Regional Cancer Center	Trivandrum	Regional Award - South

C. Reintegration through Survivorship Clinics (Passport2Life)



Sensitize and educate survivors about late side effects and health and long term fall out of their treatment through Passport2Life Clinics, forums and workshops.



Create an online and offline passport for survivors to access their own records to manage their late effects and an online community portal for support with long term sequelae.

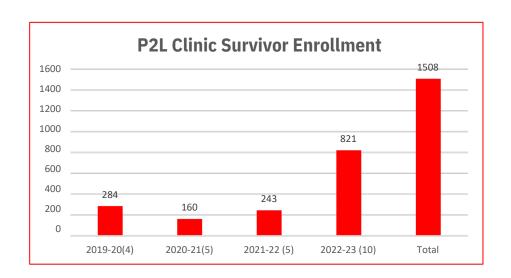


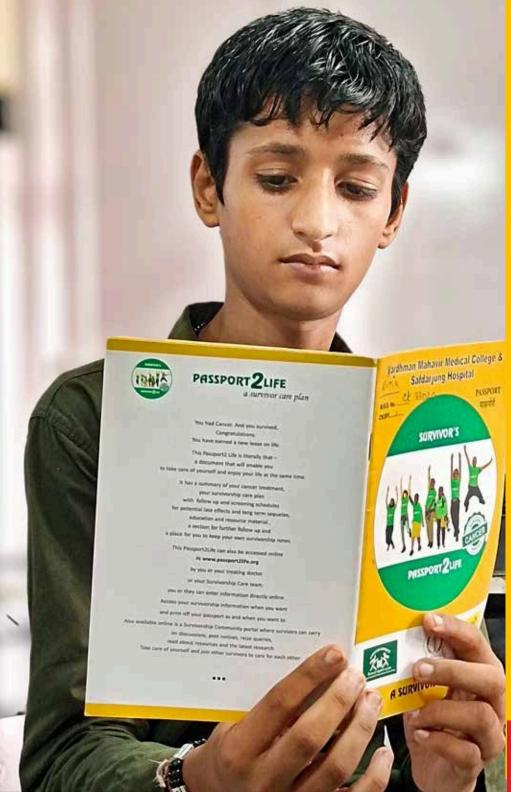
Advocate for the provision of after-treatment summaries and survivorship clinics in the country for regular follow-up of childhood cancer survivors and even run them ourselves.



Initiate specific projects for survivors to provide support in nonmedical areas, which also hamper and affect their lives in the long run.

As of 31st March 2023 we have **10 P2L Clinics** and have registered **1508** survivors for the clinics.





D. Reintegration for Caregivers/ Parents

Cankids has worked to build the voices of patients and parents as an integral part of the system to develop them as patient navigators and advocates. We have the country's two largest peer groups of beneficiaries – Path Pradarshak Parivarik Sahayak Group (P3SG) and the Kids Can Konnect (KCK) survivor group.



Under the survivor group of Cankids **'KidsCan Konnect'**, childhood cancer survivors work to offer peer support, empower children with cancer and help them reintegrate with society, raise awareness on childhood cancer, advocate for the rights of children with cancer, and participate in late side effects research studies and projects.

KidsCan Konnect began in 2006 with 8 members in New Delhi. By 2014, $\bf 10$ chapters were formed in other major cities. Currently the membership is $\bf 1997$, and we aim to have 3000 members by the end of 2023-24.



'Path Pradarshak Parivarik Sahayak Group,' or P3SG, is a group of

parents with experience with childhood cancer care who have become Patient Navigators/ Advocates for newly seeking treatment and families unknown to Cancer. They work to spread awareness and raise their voices for the rights of children with Cancer and their families.

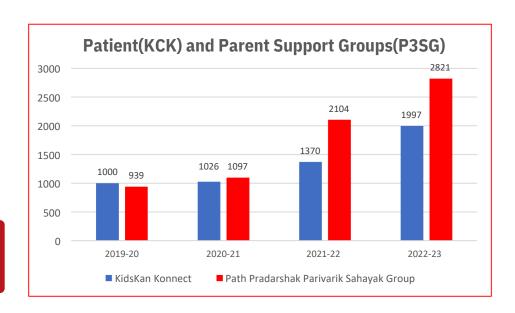
District Parent Patient Navigators(DPPN) models of Patient Advocates contribute to 'Access to Care' by providing referral pathways for children suspected of Cancer and partnering with social and governmental networks.

Through our unique model of Patient Navigation, we have enrolled and trained **74** dedicated parents and caregivers, and another **2,821** members at our CHSUs. In 2022-23, DPPN reached out to **24,230** people **8** suspected cases referred



Cankids organization's ability to relentlessly search for solutions to problems such as childhood cancer and find innovative ways to improve the world is the key to its success. Best wishes for future endeavors of Cankids.

Dr. Tuphan Kanti Dolai Prof & HOD, Depaartment of Haematology, NRS Medical College & Hospital Kolkata, West Bengal





Mother P3SG Patient Navigators at CanKids



I was a homemaker, and my connection to the outside world was limited. I was always in the background, getting things done for the family without much acknowledgment of my contribution. As a typical Indian woman, I did not find anything amiss and was okay with the daily routine. My battle with cancer, which afflicted my son, Tushar, brought me out of the home. Lost as to how I would cope with the demands of treatment and care for my child, it was CanKids who came to my help. Together, Tushaar, myself, and Cankids defeated cancer. Life for me and Tushaar changed; I came out from the confines of the home and involved myself in providing support to parents who were facing difficulty in negotiating the treatment of their cancer-afflicted children. CanKids trained me and encouraged me to be a Patient Navigator. Today, I have an identity and a purpose, and I thank CanKids for bringing me out of the four walls of home and doing socially useful work. My son Tushaar is also working with Cankids and, as a KCK(Kids Can Konnect) member, is working out for Children with Cancer.

Ms Vimlesh Chauhan P3SG Patient Navigator , RP Centre, New Delhi



I had no idea about medicine and medical procedures until I had to battle the cancer of my child. During the treatment of my child, who was diagnosed with ALL cancer, I mastered the treatment protocols related to childhood cancer, and Cankids was a constant companion in that journey. I was chosen as P3SG Patient Navigator of Cankids to support other children with cancer and families in IRCH, Delhi. Now, I help parents with the medicine, protocols, test reports, etc. I feel surprised that I was someone who did not know about even paracetamol, and now I know so much more. The help that social workers provided during my child's treatment helped me master these. I thank God that my child Manish is now better and wish to repay Cankids by helping parents who are fighting childhood cancer.

Ms Seema Devi P3SG Patient Navigator, IRCH AIIMS, Delhi



We are not economically well-off, and it was a financial strain when I had to bring the daughter of my sister to Delhi from Uttarakhand for osteosarcoma cancer treatment. CanKid provided support during the treatment, and I was the caregiver. CanKids identified me as a Patient Navigator, given my experience of managing a childhood cancer patient, and I was attached to AIIMS POD, Delhi. I was paid for my services, and during COVID-19, when my husband lost his job, my earnings from CanKids as a patient navigator were the only financial lifeline for my family and allowed us to live with dignity during those trying times.

"

Ms Sarita Rawat P3SG Patient Navigator – AIIMS POD, Delhi



I am from a family with modest economic means. My son, Shivam, was diagnosed with NHL Cancer, but we could successfully treat the cancer under the holistic care of Cankids. Subsequently, Cankids allowed me to serve society as the Coordinator of the P3SG Patient Navigator program. My son received a scholarship from Cankids, which helped him pursue a Hotel Management diploma; He is now a shift manager. Cankids also supported my daughter's education, and she is currently pursuing nursing education. Without Cankids' support, I would not have been able to educate my children.

"

Ms Nirmala P3SG Patient Navigator and NOP Coordinator – PNAFE department of Cankids, New Delhi

E. Reintegration of Parents

Reintegration & Livelihood: Many parents may need to leave their hometowns and their jobs to seek cancer treatment for their children. We provide them opportunities to earn a livelihood through work like stitching, washing, ironing, and assembling kits for hygiene, COVID safety, and ration.

Empowerment:

- To up skill and build the capacity of the Patient Navigators, parents and the family of children with cancer
- To build up collectives/ reintegration units and in time to encourage and develop the Self-Help group for capacity building of P3SG/ KCK members



Products Made Under Livelihood Initiative

	Hygiene kit Assembled	Mask Stitched	Bandana Stitched	Bag Stitched	Livelihood Earning	Np. of Beneficiaries
Nor th	2056	16 4 48	4112	2056	337184	25
East	689	5512	1378	689	112996	28
West	368	2944	736	368	60352	23
South	750	6000	1500	750	123000	14
Total	3863	30904	7726	3863	633532	90

Livelihood Initiative - Beneficiaries and Earning

	Livelihood Initiative Beneficiaries	Earning
2019-20	78	1.52
2020-21	195	4.90
2021-22	61	8.66
2022-23	90	6.51



Sai Ishan, 2 years old, from Villupuram, Tamil Nadu belongs to an economically marginalised household. His father is the only breadwinner of the family.

In the month of March 2022 Sai developed swelling in the abdominal area with pain, decreased appetite and weight loss. His mother took him to the district hospital and were referred to JIPMER for further management. The family reached the JIPMER on 1st April 2023 and got admitted in paediatric surgery where a biopsy revealed LCH with the biopsy and Sai was shifted

to medical Oncology department for chemotherapy. Sai was prescribed Inj Cladribine 10mg which costs around Rs.1000 per vial. SAi's parents expressed their apprehension regarding cost of treatment, The treating doctor at JIPMER referred the parents to Cankids. CANKIDS social worker to arrange for three cycles of Inj Cladribine and Sai received treatment.

Under the guidance of our Dietitian 1 RUTF, 1 HIC kit, 1 Canourish bag, 1 nutrition supplement was given to Sai. His mother attended 1 Hygiene session and 3 nutrition counselling sessions under the TSP program.

The child has undergone 2 cycles of Inj Cladribine 10MG and is on remission. The parents are very thankful to the support provided under CANKIDS. His parents celebrated Sai's birthday with the Cankids and JIPMER team who guided Sai back to good health.

F. Disability Certificate Service

As many cancer may be the cause of disability, Cankids has set up a team to facilitate issuance of Unique Disabilithy ID Card for children who face disability post cancer treatment.

Till date the total applications for UDID is **123** of which **33** certificate Issued and **12** rejected.

G. Online Expert Opinion to Cancer Patients

Navya and CanKids KidsCan have partnered to provide online expert opinions to pediatric cancer patients. This collaboration has helped many low-income pediatric patients across India.

Starting 2018-19, 83 cases were uploaded and report received for 69 cases. During COVID-19, the service saw a slowdown.



"My son Umarfarukh was diagnosed with blood cancer (Acute promyelocytic Leukemia) in July 2022. We started the treatment at Shri Siddhivinayak Ganapati Cancer Hospital (SSGCH), Miraj. Here, the CanKids' social worker, Maam, met us, and she guided us through the entire treatment process. The diagnostic and drug support provided to us was much needed. The psychological and diet counseling helped to cope with the side effects during treatment. Umar is doing fine. The support of CANKIDS not only allowed the treatment, but it also made us feel wanted and secure through the difficult times."

Mr Yakub Mulla, Father of Umarfarukh

Cancer That May Cause Disability

Type of disability	Cancer Type	
Locomotor disability	Bone cancer and Rhabdomyosar- coma	Surgery
Deaf and Dumb	Brain and spinal cord tumours	Chemotherapy and radiation
Blind/ Low vision/ One eyed	Retinoblastoma	Surgery
Mental retardation	Brain Tumour	CNS



H. Pediatric Psycho - Oncology Program

The program aims to improve mental well-being for children with cancer, their families, and survivors.

1. Psychological Counselling

Face-to-Face / Virtual / Teletherapy Counseling Clinics: Conduct psychological assessments, evaluation, and counseling for various stages of cancer (first line of treatment, relapse, pre-and post-surgery, palliation, end of life, bereavement, survivorship)..

Survivor Assistance Program: Concentrate on Post-Traumatic Stress aspects of survivorship and provides psychological counseling and other therapeutic interventions by addressing the unique needs and challenges of survivors, their parents, and other family members.

Terminal and Bereavement Support: Focusing on breaking bad news/disclosure and preparing the parents and family members in cases where a child battling cancer moves from a palliative to a terminal phase.

Patient and Parent Teaching: Psycho-education sessions are conducted by our psychologists with patients and caregivers on coping with stress, anxiety, behavioural issues, and more.

For 2022-23, **6518** patients and their caregivers were counseled by the Psychologist through **11359** Counseling Sessions across India. 2332 patients received **4426** psychological counseling sessions, and **3851** caregivers were provided with **6792** counseling sessions. The Psychologists conducted face-to-face counseling sessions by visiting the Hospitals and Care Centres. These counseling sessions were focused on the different stages of cancers, like - the first line of treatment, pre- and post-BMT, Relapse, and Pre & Post-surgery. The session helped the child and the parents have accurate and age-appropriate information, which helped reduce their fears and misconceptions that the child and parents were having and also prepared the children for their treatment procedures, thus helping them cope more effectively and reducing the amount of distress and trauma they may experience going into the process of their treatment. During this period, **4468** psychological tests were conducted by the Psychologist for the patients and their caregivers using various methods, including psychometric tests, interviews, and direct observation of their behaviour.

2. Group Therapies

Includes 'Sharing & Caring Sessions' for parents dealing with emotional and psychological burdens. We provide a space for participants to share their experience and problems, stories of loss, hope, and renewal, and their healing process.

651 Sharing and Caring Sessions were conducted with the **2157** patient's caregivers. These interactions allow the caregivers to increase their understanding of self and others, as sharing feelings and experiences with a group of people can help relieve pain, guilt, and stress and instill hope.

OUTPUT	April 2021- 2022	April 2022- 2023
PPOPs services are available online/offline at all CK treating centers	CHSU: 18 & CCC: 8	CHSU: 84 & CCC: 8
No of Expressive therapy provided to patients (cases)	955	2126
No of Expressive therapy provided to patients(sessions)	2058	1585
No of Group therapy is provided to caregivers(beneficiaries)	494	651
No of Group therapy is provided to caregivers(sessions)	1260	2157
No of Psychological need assess- ment is conducted(Beneficiaries)	2241	3975
No of Psychological need assessment is conducted.	2149	4468
No of online/offline Palliative care counselling is provided. (cases)	218	107
Online/offline Palliative care	495	315
counselling is provided. (ses-sions)	195	230
No of bereavement support is provided.(cases)	195	235
No of Bereavement support is provided(sessions)	7357	6518
No of Provided one-on-one special intervention counseling (cases)	11535	11359
Provided one-on-one special in- tervention counseling (sessions)	28	38
No of regular need-based training programs for Psychologist are conducted	18	31
No of Regular need based training program for SST are conducted Pre and Post assessment of the participants are conducted	113	136

3. Expressive Therapies

- Games, art, music, clown therapy
- Relaxation, meditation and story telling sessions
- Safe space for emotional expression
- Opportunity for children with cancer to make the most of their present abilities
- Engaging in something familiar and enjoyable during their course of cancer treatment

During this period, **1578** Expressive Therapies were conducted with **2102** patients. Through Expressive Therapies, patients develop Positive Coping Techniques to deal with anxiety, fear, and trauma. These therapies were done by in-house psychologists who helped the children overcome their fears and encouraged them to share their experiences. This helps reduce their anxiety levels and offers the children a sense of control, lessens pain levels during treatment procedures, and enhances their coping skills.

4. CHILD LIFE

Child-Friendly Wards: We upgrade and beautify the hospital wards by providing a happy and cheerful atmosphere, making a child's hospital stay enjoyable. Under this intervention, we set up playrooms, painted murals in the wards, and provided curtains, Play & Breakfast Tables, art & craft boards, colorful shoe racks, and television.

Toy & Story Book Library: We equip wards with toys, games, and storybooks, which provide a fun and happy environment.

Kekdu Wish Box and Wishing Island: This includes granting the most cherished wish of children undergoing cancer treatment and giving them the freedom of choice by letting them select from a wide range of games, toys, and storybooks available.

During this period, **258** wishes were fulfilled under the Kekadu Make-A-Wish program. The fulfillment of the most cherished wish not only gave happiness and joy to the patients but also had a therapeutic effect on the child as a motivator for coping and hope for the future. The wish-granting provided them with the chance to reclaim a piece of their childhood and a sense of control, <u>especially amid the challenges</u> they faced during their cancer treatment.



Therapeutic impact of toys and games on patient's psychological wellbeing

- 157 children benefited through **Nurturing and Family toys**, which helped them with processing and expression, mastery of fear, anger control, exploring and building relationships, and Psychosocial Development.
- 243 children benefited through **Expressive and Construction toys**, which helped them explore and express their feelings, taught them mastery in problem-solving and creativity, and improved their adaptability to stressful situations.
- 57 children benefited from **Fantasy/Pretend toys**, which helped them express their emotions through playing roles/scenarios and brought them self-awareness and identity exploration.
- 36 children benefited from **Movement and Motion toys**, which helped them with mastery of the situations and gave them an emotional outlet to vent out and self-regulate.
- 76 children benefited from **Perception and Comprehension toys**, which helped them explore their creative side through the projection of emotions and also taught the children the depiction of World view for the child with Improved cognition.
- 5 children benefited from **Acting Out/Aggression Release toys**, helping them with the expression of their emotions, processing, and mastery of fear and anger control.
- 79 children were provided with **Medical Play toys**, which helped them familiarize themselves with and ease their discomfort with medical procedures and distraction from the painful procedures and the hospital environment as they were having issues.
- 129 children were provided with **Distraction toys** to ease the medical procedure and distract them from the hospital and pain.

5. Psycho-education:

In these sessions, the Psychologists teach and educate the caregivers and the patients about their diagnosis, side effects, expected course of treatment, including any potential risks they can expect during the journey of cancer treatment, coping with stress, anxiety, and behavioral issues. They also talk about specific issues like cancer-related stigma, myths and misconceptions, and superstition, which can create a negative influence on the treatment and sometimes can lead to the abandonment of the treatment.

There were **626** psycho-education Sessions with **1564** parents to enhance their knowledge about illness and psychological aspects of cancer in their child. Through these psycho-education sessions, the caregivers/ patients are more empowered to decide how to move forward. Through these sessions, the caregivers were more adhered to their child's treatment protocols as they are more likely to follow through with the doctors' recommendations when they understand the reason and how that may help their child and educate patients and caregivers about their diagnosis and the issues involved can prevent them from finding incorrect or harmful information from disreputable sources.

6.Survivor Assistance program (SAP)

The SAP combines essential supportive interventions like psychological counseling and Sharing and Caring Sessions with the Survivors and their Parents. This intervention addresses the unique needs and challenges of parents, the family, and "Post Traumatic Stress aspects of survivorship.

As a part of the P2L Clinic (Passport to Life) and ongoing **53** Survivors Counseling Clinics conducted by the psychologists, **182** survivors attended 219 counseling sessions. **10** Group Therapies were also conducted with 111 survivors on different issues related to survivorship.

7. CanNurture eClinic

A bi-weekly online service for cancer survivors, Parent Support Group members, and CanKids employees for the reduction of stress, anxiety, and energy levels resulting from emergencies and crises. Appointments were made by calling on the helpline or through the Cankid portal.

6 7 3 clinics were conducted on 102 clinic days by **13** Psychologists. Total **435** counseling sessions were conducted with the Survivors, their parents, P3SG Members and Cankids Employees. **242** new unique clients registered for the clinic and **346** follow-up sessions have been done.



7-year-old Ayan Saha comes from Assam and belongs to a low-income family. His father works as a server in the hotel, and his mother is a homemaker. Ayan was admitted to ICH, Chennai, with swelling in his abdomen and diagnosed with B/L Wilms tumor initially presented with the c/o haematuria, increased urine frequency, then underwent a left

radical nephroureterectomy in July 2022. In the tumor board meeting, doctors planned to take a CT scan and chemotherapy. Now, he has completed chemotherapy, and doctors have planned to give him radiotherapy.

Cankids Interventions

- 1. Helped break the language barrier: The family belongs to Assam, and they were uncomfortable pursuing their child's treatment in unfamiliar surroundings. The Cankid social worker counseled the parents and convinced them to continue the treatment. She also started doing navigation for the patients and kept motivating them to come out from the trauma. Parent Support Group (PSG) members also shared their experiences to reassure the parents..
- Medical Support: Candid provided drug and diagnostic support worth Rs 9,800. Doctors recommended an MRI scan and PET CT scan, and Cankid stepped in and financially supported the MRI scan and PET CT.
- Nutritional status: Cankid supported Ayan with Readyto-Use Therapeutic Food (RUTF) and advised the child for a salt-restricted diet, frequent Renal Function Test (RFT), and adequate fluids. The child's nutritional status was maintained at the median with continuous follow-up.
- HAH: The family was accommodated in HAH, saving them a significant financial burden. They also felt safe and comfortable at HAH.

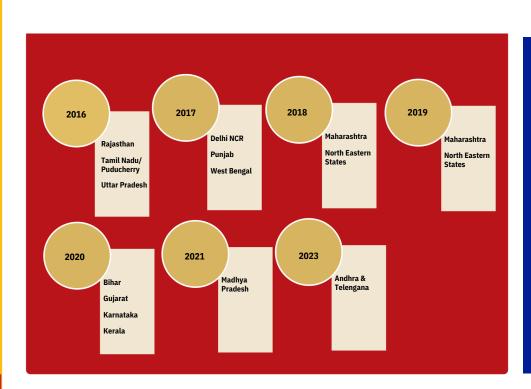


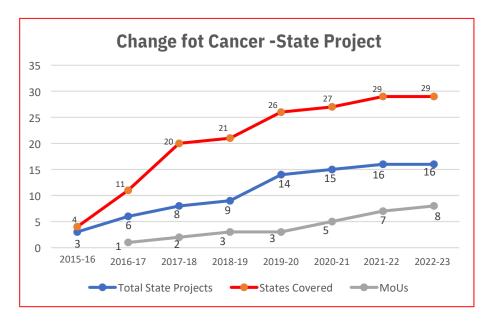


A. Change for Childhood Cancer State Project

One million new cancers are diagnosed annually in India, and 3% of these occur in children.[1] These 50,000 new pediatric cancers annually diagnosed in India comprise about 20% of all pediatric cancers in the world.[2] It is presumed that about 60% of the children with newly diagnosed cancers in India will succumb to the disease as opposed to only 10% of the children in the developed countries. [3]. This huge burden of pediatric cancer can only be resolved through the active participation of public health institutions. CanKids partners with state governments to help improve response to pediatric cancer in terms of efficiency, effectiveness, equity, safety, patient-centricity, and timeliness.

1. Globocan 2020 India Fact Sheet.Last accessed on 2021 Feb 10 Available from: https://gco.iarc.fr/today/data/factsheets/populations/356-india-fact-sheets.pdf 2. International Incidence of Childhood Cancer. Available from: http://iicc.iarc.fr/results/comparative.php 3. Atun R, Bhakta N, Denburg A, Frazier AL, Friedrich P, Gupta S, et al Sustainable care for children with cancer: A lancet oncology commission Lancet Oncol. 2020;21:e185-e224





Treatment of childhood cancer is a challenge especially in a country like India. They almost always come late and the parents don't understand that cancers in this group usually have a very good prognosis and often they don't want to bring their children to a city or a specialized centre for treatment. The other challenge is access to healthcare, which is mostly limited to Tier 1 cities which is a big hindrance to people living in rural areas. Finally the cost of treatment in most cancers can be prohibitive and the duration can be prolonged.

With all these in mind, and many other aspects including education of parents and ofcourse the children- CanKids KidsCan,led by Ms Poonam Bagai, has been doing a wonderful job throughout the country. We had been fortunate to be supported by them for more than a decade now. With their support all the above challenges which had been mentioned are mitigated. Our drop out rate has become negligible, and the success rate has improved significantly.

We hope to work together for the children for many more years to come for the benefit of the children. We have a unique Child Care Centre founded by Late Dr Saroj Gupta, with play room, class room, library, amusement park, BMT unit, blood bank, amusement park and even a toy train like darjeeling. We have a capacity of serving many more patients and would be happy to take more referrals from other centres, with the support of CanKIds.

Dr Arnab Gupta

Medical Director & Surgical Oncologist Saroj Gupta Cancer Centre & Research Institute, Thakurpukur, Kolkata

B. Awareness Campaigns

- 1. Nurses Day 12th May celebrated across all CHSUs and care centers
- 2. Doctors Day 1st July celebrated across all the units
- 3. Go Gold September Childhood Cancer Awareness Month , Celebrated across hospitals and care centers
- **4. September Awareness Access to Care Car Drive** was organized in Punjab, UP, West Bengal, Maharashtra, Tamil Nadu and Gujarat, covered 38 districts
- **5. RB Awareness Workshop** was organized across 5 states namely, Maharashtra, Gujarat, West Bengal, Bihar and Punjab sensitized 575 doctors PAN India
- **6. ICCD 2023 -** 71 CHSU and 9 care centers conducted awareness activity in their respective centers, 308 doctors, 186 nurses and 3108 parents and family participated in ICCD awareness activity pan India.
- 7. Helpline Total 520 Helpline calls recorded PAN India from April 22- March 2023



Cycle For Gold

Marking the World Cancer Day on 4th March 2023 and ICCD 2023, Cankids ran an awareness and advocacy campaign, Cycle for Gold, with an aim of covering 1,50,000 km. 40 KCK & 44 P3SG members in 5 teams covered a total distance of 21,000 km.



TATA Mumbai Marathon

21 KCK members participated in Tata Mumbai Marathon in September 2022. They spread awareness and raised funds for children with cancer.



Pediatric Hematology Oncology Support Services Conferencewas held at AIIMS, Delhi.

The conference has been an annual event since 2016, and its objective is to

- To learn from the experts and each other
- To showcase ones work or some aspect of it
- To network with likeminded organizations, the doctors, and parents and survivors
- To formally join the community of pediatric oncology support services and
- To advocate formally for change in our chosen cause: childhood cancer



Nurses' Day Celebration and Doctors' Day Celebration
Celebration to thank the nurses, doctors, and all health workers
working tirelessly, day and night. 2420 tote bags and badges
were distributed to our nurses across India. 445 customized
coffee mugs were distributed to the doctors during the doctor's
day celebration at 80 CHSUs, care centers, and outstations.
Children made beautiful thank you cards during their arts and
crafts activity for the nurses and doctors.



#throughtheirhands

The ICCD 2023 celebration was done on the theme of honouring the parents. A total of 1364 children participated in ICCD activity across India through 1467 sessions; children actively participated in more than one activity. Children penned poems, drew pictures, wrote essays, and made posters highlighting the efforts of their parents in their fight against cancer. Children dedicated a message to their families and caregivers. Messages were written on hand cut-outs and tied up on the hula-hoop. 556 children sent a letter to the health minister.



September Cancer Awareness Month and Poshan Maah. We have created one master book for the children in collaboration with the TSP

department, where CCAM and Nutrition awareness were

imparted collectively in September through various activity sheets(compiled in the form of a workbook), including CCAM and Nutrition worksheets. Other awareness activities, like puppet shows on early signs of cancer and Nutrition awareness," were done in India. The teachers did a total of 33 Puppet shows with the help of the social support team.

C. Health Information Public Awareness & Communication

- 1. IEC Materials Prepared/Updated
 - 7 Resource Directories (Maharashtra, Gujrat, MP, UP, TN & Puducherry, Punjab, West Bengal)
 - CanKids Leaflet, CK Calendar & other branding products
- 2. Care Centre & HAH Branding (Chennai, Patna, Lucknow, Bhopal, Aurangabad, Varanasi)
- **3. Emailers**: 18 Emailers sent to more than 5,915 individuals
- 4. CCAM & ICCD (Branding, IEC materials, Press Release & Social Media, consolidated pan India report
- **5. Communication actions**: Conferences/workshops (Nurses, Phosscon, Gorkahpur, Lucknow, Cycle for Gold Closing Ceremony at Hamdard events)
- **6. Media Presence** across various campaigns (Times of India, Hindustan Times, Amar Ujala, Dainik Bhaskar, Jagran, Indian Express & much more)
- 7. 16 Films/Videos created Cankids Song, Far Away Home, Cycle For Gold Films, Donor Film Mankind, AT Capital, Kotak, PTC, SHF, ICCD Film, New Year video, Nutrition Video, Piyush Sir Wishes video, I Deserve, Stigma Video, Pacer Video, Diwali Video



261 posts 28,186 reached 12,000 unique visitors



80k reached 20,000 unique visitors



30 lakh reached 1 lakh unique visitors 284 posts



49.5k reached 90,000 unique visitors



CanKid website 43,353 pages view 17,082 unique visits



Social Media Post 500 +

Medical And Social Support Informatics (MASSI)

The Medical and Social Support Informatics Department is at the intersection of healthcare and technology. It is where skills in medical, social support, and computer sciences come together to put technology to its best use in patient care in clinical, social support, and research settings. (i) enabling technological support to teams to manage better relationships

Total Patient
Supported **73499**since 2004 to
March 2023

with our stakeholders, namely patients and their family members, donors, doctors, staff, vendors, and Govt. bodies, etc. and, (ii) standardize monitoring and evaluation practices of Information management, and (iii) find and update best available IT solutions to make the processes more effective, more accessible, quicker and cheaper.

1. Salesforce

- a. New cases registered till March 2023 is **10740** as compared to 9393 in the FY 2022-2023, there is a **14** % increase in the registrations.
- b. Total of **18964** beneficiaries supported as of March 2023 as compared to **16628** in the FY-2022-23. This is increase of 14 %
- **c. 12269** new donors added including individuals' donors in the FY-2022-23, Total we have **78194** added in the vCAN till 31st March 2023.
- **d. 1289** correspondence queries related to the vCAN has sorted out across the Regions of PAN India in the FY 2022-23.
- **e. 12** vCAN Virtual/Physical refresher training provided to the SST across the Region of PAN India.
- f. Parent Helping Parents Fund (PHPF) implementation in vCAN as per the HAH Policy(PHPF/01/2022) across pan-India and live dashboarding.
- g. India's State(36 including UT & District that 762 state wise) mapping in the vCAN for the better data analysis state & district wise.

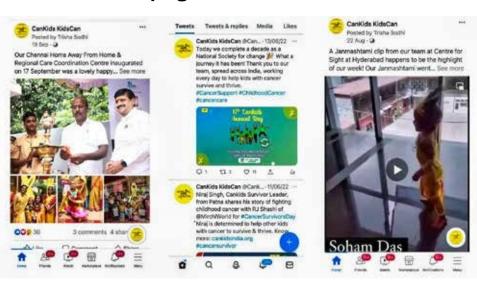
2. IT Capacity Building

- a. The MASSI department provided technical support in setting up 7 new Video conferencing meeting rooms in FY 2022-23. We have a total of 8 video conferencing meeting rooms across the region of PAN India.
- b. Supported 25 Virtual Webinars/Conferences/Regional Workshops/Virtual Events/Board Meetings, etc.
- c. 17 Trainings provided to 250+ staff virtually and physically on various software and basic IT knowledge.

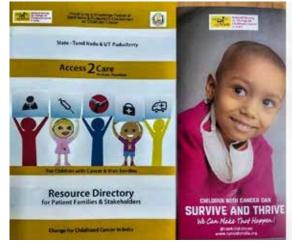
3. Helpdesk Support

- a. vCAN Helpdesk 1289 correspondence queries related to the vCAN across the country.
- b. Provided resolution to over 2000 technical queries across the region of PAN India through remote Support(AnyDesk) and telephone support.

Social Media Campaign



Branding Material - Print





Media Coverage







Car rally for cancer awareness kicks off

Lucknow: Deputy chief mi-nister Brujesh Puthals flag-ged off a our rally for cancer

ged off a unr raily for nance marrieran on Tuesday. Organized by an NGO, shout 70 persons, including cancer sarylyons, are parti-cipating in the campaign. The raily shartlof from Lack-now and will reach Gorakhnew and will reach Gerakh-pur in three days after cov-ring 13 districts including Ayodhya, hooria, Kushima-ger, Mehareipurii, Mau, Siddharehungar, Samika-hirinagar, Shrawati, Bah-ratch, Gooda, Bahrampur, Ballia and Busti.

Ti is eracial that our

children with amount survi-ve and thrive and get the best access to cure. We are happy that such NGOs are able to hold the bands of the famili-



es, guide them from primary' booth centres, tertiary cure centres and provide them fi-nancial, medical, social and psychological support," sa-id Pathale. id Partials.

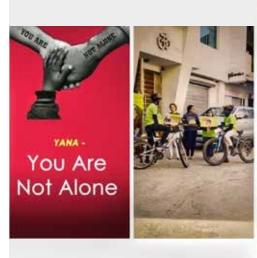
KGMU vice chancellor,
Lt Gen (rend) Bipin Part and
profinant of pardiatric department KGMUDr Nishart
Verma were also present.



हिराद में अपने कहा-बेटी बचायत कहा प्रस्ताद: भी में अरेजरी बेचकर

इतान करणा; 3 तक्की ने सार्टी से इनकार किया, जब बन्तियों को बचा

Video Snapshots







PATHWAY 5 Capacity Building

Skill, knowledge and overall capacity of internal management, program teams, medical community members, and NGOs enhanced through workshops and sessions.

आगुप्मान मारत

Doctors

Nurses

Health Staff



A. Doctors

- 575 doctors were sensitized through various awareness activities during the period as compared to 56 doctors in last year same time period.
- NTPPO Workshops 727 doctors were sensitised through 11 NTPPO workshops during the period.

B. Nurses

- Nurses Training in CHSU's 219 Nurses were trained during the period as compared to 164 Nurses last Year. There has been 34% increase in nurses sensitisation during the period.
- The Pediatric Oncology Nursing 2022 best nurses = bestCare symposium cum workshop held in 17th- 18th November 2020 at New Delhi. The symposium was organized by CanKids and St Jude in partnership. More than 80 nurses from 31 childhood cancer treating centers participated.

C. Health Care Workers

- ASHA- Total 7428 ASHA workers were sensitized across 7 State during the period as compared to 1989 ASHA during last Year. There has been 273% increase in ASHA sensitization during the period.
- Social Support Teams CanKids SST were sensitized through 5 training sessions during April to March 2023.
- NGO/CSO's- 6th Pediatric Hematology Oncology Support Services Conference (PHOSSCON) was organized at New Delhi on 19th and 20th November 2022. The Conference was organized in collaboration with Umeedein, ICH Ugam, Cancer Kids, Hope foundation and Jiv Daya foundation.36 organisations,81 Participants from 17 cities representing 12 states participated in the same.

As the State interventions are increasing, the focus has increased on reaching the grassroots level to create sensitization about childhood cancers at the PHC and CHC levels. In FY 2022-2023, we conducted all 74 sessions, covering 8545 participants across the MoU-signed states.

Training Details

	2021-22		2022	2-23
	Events	Participants	Events	Participants
Internal Team including SST	8	270	5	150
HCPs (Doctors, Nurses)	4	220	16	1117
HCWs (ASHA.Aangawadi Workers)	33	1989	58	7428
CSB for NGOs	2	342	1	81
Total	48	2821	80	8776

Cankids is doing a wonderful job for society. The support they give to the children affected by cancer and to their families is unparalleled. The work done by CanKids in the upliftment of children affected by cancer includes primarily treatment support (costly tests, medicines, and hygiene kits). Apart from this, they help these kids in their education and nutrition and provide residence close to the hospital, which is commendable. Can kids create awareness about childhood cancer in public and take up the issue with the concerned authorities in the government, which will lead to better outcomes for the children affected by cancer. We wholeheartedly thank Cankids for their continued support of these children.

Dr. T. Kasiviswanathan, MD, DM HoD and Senior Consultant Pediatric Hemato Oncology and BMT MMHRC, Madurai

The Department of Medical Oncology has been working with team CANKIDS for over seven years to improve the care and outcomes of pediatric cancer patients. This has been an exciting and rewarding collaboration. The input, support, and infectious enthusiasm of Team CANKIDS have touched upon the lives of hundreds of patients over the last few years. I want to extend my gratitude to the CANKIDS organization, starting from the chairpersons, senior managers, regional coordinators, nurses, dieticians, social workers, and PSG workers. The team has exhibited exceptional commitment, energy, and consistent growth. The growth CANKIDS has had as an organization is reflected in its level of support, which has increased both in quality and quantity. The special support systems for patients and families in the two years of the COVID-19 pandemic (ration for poor patient families, drugs being couriered to their homes, travel support, counseling support) were lifesavers. In the last year or so, our center has had a CANKIDS-supported late effects clinic. We wish the organization continued growth, and we are proud to be associated with CANKIDS. With regards from the JIPMER team!

Prof.Prasanth GanesanDepartment of Medical Oncology, JIPMER



Pediatric Cancer Research Institute

The CanKids KidsCan DSIR recognized Pediatric Cancer Research Institute (PCRI) is a research organization focused on pediatric cancer. Established in 2013 as QCRI, it promotes and supports research, completing 25 projects and managing 34 ongoing ones. PCRI emphasizes multi-center, patient-led research, collaborates locally and internationally, and addresses health systems and policy aspects to advance pediatric cancer care. Its mission is to facilitate engagement, foster partnerships, and create networks in pediatric cancer research.

Thematic Research Areas



Access to care: RT mapping study, Access India study(largest one), HOPE study, PANTRAC- Patient navigation and tracking to reduce abandonment of treatment, cost of illness pilot study.



Disease-specific: BMT project, Hodgkin's lymphoma relapse, Hodgkin's lymphoma, retinoblastoma project, NRS icicle clinical trial, Neuroblastoma project and Indian childhood acute Promyelocytic Leukemia study.



Quality Care: Measure the impact of CVC Bundle on care of childhood cancer patients in India.



Impact assessment: WHO GICC India responded.



Supportive and continuation of care: KAP on hygiene among children with cancer in India, Girl childhood cancer patient and survivors study, C2S study, Assessment of feasibility and impact of training of nurses at PGICH (Nurse Project), DEXA RCT study, Patterns of End-Of-Life Care in Children with Cancer in India - AMulticenter Retrospective Study,



Advocacy: All projects are closed

Highlight of Research

Activities	FY 2021-2022	FY 2022-2023
Total no of protocols added since 2013	45	51
Ongoing research protocols	15	18
No of new projects added	9	2
No of projects closed	21	24
No of studies presented at various national & international events since 2013	43	48
No of paper published since 2015	20	20
Patient registered in research studies increased by %	9%	1.2%
Inhouse & Outhouse studies	80% and 20%	78% and 20%
Studies fully funded by Cankids	38	38
Studies partly funded by Cankids	2	3

Research Partners



through multicentric collaborative research



capacity building in pediatric cancer & patient advocacy group



collaboration & data, Information & technology driven research



multistakeholder groups ICCI- Indian Childhood Cancer Initiatives



Diagnostic Labs & Imaging Centers



Hospitals through CanKids hospital support units

STAFFING



Staff Employees	
Consultants Other	323
staff Grant staff	17
P3SG mrmbers KCK	11
Interns/TOP Ups	22
Total staff	27
	9
	409

Volunteer	
Volunteer - SMT	6
Volunteers MMT	5
Board	12
Other Society Member	27
Ambassadors	9
External Advisors	17
KCK Survivor and Peer Members	1906
P3SG, Parent Awaaz and Periodic Members	2028
Other Volunteers	128
Total	4138

409

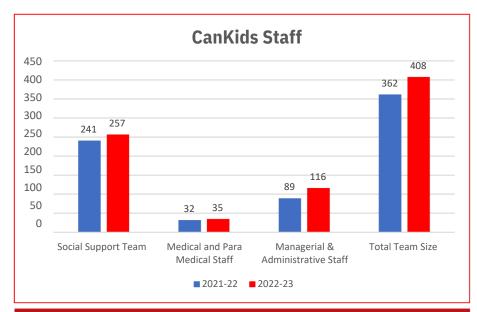
Staff

4138

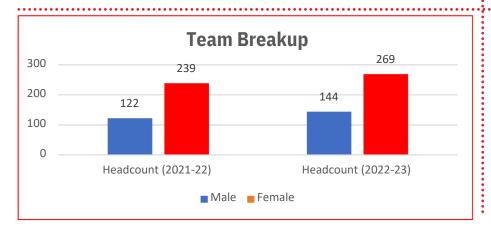
Volunteer

4547

Total CanKid Strength

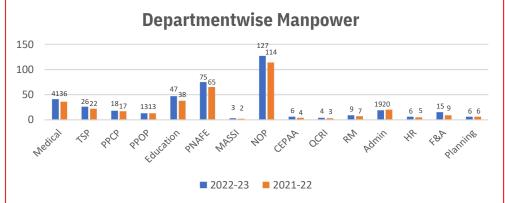


The Social Support team constitutes **62%** of the total staff strength There has been a total **13%** increase in the staff team size in the last year; the maximum increase is in the state care coordination centers as we have focused on strengthening the regional management. P3SG (Parent Group) membership is **2850**, and KCK (Survivors) membership is **2000**.



CanKids Staff

	2020-21	2021-22	2022-23
Social Workers	65	83	81
Data manager	2	4	6
Teachers/ tutors	28	38	37
Dietician/ nutritionist	14	17	17
Psychologist	14	14	12
Patient Navigators / Care Coordinators	3	6	6
Parent Group members-Stipend	46		
Patient Navigator/Parent Group members employ- ees & consultants	14	54	64
Super visors	5	8	15
Other staff at Care Center (cleaners, Cooks, Drivers nursing aids)	16	17	19
Subtotal- Social Support Team	206	241	257
NURSES (in Hospitals & care centres)	28	25	30
Doctors	2	4	3
Pharmacist		3	3
Total (SST + Nurses)	236	273	293



LEADERSHIP

BOARD MEMBERS



Ms. Poonam Bagai FOUNDER-CHAIRMAN



Mr. Srinath Mukherji EXECUTIVE MEMBER



Ms. Gini Gulati EXECUTIVE MEMBER



Mr. Mukul Marwah VICE CHAIRMAN



Ms. Priti Dhall EXECUTIVE MEMBER



Dr. Venkatraman Radhakrishnan EXECUTIVE MEMBER



Ms. Sonal Sharma CO-FOUNDER & SECRETARY



Rabani Garg EXECUTIVE MEMBER



Mr. Tarun Ohri TREASURER



Mr. Sandip Jariwala EXECUTIVE MEMBER

MEDICAL ADVISORS

Dr Amita Mahajan	Dr Ramandeep Singh Arora	Dr Vikramjit Kanwar	Dr Ross Pikerton	Dr Manas Kalra
Dr Shruti Kakkar	Dr Archana Swami	Dr Revathi Raj	Dr Prantar Chakrabarti	Dr Santosh Honaver
Dr Sima Das	Dr Manish Aggarwal	Dr Prakash Satwani	Dr Rakesh K. Goyal	Dr. Shweta Bansal
Dr Sandeep Soni	Dr Alok Srivastava	Dr MR Rajagopal	Dr Shushma Bhatnagar	Dr Sunita Saxena
Dr Pooja Sharma				

AMBASSADORS

Ruchira & Piyush Gupta	Shoba & Alok Agarwal	Alamelu & Arvind Narainswamy
CEO, DBS Singapore	CFO, Reliance Industries Ltd, Mumbai	Riyadh UAE
Satish Dhawan Ex Chief Administrative	Dr Naveen Talwar Orthopaedic Surgeon & Rotarian, Delhi	Dr Blossom Kochchar Founder & Chairperson, Aroma Magic, Delhi

CXO CENTRAL LEADRSHIP

Dr Dhanshri Pradhan Dr Haresh Gupta Gopal Sharma



Balance Sheet

For the year ended on 31st March 2023 (in Lakhs)

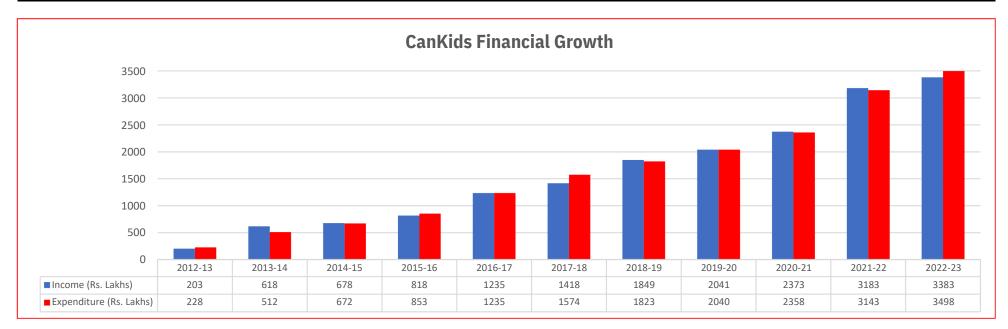
Particulars	As at 31 March 2023	As at 31 March 2022	Variance (in Rs)	Variance %
Sources of funds				
Restricted funds	572	293	279	95%
Unrestricted fund	(140)	(26)	(11	447%
Liabilities			5)	
Current liabilities	772	412	360	87
Total (Source of funds)	1,204	679	525	%
Application of funds				77
Non Current Assets				%
Property, plant & equipment tangible assets	386	152	234	154%
Current assets, loans and advances				
Cash and bank balances	639	339	300	88%
Recievables	28	111	(83)	-75%
Loans & Advances	147	77	70	92%
Other current assets	3	1	2	299%
Total (Application of funds)	1,204	679	525	77%

Income and Expenditure Statement

For the year ended on 31st March 2023

(in Lakhs)

Particulars	Year ended 31 March 2023	Year ended 31 March 2022	Variance (in Rs)	Variance %
Income				
Grants and donations	3,361	3,164	197	6%
Other income	22	19	3	17%
Total (Source of funds)	3,383	3,183	200	6%
Expenditure				
Program Expenses	3,068	2,7 7 7	291	10%
Fund raising expenses	47	68	(21)	-30%
General and administrative expenses	330	268	62	21%
Depreciation	52	29	23	81%
Total (Application of funds)	3,498	3,143	355	11%
Surplus for the year transferred to general reserve	(115)	40	155	-385%





Spends on Direct Beneficiary

Amount in lakhs

Programs	FY 2022-23	FY 2021-22	Change from previous year	% change from previous year	
Medical Projects &	1.403	1326	77	6%	
Support Program	1,403	1320	//	070	
Treatment Support	474	204	-30	450/	
Program	174	204	-30	-15%	
Pediatric Pallative Care	5	7	-2	-33%	
Pediatric Psycho Oncology (PPOP)	5	4	1	25%	
Education Program	56	54	4	7%	
Total	1,644	1,594	50	5%	

Direct vs Total Spends

Amount in lakhs

Programs	FY 2022-23	%age
Total Projected Spend	3,498	100%
Total other Expenditure	1,854	53%
Total Direct Beneficiary Expenditure	1,644	47%

Funding Type

Fund Type	Donor (Count)	Amount (INR)	Contribution %
Restricted	249	2928	87%
Unrestricted	2257	455	13%
Total	2506	3383	100%
Fund Type	Donor (Count)	Amount (INR)	Contribution %
Fund Type INR	Donor (Count) 2412	Amount (INR) 2657	Contribution % 79%
3.			

Spends By Activity

Amount in lakhs

Programs	Amount Spent	% of Total	Amount Spent	% of Total
Medical	1,476	45%	1,418	45%
Treatment support program TSP	437	13%	410	14%
Pediatric Palliative Care	65	2%	52	2%
Pediatric Psycho Oncology (PPOP)	72	2%	60	2%
Education	213	6%	187	6%
Patient and Family Engagement	164	4%	133	4%
MASSI	16	0%	14	1%
National Outreach	371	10%	317	10%
CEPAA	41	1%	26	1%
Capacity & Skill Building Department	150	3%	86	3%
QCRI	45	1%	31	2%
Resource Mobilization	48	2%	68	2%
Admin	93	3%	107	4%
HR	52	1%	32	1%
Finance	89	2%	64	2%
Planning & Governance	114	4%	109	2%
Add Depriciation	52	1%	29	1%
Grand Total	3,498	100%	3,143	100%

WITH HEARTFELT GRATITUDE

TO CSR AND FOUNDATION GRANTS AND OTHER CORPORATE DONORS

₹ 5 Cr & above

Kotak Mahindra Group

- Kotak Mahindra Bank Limited
- · Kotak Mahindra Life Insurance Company Limited
- · Kotak Securities Limited

Deutsche Bank Group

- Deutsche India Private Limited
- Deutsche Bank AG

₹1 Cr to under 5Cr

Aditya Birla Capital Foundation

AT Capital Group

- AT Capital Charitable Foundation
- Experion Capital Private Limited
- Experion Developers Private Limited

Mannkind Charitable Society

Access Health Care Group

- Access Health Care
- Shree Sarita Jain Foundation

₹ 50 Lakh to under 100 Lakh

Cipla Foundation

HDFC Life Insurance Company Limited

Azim Premji Philanthropic Initiatives Pvt Ltd

Indorama Charitable Trust

Markit India Services Pvt Ltd

Relief from Cancer

Northern Aromatics Limited

FXI Services India Pvt Ltd.

₹1 Lakh to under 10 Lakh

Ashbee Systems Limited

Guardian India Operations Pvt Ltd

Pfizer Limited

Angira Hansraj Gupta Charitable Trust

Executive Centre India Private Limited

GTN Enterprises Limited

Fare Portal India Pvt Ltd

Bhanix Finance & Investment Limited

Sendoz Commercials Pvt Ltd

Aeries Financial Technologies Private Limited

Grand Royale Enterprises Limited

St. Baldricks Foundation .

Haldiram Ethnic Foods Pvt Ltd

XL India Business Services Private Limited

Metatech Medical Pvt Ltd

Globus International Coaters Pvt. Ltd.

Genlite Engineering Pvt Ltd

Perowshaw Dhunjishaw Bolton Charities

Brown University

Asian Worldwide Services India Pvt Ltd

Roshan Lal Public Charitable Trust

Jiv Daya Foundation

DCM Shriram

Madanlal Patodia Charitable Trust

Unified Credit Solutions Pvt Ltd

Manay Sewa Sansthan

Resonance Health

Rotary Club Of Bombay Hills South Charities Trust

Rai Industrial Power Limited

Baroda Shakti

Hope Child Cancer Care Foundation

WITH HEARTFELT GRATITUDE

TO OUR CHANGE FOR CHILDHOOD CANCER IN INDIA FUND, CORPUS, ANNUAL, MONTHLY, ONE TIME AND IN-KIND INDIVIDUAL GIVING DONORS

₹ 40 Lakh & above

Kanaka & Siddhant Sirpal

₹ 20 Lakh to under 40 Lakh

Poonam Bagai Rabani Garg

₹ 10 Lakh to under 20 Lakh

Dr Scott Howard

Piyush, Ruchira & Dr and Mrs Gupta

Drs Sadhna and Shankar

S Radhakrishnan

Shantanu Das

Manju Jain

Seema Tulsyan

Gokul & Lakshmi Laroia

₹ 5 Lakh to under 10 Lakh

Ram Nayak

Roopak Taneja

Kirti Seth

Avaneesh & Malika Raghuvanshi

Ananthraman Venkatraman

Rahul Mookerjee

Ravi Mehrotra

Sunil & Anjil Duggal

Srinath Mukherjee

Vikram. Shalini Sud & Ankit Sud

Vikram & Urvashi Talwar

Arvind Alamelu & Usha Narainaswami

Mohit Aggarwal (in kind rations for HAH Kolkata)

₹ 2 Lakh to under 5 Lakh

Chris Williams

Harit & Reena Talwar

Mamta Mehta

Rishad Murtaza

Ankit Sud

Priyanka Jain

Ajay & Punita Lal

Satish Dhawan

Ravindra Wankar

₹ 1 Lakh to under 2 Lakh

Blossom Kochhar

Soumya Banerjee & Priti Dhall

Sumati Bhatia

Kapish Jain

Abhishek Awasthi

Zubbair Darrab Aria

Vanita Chhabra

Aarti Jayant Mishra

Anna Paul Mechery

Kaku Pradeep Nakhate

Pavan Bagai

M.K Jain

Rajesh Pandit

Sharookh Lashkari

Sivakammi Kumar

Vivek Jhunjhunwala

Rumki Fernandes

TO OUR **PARTNERS** & PLATFORMS

Relief from Cancer Give India Foundation Milaap Social Venture United Way of Mumbai Online Giving Foundation Pallium India

UK Fund for Charities

Walker Chandiol (Formerly Walker, L-41 Connaught C New Delhi 110001 India

T +91 11 4278 707 F +91 11 4278 707

Independent Auditor's Report

To the Members of Cankids...Kidscan

Opinion

We have audited the accompanying financial statements of Cankids...Kidscan ('the Societ comprise the Balance Sheet as at 31 March 2023, the Income and Expenditure Account, the and Payments Account for the year then ended, and a summary of the significant accounting and other explanatory information.

In our opinion and to the best of our information and according to the explanations given to aforesaid financial statements give a true and fair view in conformity with the Accounting S issued by the Institute of Chartered Accountants of India ('ICAI') and other accounting generally accepted in India to the extent considered relevant by management of the Soci 31 March 2023, including the financial position of the Society as at 31 March 2023, its deficit over expenditure and its receipts and payments for the year ended on that date.

Basis for Opinion

We conducted our audit in accordance with the Standards on Auditing issued by the I responsibilities under those standards are further described in the Auditor's Responsibilities Audit of the Financial Statements section of our report. We are independent of the Saccordance with the Code of Ethics issued by ICAI and we have fulfilled our ethical respons accordance with the Code of Ethics. We believe that the audit evidence we have obtained is and appropriate to provide a basis for our opinion.

Responsibilities of Management and Those Charged with Governance for the !

The Management is responsible for preparation and presentation of these financial statements a true and fair view of the state of affairs and results of operations of the Firm in accordance Accounting Standards issued by the ICAL and other accounting principles generally accepted. This responsibility also includes design, implementation and maintenance of adequate internal relevant to the preparation and presentation of the financial statements that give a true and and are free from material misstatement, whether due to fraud or error.

Walker Chandiok & Co LLP

the going concern basis of accounting unless the management either intends to liquidate the Society or to cease operations, or has no realistic alternative but to do so.

 Those Charged with Governance are also responsible for overseeing the Society's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

- 7. 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 Standards on Auditing will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.
- As part of an audit in accordance with Standards on Auditing, we exercise professional judgment and maintain professional scepticism throughout the audit. We are 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
 whether the Society has in place an adequate internal financial controls system with reference to
 financial statements and the operating effectiveness of such controls
 - Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the 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.



Walker Chandiok & Co LLP

 We communicate with management 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.

For Walker Chandiok & Co LLP

Chartered Accountants

Firm's Registration No.: 001076N/N500013

Ashish Gupta

Partner

Membership No.: 504662 UDIN: 23504662BGWGGG4836

Place: Gurugram Date: 22 August 2023 Cankids...Kidscan Balance Sheet as at 31 March 2023

(All amounts in & lakhs, unless otherwise stated).

The state of the s			
	Schedule	As at 31 March 2023	As at 31 March 2022
Sources of funds			
Funds			
Restricted funds	1	572.23	292.73
Unrestricted fund	1 2	(140.48)	(25.66)
Liabilities			
Current Sabilities	3 .	772.22	412.39
		1,203.97	679.46
Applications of funds			
Non-current assets			
Property, plant and equipment			
Tangible assets	4	386.26	151.80
Current assets, loans and advances			
Cash and bank balances	5	639.40	339.23
Receivables	6	28.23	111.03
Loans and advances	5 6 7 8	147.03	76.64
Other current assets	8	3.05	0.76
		1,203.97	679.46
Summary of significant accounting policies and notes to the financial statements	14-15		

This is the Balance Sheet referred to in our report of even date.

The schedules referred to above form an integral part of the financial statements.

For Walker Chandiok & Co LLP

Chartered Accountants

Firm's Registration No.: 001076N/N500013

For and on behalf of Cankids...Kidscan

Poonam Chaignan

Partner Membership No.: 504862

Place: Gurugram Date: 22 August 2023

Place: New Delhi

Date: 22 August 2023

Tarun Ohri

Treasurer

Gopal Sharma

Chief Finance Officer

Income and Expenditure Account for the year ended 31 March 2023

(All amounts in # takhs, unless otherwise stated)

	Schedule	Year ended 31 March 2023	Year ended 31 March 2022
Income Grants and conations	0.00		
	9	3,360.67	3,153.94
Other income	10	22,04	18.92
		3,362.71	3,182.86
Expenditure			
Program expenses	11	3,068.10	2,777.45
Fund raising expenses	12	47.39	66.03
General and administrative expenses	13	329.66	266.11
Depreciation	4	52.38	26.92
		3,497.53	3,142.52
(Deficit)/surplus for the year transferred to General reserve fund		(114.82)	40.34

Summary of significant accounting policies and notes to the financial statements

This is this Income and Expenditure Account referred to in our report of even date.

The schedules referred to above form an integral part of the financial statements

For Walker Chandiok & Go LLP

For and on behalf of Cankids...Kidscan

Chartered Accountants

Ashish Gupta Partner

Place: Gurugram

Date: 22 August 2023

Membership No : 504882

Firm's Registration No : 001076N/N500013

Place: New Dehi

Date: 22 August 2023

Taron Ohri Treasurer

14-15

Gopal Sharma Chief Finance Officer



Cankids_Kidscan

Receipts and Payments Account for the year onded 31 March 2023

(All amounts in F lakhs, unless otherwise stated)

	Year ended 31 March 2023	Year ended 31 March 2022
Opening balance		
Clish in harid	0.23	0.16
Cash at bank	211.15	670.57
Fixed deposits	127.85	127.17
	339.23	797.90
Receipts		
Grants and donations received		
- Grant and donations	3.678.60	2,711.03
- Corpus / earmarked donation / capital grant	20.80	20.00
Other monets.		20,00
- Interest received from bank	14:30	14.12
- Miscellaneous receipts	28.99	29.04
AND THE RESERVE OF THE PROPERTY OF THE PROPERT	3,742.69	2,774.19
	0,174.40	2,774.19
Payments.		
Program expenses	2.716.93	2,812.47
Fund talking expenses	47.35	68.68
General and administrative expenses	338.99	257.98
Tangible assets purchased during the year	268.89	72.25
Advances given to employees/others.	70.36	21.48
	3,442.52	3,232.86
Closing balance		
Cash is hand	0.25	0.23
Cash at bank	289.95	
Fixed deposits	349.19	211.15
		127.85
	639.40	339.23

For Walker Chandiok & Co LLP

Chartered Accountants Firm's Registration No.: 00107554N500013

Monitorship No.: 504662

Pface: Gurugram Date: 22 August 2023

For and on behalf of Cankles...Kidscan

Treasurer

Tarun Ohri

Gopal Sharma Chief Finance Officer

Place: New Dehi Date: 22 August 2023



Schedules forming part of the financial statements as at 31 March 2023

(All amounts in ₹ lakhs, unless otherwise stated)

	As at 31 March 2023	As at 31 March 2022
Schedule 1 - Restricted funds		
a) Corpus fund		
Balance at the beginning of the year	36.20	16.20
Add : Amounts received during the year	20.00	20.00
Balance at the end of the year	56.20	36.20
) Life membership fund		
Balance at the beginning of the year	3.45	3.45
Add: Amounts received during the year Balance at the beginning and at end of the year	3.45	3.45
Earmarked fund		100000
Balance at the beginning of the year	86.00	86.00
Add : Amounts received during the year	0.80	00.00
Add . Interest credited during the year	4.39	4.48
Less : Expenditure incurred during the year	(4.39)	1000
Balance at the end of the year	86.80	(4.48)
) Capital grant fund Salance at the beginning of the year	41.63	47.21
Add : Addition during the year	41,00	41.21
.ess : Depreciation during the year (refer schedule 1 clause 4)	(4.85)	(5.58)
Salance at the end of the year	36.78	41.63
Project specific fund		
Balance at the beginning of the year	125:45	539.52
Add : Amounts received during the year	3,407,16	2.571.55
ess Expenditure incurred during the year	(3,143.62)	(2,985.62)
Salance at the end of the year	388.99	125.45
otal (a)+(b)+(c)+(d)+(e)	572.22	292.73
schedule 2 - Unrestricted fund		
Seneral reserve fund		
Balance at the beginning of the year	(25.66)	(65.97)
Add: (Deficit)/surplus for the year transferred from Income and	(114.82)	40.31
Salance at the end of the year	(140.48)	(25.66)
chedule 3 - Current liabilities		
Sundry creditors	544.58	212.93
salary payable	86.54	83.07
Statutory dues	20.96	18.81
Other current liabilities	120.14	97.58
08 A	772.22	412.39
(2) 00		
(3)		

Schedules forming part of the financial statements as at 31 March 2023

(All amounts in ₹ lakhs, unless otherwise stated)

Schedule 4 - Property, plant and equipment

a) Property, plant and equipment purchased out of own funds

Current year

		Gross block					Accumulated depreciation			
	As at 1 April 2022	Additions	Sale/disposals	As at 31 March 2023	As at 1 April 2022	For the year	On disposals	As at 31 March 2023	Net block As at 31 March 2023	
Tangible assets									01 111111112020	
Furniture and fixture	59.97	130.56		190.53	12.60	11.34	-	23.93	166.60	
Office equipment	39.39	58.04		97.43	14.42	8.61	0.5	23.03	74.40	
Plant and machinery	3.86	-		3.86	2.93	0.14		3.07	0.80	
Software	2.62		- 1	2.62	0.82	0.72		1.54	1.08	
Computers	95.72	43.71	0.43	140.00	68.00	22.65		90.65	49.36	
Vehicle	8.92	14.24		23.16	2.53	2.03		4.56	18.60	
Leasehold Improvement	- 1	40.73	- 1	40.73	-	2.04	397 3	2.04	38.69	
Total	211.48	287.28	0.43	498.33	101.30	47.53		148.82	349.53	

Previous year

Particulars As at 1 April 2021		Gross block				Accumulated depreciation			
	As at 1 April 2021	Additions	Sale/disposals	As at 31 March 2022	As at 1 April 2021	For the year	On disposals	As at 31 March 2022	As at 31 March 2022
Tangible assets								O' MOTOR EDEE	OT MOI OI. ZOZZ
Furniture and fixture	24.56	35.41		59.97	8.31	4.28		12.60	47.37
Office equipment	24.17	15.22		39.39	10.72	3.70		14.42	24.97
Plant and machinery	3.86		- 1	3.86	2.76	0.17		2.93	0.94
Software	0.38	2.24		2.62	0.37	0.45		0.82	1.80
Computers	72.91	23.81		96.72	53.78	14.22		68.00	28.72
Vehicle	2.02	6.90		8.92	2.02	0.52		2.53	6.38
Total	127.90	83.58		211.48	77.96	23.34		101.30	110.18

(This space has been intentionally left blank)





Schedules forming part of the financial statements as at 31 March 2023

(All amounts in ₹ lakhs, unless otherwise stated)

Schedule 4 - Property, plant and equipment

b) Property, plant and equipment received from other society

Current year

Particulars		Gross block					Accumulated depreciation			
	As at 1 April 2022	Additions	Sale/disposals	As at 31 March 2023	As at 1 April 2022	For the year	On disposals	As at 31 March 2023	As at 31 March 2023	
Tangible assets			The state of the s							
Furniture and fixture	12.20			12.20	7.71	0.45	- 1	8.16	4.04	
Office equipment	1.72		1 3 1	1.72	1.35	0.06	1-1	1.41	0.31	
Electrical installation	0.34			0.34	0.21	0.01		0.23	0.11	
Plant and machinery	4.20		1	4.20	3.30	0.13		3.43	0.76	
Vehicles	0.05	-	2.1	0.05	0.04	0.00		0.04	0.01	
Software	1.00			1.00	1.00	0.00	100	1.00	0.00	
Computers	0.98			0.98	0.98	0.00		0.98	0.00	
Total	20.49			20.49	14.59	0.65		15.25	5.23	

Previous year

Particulars		Gross block					Accumulated depreciation			
	As at 1 April 2021	Additions	Sale/disposals	As at 31 March 2022	As at 1 April 2021	For the year	On disposals	As at 31 March 2022	As at 31 March 2022	
Tangible assets					(T. 10 C. 1	V.84 - 1 1 1 - 2 1				
Furniture and fixture	12.20	-	1 4	12.20	7.21	0.50	20	7.71	4.49	
Office equipment	1.72		(2. 2 5	1.72	1.29	0.07		1.35	0.37	
Electrical installation	0.34	-		0.34	0.20	0.01		0.21	0.12	
Plant and machinery	4.20	-	-	4.20	3.14	0.16		3.30	0.90	
Vehicles	0.05	-	-	0.05	0.04	0.00		0.04	0.01	
Software	1.00		100	1.00	1.00	0.00	-	1.00	0.00	
Computers	0.98	-		0.98	0.98	0.00		0.98	0.00	
Total	20.49	-		20.49	13.86	0.74		14.59	5.89	

c) Property, plant and equipment received as donation

Current year

Particulars	Gross block				Accumulated depreciation				Net block
	As at 1 April 2022	Additions	Sale/disposals	As at 31 March 2023	As at 1 April 2022	For the year	On disposals	As at 31 March 2023	As at 31 March 2023
Tangible assets	0.01		-	0.01	-	-	-		0.01
Total	0.01			0.01	-	-	-		0.01





Schedules forming part of the financial statements as at 31 March 2023

(All amounts in ₹ lakhs, unless otherwise stated)

Previous year

Particulars	Gross block				Accumulated depreciation				Net block
	As at 1 April 2021	Additions	Sale/disposals	As at 31 March 2022	As at 1 April 2021	For the year	On disposals	As at 31 March 2022	As at 31 March 2022
Tangible assets	0.01	-		0.01		-	-		0.01
Total	0.01	-		0.01	-		-		0.01

Schedule 4 - Property, plant and equipment

d) Property, plant and equipment purchased out of capital grant funds

Current year

Particulars		Gross block					Accumulated depreciation			
	As at 1 April 2022	Additions	Sale/disposals	As at 31 March 2023	As at 1 April 2022	For the year	On disposals	As at 31 March 2023	As at 31 March 2023	
Leasehold improvement	24.00		9.0	24.00	9.04	1.50	~ 1	10.54	13.47	
Furniture and fixture	18.29			18.29	8.75	0.95	383	9.71	8.58	
Office equipment	11.06			11.06	7.07	0.60	14	7.66	3.39	
Computers	3.39		- 1	3.39	3.10	0.11	1	3.22	0.17	
Vehicle	15.85			15.85	8.90	1.04	· ·	9.94	5.91	
	72.59			72.59	36.86	4.20	-	41.07	31.52	

Previous year

Particulars		Accumulated depreciation				Net block			
	As at 1 April 2021	Additions	Sale/disposals	As at 31 March 2022	As at 1 April 2021	For the year	On disposals	As at 31 March 2022	As at 31 March 2022
Leasehold improvement	24.00			24.00	7.38	1.66	-	9.04	14.96
Furniture and fixture	18.29			18.29	7.69	1.06	- 1	8.75	9.53
Office equipment	11.06			11.06	6.36	0.70		7.07	3.99
Computers	3.39			3.39	2.91	0.19		3.10	0.29
Vehicle	15.85			15.85	7.67	1.23		8.90	6.96
	72.59			72.59	32.01	4.84	-	36.86	35.73

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Schedules forming part of the financial statements as at 31 March 2023 (All amounts in ₹ lakhs, unless otherwise stated)

	As at 31 March 2023	As at 31 March 2022
Schedule 5 - Cash and bank balances		
Cash in hand	0.25	0.23
Balances with banks in		
- savings accounts	212.68	134.81
- current accounts	77.28	76.34
- fixed deposits	349.19	127.85
	639.40	339.23
Schedule 6 - Receivables		
Grant receivable	28.23	111.03
orani rodandora	28.23	111.03
,	20.23	111.03
Schedule 7 - Loans and advances		
(Unsecured, considered good)		
Advances recoverable in cash or in kind or for value to be rece		42.07
Prepaid expenses	17.26	2.91
Security deposits Taxes receivables	46.36	29.84
Laxes receivables	2.35	1.82 76.64
	147.03	76.64
Schedule 8 - Other current assets		
Interest accrued on deposits	3.05	0.76
	3.05	0.76
Schedule 9 - Grants and donations		
Grants	3,142.77	2,982.78
Donations	189.50	152.12
Anonymous donations	28.40	29.04
,	3,360.67	3,163.94
Schedule 10 - Other income		
Interest income		
- on savings bank accounts	6.03	5.10
- on fixed deposits	10.56	8.17
-on income tax refund	0.04	0.07
Amortisation of capital grant	4.86	5.58
Unclaimed balances written back	0.55	0.00
	22.04	18.92





Cankids...Kidscan

Schedules forming part of the financial statements for the year ended 31 March 2023 (All amounts in ₹ lakhs, unless otherwise stated)

	Year ended 31 March 2023	Year ended 31 March 2022
Schedule 11 - Program expenses		
a) Cankids hospital support unit		
Medical projects and support program	1,398.44	1,330.26
Treatment support program	135.78	184.40
Pediatric palliative care	2.88	2.54
Pediatric psycho-oncology program	33.37	28.93
Education program	129.99	117.78
Parent and survivor groups and patient navigation	91.92	77.60
Medical and social support informatics (MASSI)	1.46	0.26
National outreach program	253.70	231.19
Awareness and advocacy program (CEPAA)	6.32	1.52
Capacity and skill building	83.09	68.62
Quality care research and impact (QCRI)	17.10	15.97
	2,154.05	2,059.07
b) Cankids cares centers*		
Pediatric palliative care center - Delhi	99.45	98.05
Home away from homes	336.61	257.49
Canshala special school - Mumbai	67.20	55.32
* Explores assessed assessed all and a second	503.26	410.86
* Excludes common expenses allocation (refer schedule	15(i))	
c) Access to care centers at national, regional and sta	ate level	
Medical projects and support program	63.49	66.64
Treatment support program	15.64	31.22
Pediatric palliative care	3.78	3.69
Pediatric psycho-oncology program	30.90	19.84
Education program	21.28	14.75
Parent and survivor groups and patient navigation	55.87	45.09
Medical and social support informatics (MASSI)	13.73	13.53
National outreach program	80.69	57.54
Awareness and advocacy program	33.91	23.86
Capacity and skill building	63.70	16.77
Quality care research and impact (QCRI)	27.77	14.60
county care research and impact (GCRI)	410.76	307.53
Total(a+b+c)	3,068.07	2,777,46
rouniururuj	3,068.07	2,777.46





Schedules forming part of the financial statements for the year ended 31 March 2023

(All amounts in ₹ lakhs, unless otherwise stated)

	Year ended 31 March 2023	Year ended 31 March 2022
Schedule 12 - Fund raising expenses Resource mobilisation team		
Compensation and benefits (including consultants)	30.51	52.52
Travel and conveyance	2.16	1.21
Printing and stationery	9.97	3.04
Communication	0.16	0.50
Subscriptions	2.13	8.02
Staff weifare	1.12	1.08
Repair and maintenance		1.00
-Others		0:15
Miscellaneous expenses	1.34	1.51
	47.39	68.03
Schedule 13 - General and administrative expenses		
Compensation and benefits (including consultants)	225.91	178.45
Staff welfare	8.48	5.72
Professional fees	26.20	33.25
Rent	12.88	10.27
Electricity and water	6.04	6.14
Payment to auditors	2.45	1.70
Insurance	0.75	0.77
Repair and maintenance		
-Building	4.69	0.38
-Others	3.24	4.47
Travel and conveyance	4.58	7.56
Printing and stationery	8.71	6.83
Communication	1.91	2.75
Subscriptions	3.72	1.43
Housekeeping supplies	6.23	5.52
Recruitment	8.06	1.80
Bank charges	1.16	1.03
Miscellaneous expenses	0.10	0.04
	329.71	268.11





Project specific fund (INR)

Annexure -'B' to Schedule '1' forming part of the financial statements as at 31 March 2023 (All amounts in ₹ lakhs, unless otherwise stated)

(All an	nounts in ₹ lakhs, unless otherwise stated)						
S.No.	Particulars	Name of donor	Opening balance as at 1 April 2022	Receipts during the year	Receivable during the year	Utilisation during the year	Closing balance as at 31 March 2023
(A)	Change for Childhood Cancer in States / CHSUs						
	Delhi NCR	As per Annexure ; I(i)		192.22		192.22	
	Punjab, Haryana, Himachal Pradesh, and Jammu & Kashmir	As per Annexure : II(i)		62.38		62.38	0.00
	Uttar Pradesh and Uttrakhand	As per Annexure : III (i)		349.74		349.74	
	Bihar	As per Annexure : IV (i)		54.22		54.22	
	Rajasthan	As per Annexure :V(i)		30.00		-	30.00
	West Bengal	As per Annexure :VI(i)		130.95		130.95	
	Odisha	As per Annexure :VII(i)		20.43	11.43	31.86	_
	Maharashtra	As per Annexure : VIII(i)	1.81	447.20		449.01	-
	Gujarat	As per Annexure : IX(i)	-	129.30		129.30	
	Goa	As per Annexure : X(i)	13.68			-	13.68
	Madhya Pradesh	As per Annexure : XI(i)		306.93		92.93	214.00
	Tamilnadu and UT Puducherry	As per Annexure : XII(i)	12.70	180.08		192.78	
	Kerala	As per Annexure : XIII(i)			-	-	0.00
	Kamataka	As per Annexure : XIV(ii)	-	36.31	-	36.31	_
	Change for Childhood Cancer through States	As per Annexure : XV(ii)	-	199.06	-	199.06	25.
B)	Access to Holistic Care Projects and Funds						
	Access to Care Aspirational District Projects	Bharat Heavy Electricals Limited	-	10.38		10.38	100
	Holistic care project	As per Annexure : XVI(i)	2.80	19.05		21.85	
	Parent Helping Parent Fund	Contribution from Parent families	9.26	5.63	0.27	1.83	13.34
	Survivor Helping Survivor Fund	Contribution from various Donors & KCK Survivors	2.53	-		7	2.53
(C)	Medical Support Projects and Funds						
		As per Annexure : XVII(i)		202.50		202.50	
		As per Annexure : XVIII(i)	2.09			2.09	2
	5.1001 Table 10.00	As per Annexure : XIX(i)	-	80.00		80.00	- 9
		As per Annexure : XX(i)		27.60		27.60	
		Deloitte Foundation	25.00			25.00	
	AAPS&R for APML	As per Annexure : XXI(i)	-	65.00		37.86	27.14
	Max Cankids Childhood Cancer Funds	As per Annexure : XXII(i)	10.94			10.94	27.14
		As per Annexure : XXIII(i)		4.74		4.74	
	CanShala Online Project	As per Annexure : XXIV(i)	-	8.39		8.39	
0)	Other Access to Care Projects and Funds						
		Milaap Foundation	2.19			2.19	
	Patient Advocated for Clinical Research - India	Artizen Interiors Pvt Ltd		3.00			3.00
	Patient Advocated for Clinical Research - India	Pfizer Limited		48.12	LIOS	7.75	40.37
		1			43/		

No.	Particulars	Name of donor	Opening balance as at 1 April 2022	Receipts during the year	Receivable during the year	Utilisation during the year	Closing balance as at 31 March 2023
(E)	Change for Childhood Cancer in India Projects and Funds						
	Change for Childhood Cancer in India Fund	As per Annexure : XXV(i)				-	
	Change for Childhood Cancer (Scale up and Sustainability) Funds	As per Annexure : XXVI(i)		49.50	5.00	54.50	
		Sub Total (a)	83.00	2,662.73	16.70	2,418.38	344.06

Tarun Ohri

Treasurer

Gopal Sharma

Chief Finance Officer

Place: New Delhi Date: 22 August 2023

Poonan Bagai Chairman

Ashish Gupta

Membership No.: 504662

Place: Gurugram Date: 22 August 2023

Partner

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Project specific fund (FCRA)

Annexure - 'C' to Schedule '1' forming part of the financial statements as at 31 March 2023

(All amounts in ₹ lakhs, unless otherwise stated)

S.No.	Particulars	Name of donor	Opening balance as at 1 April 2022	Receipts during the year	Receivable during the year	Utilisation during the year	Closing balance as at 31 March 2023
(A)	Change for Childhood Cancer in States / CHSUs						
1895	Delhi NCR	As per Annexure : I(ii)	0.04	285.36		285.29	0.10
	Punjab and UT Chandigarh	As per Annexure : II(ii)				-	
	Uttar Pradesh and Uttrakhand	As per Annexure : III(ii)	2	38.79		38.79	-
	Bihar	As per Annexure : IV(ii)		25.00		25.00	-
	Maharashtra	As per Annexure : VII(ii)		-		-	
	Gujarat	As per Annexure : VIII(ii)	4.12	40.25		44.37	0.00
	Goa	As per Annexure : IX	9.26			9.26	-
	Tamilnadu and UT Pondicherry	As per Annexure : X(ii)		8.11		8.11	
	Kerala	As per Annexure : XI(ii)	_	25.88		25.88	
	Kamataka	As per Annexure : XII(ii)	11.26	-		11.26	
(B)	Access to Holistic Care Projects and Funds						
	Holistic care project	As per Annexure ; XXII(ii)	1.61	25.37	17	26.29	0.70
(C)	Medical Support Projects Funds						
	Medical Assistance Fund	As per Annexure : XIII(ii)		0.25		0.25	
	Adopt A Child Fund	As per Annexure ; XIV(ii)	16.16	62.36		78.51	
3	AAPSandR for Retinoblastoma	As per Annexure : XV(iii)	-	48.55		41.36	7.19
1	Golden Crab ALL Fund	As per Annexure : XVI(ii)	7				-
(D)	Other Access to Care Projects and Funds						
	Capacity and Skilll Building	Society Pediatric Oncology	_	32.96			32.96
	Quality Care Research and Impact	St Baldricks Foundation	-	4.28		4.28	-
	Capacity and Skilll Building	Alsac ST Jude Children Research		14.90		10.90	4.01
- 8	Capacity and Skilll Building	Jiv Daya Foundation		2.45		2.45	
	International Childhood Caner Initiative	ST Jude Global	5	2.43	8.99	8.99	
		ST Jude Children Research		11.18	0.99	11.18	-
0	Capacity and Skilll Building- Nurses Workshop	Hosital		11.10	10	11.10	
1	Capacity and Skilll Building	Childhood Cancer International		0.98		0.98	



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Project specific fund (FCRA)

Annexure - 'C' to Schedule '1' forming part of the financial statements as at 31 March 2023

(All amounts in € lakhs, unless otherwise stated)

No.	Particulars	Name of donor	Opening balance as at 1 April 2022	Receipts during the year	Receivable during the year	Utilisation during the year	Closing balance as at 31 March 2023
(E)	Change for Childhood Cancer In India Projects and Funds						
	Change for Childhood Cancer in India Fund	As per Annexure : XIX(ii)	72	31.21		31.21	
	Change for Childhood Cancer (Scale up and Sustainability) Fund	As per Annexure : XX (ii)		60.87		60.87	
		Sub Total (b)	42.45	718.74	8.99	725.23	44.96
		Grand total	125.45	3,381.48	25.69	3,143.62	389.02

For Walker Chandiok & Co LLP

Chartered Accountants

Firm's Registration No.: 001076N/N500013

Ashish Gupta

Partner

Membership No.: 504662

Place: Gurugram Date: 22 August 2023 For and on behalf of Cankids...Kidscan

Poonam Bagai Cheirman Tarun Ohri Treasurer Gopal Sharma Chief Finance Officer

Place: New Delhi Date: 22 August 2023

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Cankids...Kidscan (All amounts in ₹ lakhs, unless otherwise stated) Annexure: I - Change for Childhood Cancer (CCC) in Delhi NCR S. No. Particulars As at 1 April 2022 Received / Receivable Receivable during Utilised during the year As at 31 March 2023 during the year the year I(i): INR Change for Childhood Cancer (CCC) in Delhi NCR CHSU@Safdurjung, Delhi Indra Technologies Private Limited 15.69 15.69 CHSU@Safdurjung, Delhi Sterling Tools Foundation 15.00 15.00 CHSU@Safdurjung, Delhi Hamdard National Foundation 20.00 20.00 CHSU@AIIMS, Delhi Manju Jain 10.00 10.00 HAH Kotla, Delhi-Snehogarh, Kotak Mahindra Bank Limited 57.90 57.90 HAH Kalawati & Medical Support in Delhi NCR CHSU@RML Delhi Surie Polex Industries Pvt Ltd 11.00 11.00 CHSU@GTB ,SGRH, Delhi Northern Aromatics Limited 51.63 51.63 CHSU@Apollo, Delhi Bhanix Finance and Investment Ltd 5.00 5.00 CHSU@MAMC, Delhi Executive Centre India Pvt Ltd 6.00 6.00 Sub-Total of I(i) 192.22 192.22 I(ii): FCRA Change for Childhood Cancer (CCC) in Delhi NCR Palliative Care Centre, Delhi Mannkind Charitable Society 82.60 82.60 CHSU@ Max Delhi Resonance Inc. 0.04 1.50 1.43 0.10 CHSU@AIIMS Delhi Detusche Bank AG 201.26 201.26 Sub-Total of I(ii) 0.04 285.36 285.29 0.10 Grand Total(I) 0.04 477.58 477.51 0.10 Annexure: II - Change for Childhood Cancer (CCC) in Punjab, Haryana, Himachal Pradesh, and Jammu & Kashmir S. No. Particulars As at 1 April 2022 Received / Receivable Receivable during Utilised during the year As at 31 March 2023 during the year the year II(i): INR Change for Childhood Cancer (CCC) in Punjab, Haryana, Himachal Pradesh, and Jammu & Kashmir Home Away From Home -Kotak Mahindra Bank Limited 24.31 24.31 Chandigarh CCC in states - Punjab and Kotak Securities Limited 38.07 38.07 adjoining States Sub-Total of II(i) 62.38 62.38 II(ii): FCRA Change for Childhood Cancer (CCC) in Punjab, Haryana, Himachal Pradesh, and Jammu & Kashmir Sub-Total of II(ii) Grand Total (II) 62.38 62.38





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Cankids...Kidscan (All amounts in ₹ lakhs, unless otherwise stated)

S. NO.	Particulars	Donor		As at 1 April 2022	Received / Receivable	Receivable during	Utilised during the year	As at 31 March 202
					during the year	the year	A STATE OF THE PARTY OF THE PAR	
III(i): I		ncer (CCC) in Uttar Pradesh and Uttrakhand	Fund					
a	CCC in Uttar Pradesh	Gokul & Lakshmi Larola		*	10.00		10.00	
b	CCC in Uttar Pradesh	Aditya Birla Capital Foundation			225.00		225.00	
C	CCC in Uttar Pradesh	EXL Services.com India Private Limited			50.00		50.00	
d	CCC in Uttar Pradesh	Give India Foundation - EXL Services		-	1.07		1.07	
e	CCC in Uttar Pradesh	Ascendum Solutions India Pvt Ltd			20.00		20.00	
f	HAH Varanasi	Kotak Mahindra Bank Limited		-	43.67		43.67	
			Sub Total III(i)		349.74		349.74	
III(ii) : F	FCRA Change for Childhood (Cancer (CCC) in Uttar Pradesh and Uttrakhar	nd Fund					
а	CCC in Uttarakhand	Swiss Himalayan Amity			38.79		38.79	
			Sub Total III(ii)		38.79		38.79	
			Grand Total (III)		388.54		388.54	
							000.04	
	ure: IV - Change for Childhood Particulars	Donor Donor		As at 1 April 2022	Received / Receivable during the year	Receivable during the year	Utilised during the year	As at 31 March 202
IV(i): II	NR Change for Childhood Car	ncer (CCC) in Bihar						
a	HAH-Patna	Kotak Mahindra Bank Limited			44.22		44.22	
b	CCC In States in Bihar	FCB Ulka Advertising Limited			10.00	- 3	10.00	
		Total and Florida ing Emiliana	Sub-Total of IV(i)		54.22		54.22	
IV(ii) : F	CRA Change for Childhood (Cancer (CCC) in Bihar	000 1000 0111()		OTEE		54.22	
a	CCC In States In Bihar & Other Support	Corob India Private Limited		40	25.00		25.00	
			Sub-Total of IV(ii)		25.00		25.00	
			Grand Total (IV)		79.22		79.22	
Annon	re: V - Change for Childhood	Conner (CCC) in Balanthan				7		
	Particulars	Donor Donor		As at 1 April 2022	Received / Receivable	Receivable during	Utilised during the year	As at 31 March 2023
				re at trameste	during the year	the year	Ottised during the year	75 at 51 March 2023
	R Change for Childhood Cana							
а	Change for Childhood Cance (CCC) in Rajasthan	r Servier India Pvt Ltd			30.00	-	-	30.00
			Sub-Total of V(i)		30.00			30.00
/(ii) : F0	CRA Change for Childhood Co	ancer (CCC) in Rajasthan		37.0				
			Sub-Total of V(ii)					
	COUNDIO							
			Grand Total (V)		30.00			30.00

Cankids...Kidscan (All amounts in ₹ lakhs, unless otherwise stated) Annexure: VI - Change for Childhood Cancer (CCC) in West Bengal S. No. Particulars As at 1 April 2022 Received / Receivable Receivable during Utilised during the year As at 31 March 2023 during the year the year VI(i): INR Change for Childhood Cancer (CCC) in West Bengal CHSU@SGCCRI Century Plyboards India Limited 35.21 35.21 HAH - Kolkata-Snehoneer Kotak Mahindra Bank Limited 72.85 72.85 CCC in States - West Bengal Kotak Securties Limited 6.78 6.78 CHSU@NRS_Surgery Eveready Industries India Limited 16,11 16.11 Sub-Total of VI(i) 130,95 130.95 VI(ii): FCRA Change for Childhood Cancer (CCC) in West Bengal Sub-Total of VI(ii) Grand Total (VI) 130.95 130.95 Annexure: VII - Change for Childhood Cancer (CCC) in Odisha S. No. Particulars Donor As at 1 April 2022 Received / Receivable As at 31 March 2023 Receivable during Utilised during the year during the year the year VII(i): INR Change for Childhood Cancer (CCC) in Odisha HAH- Bhuwaneswar Kotak Mahindra Bank Limited 11.43 31.86 20.43 Sub-Total of VII(i) 20,43 11.43 31.86 VII(ii): FCRA Change for Childhood Cancer (CCC) in Odisha Sub-Total of VII(ii) Grand Total (VII) 20.43 11.43 31.86 Annexure: VIII- Change for Childhood Cancer (CCC) in Maharashtra S. No. Particulars Donor As at 1 April 2022 Received / Receivable Receivable during Utilised during the year As at 31 March 2023 during the year the year VIII(i): INR Change for Childhood Cancer (CCC) in Maharashtra CHSU at Wadia, Mumbai Baroda Shakti 1.00 1.00 CCC - Canshala, Mumbai Deutsche CIB Centre Private Limited 96.01 96.01 CHSU at TMH. Mumbai Deutsche India Private Limited 0.81 0.81 CHSU@ TMH Mumbai Deutsche CIB Centre Private Limited d 1.56 1.56 CHSU@ TMH Mumbai Deutsche Equities India Pvt Ltd. 208.33 208.33 CCC in Maharashtra Cipla Foundation 74.51 74.51 CHSU@GCH Aurangabad Aeries Financial Technologies Pvt Ltd 4.70 4.70 HAH Aurangabad Kotak Mahindra Bank Limited 43.15 43.15 CHSU@CTC Borivali, KEM 18.94 18.94 Mumbai Morgan Stanley India Company Private Limited Sub-Total of VIII(i) 1.81 447.20 449.01 VIII(ii): FCRA Change for Childhood Cancer (CCC) in Maharashtra Sub-Total of VIII(ii) Grand Total (VIII) 1.81 447.20 449.01

CankidsKidscan		
(All amounts in ₹ lakhs,	unless otherwise	stated)

S. No.	Particulars	Donor		As at 1 April 2022	Received / Receivable during the year	Receivable during the year	Utilised during the year	As at 31 March 202
IX(i): If	NR Change for Childhood Car	cer (CCC) in Gujarat					AND THE PARTY OF	
a	CCC In Gujarat	Kotak Life Insurance Limited			82.00		82.00	
b	HAH- Ahmedabad	Kotak Mahindra Bank Limited			47.30	3	47.30	
			Sub-Total of IX(i)		129.30		129.30	
DX(ii) : F	CRA Change for Childhood C	ancer (CCC) in Guiarat	Out-Total of Ix(i)		129.30		129.30	
a	CHSU@ TCI and Saachi,	Relief From Cancer		4.12	40.25		44.07	
	Surat	react From Garder		4.12	40.25		44.37	0.00
	Carat		On Table Office					
			Sub-Total of IX(ii)	4.12	40.25		44.37	0.00
			Grand Total (IX)	4.12	169.55		173.67	0.00
Annexu	re: X - Change for Childhood	Cancer (CCC) in GOA			P 1			
	Particulars	Donor		As at 1 April 2022	Received / Receivable	Receivable during	Utilised during the year	As at 31 March 2023
					during the year	the year	ounded during the year	No of OT Motor EVE
X(i): IN	R Change for Childhood Cand	er (CCC) in GOA						
	CCC in States - Goa	Sabr Care Trust		4.13	20	27	198	4.13
b	CCC in States - Goa	Sabr Care Fund - Give India Foundation		0.14				0.14
	CCC in States - Goa	Sabr Care Fund - Milaap Foundation		9.41				
		Cabi Care Faria - Imilaap Fooridation	Sub-Total of X(i)	13.68		-		9.41
			out rotal or rating_	10.00				13.00
X(ii) : F0	CRA Change for Childhood Ca	incer (CCC) in GOA						
	CCC in States - Goa	Sabr Care Funds - Milaap		9.12			9.12	
	CCC in States - Goa	Sabr Care Funds - Give Foundation		0.14			0.14	
		Catal Card Lands City Landscoll	Sub-Total of X(i)	9.26			9,26	
			Sub-Total of X(I)	9.20			9.20	
			Grand Total (X)	22.94	-		9.26	13.68
Annexu	re: XI - Change for Childhood	Cancer (CCC) in Madhya Pradesh						
S. No.	Particulars	Donor	ALCOHOLOGICA CONTRACTOR	As at 1 April 2022	Received / Receivable	Receivable during	Utilised during the year	As at 31 March 2023
	A STATE OF THE STA	ACTION AND ADDRESS OF THE ACTION ADDRESS OF THE ACTION AND ADDRESS OF THE ACTION AND ADDRESS OF			during the year	the year	ounce canny are you	TO GIVE HOLDING
		cer (CCC) in Madhya Pradesh						
a	CCC in States - MP	Ajim Premzi Philanthropic Intiatives			306.93		92.93	214.00
			Sub-Total of XI(i)		306.93		92.93	214.00
(I(ii) : F	CRA Change for Childhood Ca	ancer (CCC) in Madhya Pradesh						
			Sub-Total of XI(i)					
			Grand Total (XI)		306.93		92.93	214.00



Cankids...Kidscan (All amounts in ₹ lakhs, unless otherwise stated)

S. No.	Particulars	Cancer (CCC) in Tamilnadu & UT Pondicherry Fu Donor		As at 1 April 2022	Received / Receivable	Receivable during	Utilised during the year	As at 31 March 202
MILES.	N.D. Oh				during the year	the year		
AII(I) : a	Change for Childhood Cancer (CCC) in Tamilnadu & UT	eer (CCC) in Tamilnadu & UT Pondicherry Fund HDFC Life Insurance Company Limited		(9)	95.00	u	95.00	
b	Pondicherry Fund CHSU@KLE Belgavi	Amelianal Oppolanta at Lafe Dilata Lagar						
C		Amphenol Omniconnect India Private Limited Access HealthCare Services Private Limited			11.08	*	11.08	
	(CCC) in Tamilnadu & UT Pondicherry Fund	Access HealthCare Services Private Limited			36.00		36.00	
	(CCC) in Tamilnadu & UT Pondicherry Fund	Shree Sarita Jain Foundation Trust			15.00	1	15.00	
е	Change for Childhood Cancer (CCC) in Tamilnadu & UT Pondicherry Fund	Data Patterns India Ltd		12.70		7.0	12.70	
f	CHSU@Apolio Chennai, Jipmer	Elargi Trust			20.00		20.00	
g	CHSU@ICH, Chennal	Genlite Enginering Pvt Ltd			3.00		3.00	
music.	5001 0		b Total XII(i)	12.70	180.08		192.78	
	CHSU@ICH, Chennai	Incer (CCC) In Tamilnadu & UT Pondicherry Fund					T	
45	Choogich, Chemia	Guardian India Operations Pvt Ltd	Total XII(ii)	· :	8.11 8.11		8.11	
		Sui	o rocal xii(ii)		6.11		8.11	
			nd Total (XII)	12.70	188.19		200.89	
Annexu	re: XIII - Change for Childhood	Cancer (CCC) in Kerala	THE POST OF THE PARTY					
No.	Particulars	Donor		As at 1 April 2022	Received / Receivable during the year	Receivable during the year	Utilised during the year	As at 31 March 202
all(i):	INR Change for Childhood Cand	er (CCC) in Kerala						
		Sub-Tr	otal of XIII(i)					
	FCRA Change for Childhood Ca					2-517-10		
a	HAH_Triv	Mannkind Charitable Society	_		25.88		25.88	
		Sub-To	otal of XIII(ii)		25.88		25.88	
		Gran	d Total(XIII)		25.88		25.88	
			d Total(XIII)		25.88		25.88	
	re: XIV - Change for Childhood (Cancer (CCC) in Karnataka	d Total(XIII)					
			d Total(XIII)	As at 1 April 2022	Received / Receivable	Receivable during	25.88 Utilised during the year	As at 31 March 202
. No.	Particulars INR Change for Childhood Cano	Cancer (CCC) in Karnataka Donor	d Total(XIII)					As at 31 March 202
i. No.	Particulars INR Change for Childhood Cano CHSU@NH and SSCH Bangalore	Cancer (CCC) in Karnataka Donor	d Total(XIII)		Received / Receivable	Receivable during		As at 31 March 202
S. No.	Particulars INR Change for Childhood Cano CHSU@NH and SSCH Bangalore CHSU@KMC-Udupi, KMC	Cancer (CCC) in Karnataka Donor er (CCC) in Karnataka	d Total(XIII)		Received / Receivable during the year	Receivable during	Utilised during the year	As at 31 March 202
i. No.	Particulars INR Change for Childhood Cano CHSU@NH and SSCH Bangalore CHSU@KMC-Lidge; KMC	Cancer (CCC) in Karnataka Donor er (CCC) in Karnataka Morgan Stanley India Company Private Limited Pragati Charitable Trust	d Total(XIII)		Received / Receivable during the year 23.81	Receivable during	Utilised during the year	As at 31 March 202
i. No.	Particulars INR Change for Childhood Cand CHSU@NH and SSCH Bangalore CHSU@KMC-Udupi, KMC Mangalore, HAH Banglore	Cancer (CCC) in Karnataka Donor er (CCC) in Karnataka Morgan Stanley India Company Private Limited Pragati Charitable Trust Sub-To	6	As at 1 April 2022	Received / Receivable during the year 23.81 12.50	Receivable during the year	23.81 12.50 36.31	As at 31 March 202
S. No.	Particulars INR Change for Childhood Cano CHSU@NH and SSCH Bangalore CHSU@KMC-Udupi, KMC Mangalore, HAH Banglore FCRA Change for Childhood Ca	Cancer (CCC) in Karnataka Donor er (CCC) in Karnataka Morgan Stanley India Company Private Limited Pragati Charitable Trust Sub-To	6	As at 1 April 2022	Received / Receivable during the year 23.81 12.50 36.31	Receivable during the year	23.81 12.50 36.31	As at 31 March 202
S. No.	Particulars INR Change for Childhood Cano CHSU@NH and SSCH Bangalore CHSU@KMC-Udupi, KMC Mangalore, HAH Banglore FCRA Change for Childhood Ca	Cancer (CCC) in Karnataka Donor er (CCC) in Karnataka Morgan Stanley India Company Private Limited Pragati Charitable Trust Sub-To snoer (CCC) in Karnataka Santanu Das - Relief From Cancer	etal of XIV(i)	As at 1 April 2022	Received / Receivable during the year 23.81 12.50 36.31	Receivable during the year	23.81 12.50 36.31	As at 31 March 202
i. No.	Particulars INR Change for Childhood Cano CHSU@NH and SSCH Bangalore CHSU@KMC-Udupi, KMC Mangalore, HAH Banglore FCRA Change for Childhood Ca	Cancer (CCC) in Karnataka Donor er (CCC) in Karnataka Morgan Stanley India Company Private Limited Pragati Charitable Trust Sub-To snoer (CCC) in Karnataka Santanu Das - Relief From Cancer	6	As at 1 April 2022	Received / Receivable during the year 23.81 12.50 36.31	Receivable during the year	23.81 12.50 36.31	As at 31 March 202

ь	(CCC) through States Change for Childhood Cancer	Indorama Charitable Trust			80.00		80.00	
c	Change for Childhood Cancer	Acces Health Care Service Pvi Ltd			80.00 50.00		80.00 50.00	
d	(CCC) through States Change for Childhood Cancer	DBS Bank India Limted		50 12	20.82		20.82	
e	(CCC) through States Change for Childhood Cancer	Agiliad Technologies Pvt Ltd		2	15.00		15.00	
	(CCC) through States Change for Childhood Cancer (CCC) through States	Dr. Roshan Lal Aggarwal & Sons Pvt. Ltd.		-	10.00		10.00	
	(CCC) inrough States		Sub-Total of XV(i)	-	199.06		199.06	
			Sub-Total of XV(ii)	-				
			Grand Total(XV)		199.06		199.06	
Annexu	re - XVI - Hollistic Care Project		Grand Total(XV)		199.06	-	199.06	
	re - XVI - Hollistic Care Project Particulars	Donor	Grand Total(XV)	As at 1 April 2022	Received / Receivable	Receivable during	199.06 Utilised during the year	As at 31 March
S. No.		Donor	Grand Total(XV)					As at 31 March :
S. No. (VI(i) II	Particulars NR Holistic Care Projects Holistic Care Project	Donor Ashbee Systems Limited	Grand Total(XV)		Received / Receivable during the year	Receivable during	Utilised during the year	As at 31 March :
S. No. (VI(i) II	Particulars NR Holistic Care Projects Holistic Care Project		Grand Total(XV)		Received / Receivable	Receivable during		As at 31 March :
S. No.	Particulars NR Holistic Care Projects Holistic Care Project Holistic Care Project Holistic Care Project	Ashbee Systems Limited Give India Foundation - Music Masti Grand Royale Enterpriesed Limited	Grand Total(XV)	As at 1 April 2022	Received / Receivable during the year	Receivable during	Utilised during the year	As at 31 March
VI(i) II	Particulars NR Holistic Care Projects Holistic Care Project Holistic Care Project Holistic Care Project	Ashbee Systems Limited Give India Foundation - Music Masti	Grand Total(XV)	As at 1 April 2022	Received / Receivable during the year	Receivable during	Utilised during the year 8.44	As at 31 March
3. No.	Particulars NR Holistic Care Projects Holistic Care Project	Ashbee Systems Limited Give India Foundation - Music Masti Grand Royale Enterpriesed Limited	Grand Total(XV)	As at 1 April 2022	Received / Receivable during the year 8.44 - 4.66	Receivable during	Utilised during the year 8.44 2.80 4.66	
S. No.	Particulars NR Holistic Care Projects Holistic Care Project Holistic Care Project Holistic Care Project Holistic Care Project CRA Holistic Care Project	Ashbee Systems Limited Give India Foundation - Music Masti Grand Royale Enterpriesed Limited GTN Enterprises Limited		As at 1 April 2022 2.80	Received / Receivable during the year 8.44 - 4.66 5.95	Receivable during the year	8.44 2.80 4.96 5.95	
(VI(ii) F	Particulars NR Holistic Care Projects Holistic Care Project Holistic Care Project Holistic Care Project Holistic Care Project CRA Holistic Care Project Holistic Care Project	Ashbee Systems Limited Give India Foundation - Music Masti Grand Royale Enterpriesed Limited GTN Enterprises Limited Give Foundation - Music Masti		As at 1 April 2022	Received / Receivable during the year 8.44 4.66 5.95	Receivable during the year	Utilised during the year 8.44 2.80 4.66 5.95 21.85	
Vi(ii) F	Particulars NR Holistic Care Projects Holistic Care Project Holistic Care Project Holistic Care Project Holistic Care Project CRA Holistic Care Project	Ashbee Systems Limited Give India Foundation - Music Masti Grand Royale Enterprised Limited GTN Enterprises Limited Give Foundation - Music Masti Bristol2beijing		As at 1 April 2022 2.80	Received / Receivable during the year 8.44 - 4.66 5.95 19.05	Receivable during the year	Utilised during the year 8.44 2.80 4.66 5.95 21.85 0.90 0.79	
S. No.	Particulars NR Holistic Care Projects Holistic Care Project	Ashbee Systems Limited Give India Foundation - Music Masti Grand Royale Enterprised Limited GTN Enterprises Limited Give Foundation - Music Masti Bristolzbeijing Give India Foundation		As at 1 April 2022 2.80	Received / Receivable during the year 8.44 4.66 5.95 19.05	Receivable during the year	8.44 2.80 4.66 5.95 21.85 0.90 0.79 14.35	
S. No.	Particulars NR Holistic Care Projects Holistic Care Project	Ashbee Systems Limited Give India Foundation - Music Masti Grand Royale Enterpriesed Limited GTN Enterprises Limited Give Foundation - Music Masti Bristot2beijing Give India Foundation Giving Impetus to Voluntary Efforts		2.80 2.80	Received / Receivable during the year 8.44 - 4.66 5.95 19.05	Receivable during the year	8.44 2.80 4.66 5.95 21.85 0.90 0.79 14.35 0.24	
S. No.	Particulars NR Holistic Care Projects Holistic Care Project	Ashbee Systems Limited Give India Foundation - Music Masti Grand Royale Enterpriesed Limited GTN Enterprises Limited Give Foundation - Music Masti Bristolzbeijing Give India Foundation Giving Impetus to Voluntary Efforts Pallium India INC		As at 1 April 2022 2.80	Received / Receivable during the year 8.44 4.66 5.95 19.05 0.79 14.35 0.24 3.75	Receivable during the year	21.85 0.90 0.79 14.35 0.24 3.77	
S. No.	Particulars NR Holistic Care Projects Holistic Care Project	Ashbee Systems Limited Give India Foundation - Music Masti Grand Royale Enterpriesed Limited GTN Enterprises Limited Give Foundation - Music Masti Bristol2beijing Give India Foundation Giving Impetus to Voluntary Efforts Pallium India INC Rahul Jain		2.80 2.80	Received / Receivable during the year 8.44 4.66 5.95 19.05 0.79 14.35 0.24 3.75 0.10	Receivable during the year	Utilised during the year 8.44 2.80 4.66 5.95 21.85 0.90 0.79 14.35 0.24 3.77 0.10	
S. No.	Particulars NR Holistic Care Projects Holistic Care Project	Ashbee Systems Limited Give India Foundation - Music Masti Grand Royale Enterprised Limited GTN Enterprises Limited Give Foundation - Music Masti Bristot2beijing Give India Foundation Giving Impetus to Voluntary Efforts Pallium India INC Rahul Jain Uk Online Giving Foundation		2.80 2.80	Received / Receivable during the year 8.44	Receivable during the year	Utilised during the year 8.44 2.80 4.66 5.95 21.85 0.90 0.79 14.35 0.24 3.77 0.10 4.64	
S. No. KVI(i) III	Particulars NR Holistic Care Projects Holistic Care Project	Ashbee Systems Limited Give India Foundation - Music Masti Grand Royale Enterpriesed Limited GTN Enterprises Limited Give Foundation - Music Masti Bristol2beijing Give India Foundation Giving Impetus to Voluntary Efforts Pallium India INC Rahul Jain	Sub-Total XVI(i)	2.80 2.80 0.90	Received / Receivable during the year 8.44	Receivable during the year	8.44 2.80 4.66 5.95 21.85 0.90 0.79 14.35 0.24 3.77 0.10 4.64 1.50	
S. No. KVI(i) III	Particulars NR Holistic Care Projects Holistic Care Project	Ashbee Systems Limited Give India Foundation - Music Masti Grand Royale Enterprised Limited GTN Enterprises Limited Give Foundation - Music Masti Bristot2beijing Give India Foundation Giving Impetus to Voluntary Efforts Pallium India INC Rahul Jain Uk Online Giving Foundation		2.80 2.80	Received / Receivable during the year 8.44	Receivable during the year	Utilised during the year 8.44 2.80 4.66 5.95 21.85 0.90 0.79 14.35 0.24 3.77 0.10 4.64	As at 31 March 2

	no unts in ₹ lakhs, unless otherwi							
	ura: XVII - Medical Assistance F Particulars	Donor Donor		As at 1 April 2022	Received / Receivable during the year	Receivable during the year	Utilised during the year	As at 31 March
XVII(i)	: INR Medical Assistance Fund			945-1-P095-1-P09	during are year	uro year		
a	Medical Assistance Fund	Angira Hansraj Gupta Charitable Trust		*	7.00		7.00	
b	Medical Assistance Fund	Unified Credit Solutions			1.50		1,50	
C	Medical Assistance Fund	Sud Chemie India Private Limited		100	10.00	-	10.00	
d	Medical Assistance Fund	Anantharaman Venkataramanan			5.00		5.00	
6	Medical Assistance Fund	Kotak Mahindra Bank Limited		-	129.00		129.00	
f	Medical Assistance Fund	Experion Capital Private Limited		-	29.37	-	29.37	
g	Medical Assistance Fund	Experion Developers Private Limited	_		20.63		20.63	
			Sub - Total XVII(i) _		202.50		202.50	
XVII(ii)	: FCRA Medical Assistance Fun	nd						
а	Medical Assistance Fund	Sejal Pubby-Milap Social Venture			0.25		0.25	
			Sub-Total XVII(ii)		0.25	-	0.25	
			Consid Total COM					
			Grand Total (XVII)		202.75		202.75	
	ire: XVIII - Adopt A Child Fund							
S. No.	Particulars	Donor		As at 1 April 2022	Received / Receivable during the year	Receivable during the year	Utilised during the year	As at 31 March 2
	: INR Adopt A Child Fund		68			747E-0		
a	CHSU @ Wadia	Inner Wheel Club of Bombay Hanging G	arden	0.65	-		0.65	
b	CHSU @ Wadia	Manay Seva Sansthan	DESCRIPTION OF THE PROPERTY OF THE PARTY OF	1.44			1.44	
			Sub-Total of XVIII(i)	2.09			2.09	
VVIII (ST	: FCRA Adopt A Child Fund							
a	Adopt A Child Fund	Sadhna and Venkat Shankar			40.00			
b	Adopt A Child Fund	AT Capital Charitable Foundation Limited		16.16	12.36 50.00		12.36	
			Sub-Total of XVIII(ii)	16.16	62.36		66.16 78.51	
				10.10	02.00		70.01	7-3-3-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
			Grand Total (XVIII)	18.24	62.36		80.60	
	re: XIX - AAPS&R for Retinobla: Particulars	stoma Fund Donor		As at 1 April 2022	Received / Receivable	Receivable during	Utilised during the year	As at 31 March 2
			A CANADA		during the year	the year		
	INR AAPS&R for Retinoblastom							
a	Fund	Markit India Services Private Limited		75	80.00		80.00	
	Fund		Cub Total of Mixes					
CIX(E) ·	FCRA AAPS&R for Retinoblast	oma Fund	Sub-Total of XIX(i)		80.00		80.00	
	AAPS&R for Retinoblastoma Fund			NI DION	32.34		25.15	7
b	AAPS&R for Retinoblastoma Fund	Siddhant Sirpal- Relief From Cancer			16.21		16.21	
			Sub-Total of XIX(ii)	2 -	48.55	60	S K 41.36	7
			-	1331	/	12/	101	
			Grand Total (XIX)	1957 - 100	128.55		121.36	7

	cure: XX - AAPS&R for ALL (G Particulars	Donor		As at 1 April 2022	Received / Receivable	Receivable during	Utilised during the year	As at 31 March 2
YYM:	INR AAPS&R for ALL (Golder	Crab Fund			during the year	the year		
a	Golden Crab ALL Fund	Rabani Garg		150	20.00		20.00	
b	Golden Crab ALL Fund	Avaneesh Raghuvanshi			4.80		4.80	
c	Golden Crab ALL Fund	Malika Raghuvanshi						
	Golden Clab ALL Fullu	malika Ragnuvariani	Sub-Total of XX(i)		2.80 27.60		2.80	
			Sub-Total of XX(I)_		27.60		27.60	
XX(ii)	: FCRA AAPS&R for ALL (Gold	den Crab Fund)		-				
			Sub-Total of XX(ii)					
			Grand Total (XX)		27.60	-	27.60	
lnco.	rure: XXI - AAPS&R for APML				21100		27.00	
	Particulars	Donor		As at 1 April 2022	Received / Receivable	Receivable during	Utilised during the year	As at 31 March
				no de l'April 2022	during the year	the year	Oblised during the year	As at 31 March
O(I(i)	INR AAPS&R for APML							
a	APML Fund	Yusuf and Farida Hamied Foundation			25.00		25.00	
b	APML Fund	Kalpatru Trust			25.00		0.82	2
C	APML Fund	S Radhakrishnan			15.00		12.05	
			Sub-Total of XXI(i)		65.00		37.86	
CKININ	: FCRA AAPS&R for APML							
o citin)	. T OTO TO TO SOUTH THE			- 12				
			Sub-Total of XXI(ii)				-	
			Grand Total (XXI)		65.00		37.86	2
nnex	ure - XXII - Max Cankids Care	Funds						
. No.	Particulars	Donor		As at 1 April 2022	Received / Receivable during the year	Receivable during the year	Utilised during the year	As at 31 March
XII(i)	INR Max Cankids Care Funds				during the year	the year		
	Max Cankids Care Funds	Navin Kumar Agarwal		0.64	220	200	0.64	
	Max Cankids Care Funds	Poonii Nath		1.10			1.10	
	Max Cankids Care Funds	Shankar Lai Chandra Kumar HUF		1.35			1.35	
	Max Cankids Care Funds	Rumki Fernandes		1.45	_		1.45	
	Max Cankids Care Funds	Renu Modi		0.95			0.95	
	Max Cankids Care Funds	Karan Pal Singh		3.75			3.75	
	Max Cankids Care Funds	Yash Samat		0.90			0.90	
	Max Cankids Care Funds	Aditya Mathur	W010100-000000000	0.80			0.80	
VIII	ECOA Hay Cartida Cara E	CHANDION	Sub-Total XXII(i)	10.94			10.94	
VII(II)	FCRA Max Cankids Care Fund	15		2			OS A	
		/S/ /E/	Sub-Total XXII(ii)			-/2	101	
				10.94			10.94	

Annex	ture - XXIII- CanSurvive Project							
	Particulars	Donor		As at 1 April 2022	Received / Receivable during the year	Receivable during the year	Utilised during the year	As at 31 March 202
	INR CanSurvive Project							
а	CanSurvive Project	Morgan Stanley India Company Private L			4.74		4.74	
			Sub-Total XXIII(i)	-	4.74		4.74	
			Grand Total (XXIII)		4.74		4.74	
Anney	ure - XXIV- CanShala Online Pr	cleat & Education Program						
	Particulars	Donor		As at 1 April 2022	Received / Receivable	Receivable during	Utilised during the year	As at 31 March 202
		78 T00944C12D			during the year	the year		
	INR CanShala Online Project	Landa de la compansa						
a	Canshala Online Project	XL India Business Services Pvt Ltd			3.15		3.15	
b	Canshala Online Project	Fare Portal			5.24		5.24	<u> </u>
			Sub-Total XXIV(i)		8.39		8.39	
			Grand Total (XXIV)		8.39		8.39	
			Grand Total (Gran)		0.00		0.00	
	ure: XXV Change for Childhood							
S. No.	Particulars	Donor		As at 1 April 2022	Received / Receivable during the year	Receivable during the year	Utilised during the year	As at 31 March 202
XXV(i)	INR Change for Childhood Can	cer in India Fund	7 7 7					
			Sub-Total XXV(i)					
XXV(ii)	FCRA Change for Childhood C							
a	Change for Childhood Cancer in India Fund	Ankit Sood-Relief From cancer		**	2.35		2.35	
b	Change for Childhood Cancer in India Fund	Relief from Cancer			20.96		20.96	
С	Change for Childhood Cancer in India Fund	Samir and Sama - Relief From Cancer			1.01		1.01	
d	Change for Childhood Cancer in India Fund	Brown University - Relief From Cancer			0.50			
e	Change for Childhood Cancer	Master Card - Relief From Cancer			2.53		2.53	
	in India Fund	Hadhand Danna Takura Dallaf Francisco			0.33		0.33	
	in India Fund	Harit and Reena Talwar - Relief From Car	icer	8.73	4.03		4.03	
			Sub-Total XXV(ii)		31.21		31.21	
	CHANGE OF		Grand Total (XXV)		31.21		31.21	



Cankids...Kidscan (All amounts in ₹ lakhs, unless otherwise stated)

S. No	Particulars	Donor	As at 1 April	2022	Received / Receivable during the year	Receivable during the year	Utilised during the year	As at 31 March 2023
O(VI)(i) INR Scale up & Sustainability F	unds						
а	Change for Childhood Cancer (Scale up & Sustainability) Fund	Arvind Narainaswami and Family		12		38	5.00	*
b	Change for Childhood Cancer (Scale up & Sustainability) Fund			*			2.00	
С	Change for Childhood Cancer (Scale up & Sustainability) Fund	Vikram Sud		- 5		2	5.00	×
d	Change for Childhood Cancer (Scale up & Sustainability) Fund	Alok & Sobha Agarwal		*			5.00	
e	Change for Childhood Cancer (Scale up & Sustainability) Fund			*			5.00	
f	Change for Childhood Cancer (Scale up & Sustainability) Fund	Poonam Bagai		*		×	11.00	50 ×
g	Change for Childhood Cancer (Scale up & Sustainability) Fund	Peroshaw Dhunjishah Bolton Charities					3.00	-
h	Change for Childhood Cancer (Scale up & Sustainability) Fund	Angad Bagai		-			1.00	-
İ	Change for Childhood Cancer (Scale up & Sustainability) Fund	Ravi Mehrotra		*	5.00	*	5.00	
j	Change for Childhood Cancer (Scale up & Sustainability) Fund	Roshanlal Public Charitable Trust			2.60 5.00		2.50 5.00	
k	Change for Childhood Cancer (Scale up & Sustainability) Fund	Rahul Mookerjee						
1	Change for Childhood Cancer (Scale up & Sustainability) Fund	Vikram and Uravashi Talwar			*	5.00	5.00	
			Sub-Total XXVI(i)		49.50	5.00	54.50	





Cankids ... Kidscan (All amounts in ₹ lakhs, unless otherwise stated)

	Particulars	Donor		As at 1 April 2022	Received / Receivable during the year	Receivable during the year	Utilised during the year	As at 31 March 2023
ii)IVXX) FCRA Change for Childhood C	cancer (Scale up & Sustainability) Fund						
a	Change for Childhood Cancer (Scale up & Sustainability) Fund	Ram Nayak - UKFFC		¥	8.48		8.48	
b	Change for Childhood Cancer (Scale up & Sustainability) Fund	Chris Williams - UKFFC		•	4.94	1000	4.94	
С	Change for Childhood Cancer (Scale up & Sustainability) Fund	Piyush & Ruchira Gupta			11.38		11.38	12
d	Change for Childhood Cancer (Scale up & Sustainability) Fund	Seems Tulsiyan		20	10.19		10.19	95
е	Change for Childhood Cancer (Scale up & Sustainability) Fund	Roopak Taneja		*	8.33		8.33	
f	Change for Childhood Cancer (Scale up & Sustainability) Fund	Scott Howard - Give Foundation		*	15.94	100	15.94	9
g	Change for Childhood Cancer (Scale up & Sustainability) Fund	Rumki Fernandes-Give Foundation		926	0.73		0.73	-
h	Change for Childhood Cancer (Scale up & Sustainability) Fund	Akram Bagai-Give Foundation			0.88	(*)	0.88	*
			Sub-Total XXVI(ii)	-	60.87		60.87	
			Grand Total (XXVI)	-	110.37	5.00	115.37	

For Walker Chandiok & Co LLP

Chartered Accountants/ Firm's Registration No.: 001076N/N500013

Ashitsh Gupta

Partner

Membership No.: 504662

Place: Gurugram Date: 22 August 2023 For and on behalf of Cankids...Kidscan

Poonam Bagai Chairman

Place: New Delhi Date: 22 August 2023 Tarun Ohri Treasurer

Gopal Sharma Chief Finance Officer



Annexure -'D' to Schedule "11" forming part of the financial statements as at 31 March 2023 (All amounts in ₹ linhs, unless otherwise stated)

Direct Support to beneficiary

Particulars	For the year	ended 31 Mar	For the year ended 31 March 2022			
	INR	FCRA	Total	INR	FCRA	Total
Medical Projects & Support Program	1,111.40	291.61	1,403,01	983.91	361.92	1,325.83
Treatment Support Program	150.93	23.13	174.06	165.81	38.04	203.85
Pediatric Palliative Care	2.47	2.27	4.74	2.32	4.77	7.09
Pediatric Psycho-Oncology Program	4.11	1.30	5.41	4.06	0.28	4.33
Education Program	36.78	19.57	56.35	44.19	8.44	52.63
Total	1,305.69	337.88	1,643.57	1,180.29	413.45	1,593.73

For and on behalf of Cankids. Kidscan

For Walker Chandiok and Co LLP

Chartered Accountants

Firm's Registration No.: 001076N/N500013

-4

Poonam Baga Chairpan Tarun Ohri Treasurer Gopal Sharma Chief Finance Officer

Place: Gurugram Date: 22 August 2023

Membership No.: 504662

Place: New Delhi Date: 22 August 2023

Cankids...Kidscan

Significant accounting policies and notes to the financial statements for the year ended 31 March 2023

(All amounts in ₹ lakhs, unless otherwise stated)

Schedule 14: Significant accounting policies

l) Background

Cankids... Kidscan is a Society registered under the Societies Registration Act, XXI of 1860 on 13 June 2012, bearing registration number 0736, having its registered office at D-777, Vasant Vihar, New Deihi-110057. The object of the Society is primarily to work with children with cancer, families of children with cancer and children of parents with cancer.

The Society has also renewed the registration under the Foreign Contribution (Regulation) Act, 2010/ Foreign Contribution (Regulation) Rules, 2011, for carrying out educational and social activities with registration number 231661613 dated 08 January 2021 for the period from 24 September 2020 to 24 September 2025.

The Company has been granted an exemption under section 12A of the Income-tax Act, 1961, vide Document Identification Number AABAC3450GE2021401 dated 28 May 2021and valid till AY 2026-27. The Company has also obtained exemption u/s 80G(5)(vi) of the Income-tax Act, 1961, which has Document Identification Number AABAC3450GF2021401 and valid till AY 2026-27.

II) Significant accounting policies

a) Basis of preparation

The financial statements have been prepared and presented under the historical cost convenion on the accrual basis (except for Gratuity) and in accordance with the generally accepted accounting principles and the applicable Accounting Standards issued by the Institute of Chartered Accountants of India. The accounting policies have been consistently applied by the Society and are consistent with those used in the previous year.

b) Use of estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires the Society to make estimates and assumptions that affect the reported amounts of assets and liabilities and the disclosures of liabilities at the date of financial statements and the reported amount of revenues and expenses during the period reported. Actual results could differ from those estimates. Any revision to accounting estimates is recognized prospectively in current and future periods.

c) The financial statements are prepared in Indian Rupees, which is also the Society's functional and presentation currency. All amounts have been rounded to the nearest takhs up to two decimal places, unless otherwise stated. Consequent to rounding off, the number presented throughout the document may not add up precisely to the totals and percentages may not precisely reflect the absolute amounts.

d) income recognition

(i) Grants and donations

Grants and donations are recognized to the extent that it is probable that the economic benefits will flow to the Society and these can be reliably measured.

Income from Grants and donation are recognized as income on accrual basis to the match the revenue and capital expenditure incurred during the year,





Significant accounting policies and notes to the financial statements for the year ended 31 March 2023

(All amounts in ₹ lakhs, unless otherwise stated)

(ii) Interest income

Interest income is recognized using time proportion method, based on the rate implicit in the transaction.

e) Property, plant and equipment and depreciation

Tangible assets

Tangible assets are stated at cost less accumulated depreciation. Cost comprises the purchase price and any attributable cost of bringing the asset to its working condition for its intended use. Tangible assets received as donation in kind from individuals are shown at nominal value at ₹1/in the books of account and tangible assets received as donation in kind from other institutions/ societies/ trust, if any, are recognized at value certified by registered/ independent valuer.

Depreciation

Depreciation of tangible assets is provided as per the rates and in the manner prescribed under Income -tax Act, 1961. However, tangible assets acquired from foreign contribution fund is fully depreciated in the year of purchase.

f) Funds

(i) Restricted funds

Corpus fund

Corpus fund represents amounts received from the donors for corpus and the same is deposited with bank and fixed deposits. The interest earned is utilised for general purposes of the Society.

Life membership fund

Life Membership fund represents life membership fees paid by members of the Society. The amounts are deposited in the bank as 'fixed deposits'.

Earmarked funds

Earmarked fund represents funds received for specified purposes. The amounts are deposited in the bank as fixed deposits' and interest received is utilized for the same purpose only.

Capital grant funds

Capital grant fund represents property, plant and equipment received from ICS (Indian Cancer Society) on their incorporation and other donors. The Society receives property, plant and equipment as donation in kind and the same is recorded at the nominal value of ₹1 each.

Project specific funds

"Project Specific fund" represents grants received from various funding agencies to carry out specific activities. These are held in Society until used for the purpose specified and deposits / investments are earmarked against them. Revenue from the restricted fund is recognizing the year in the Income and Expenditure Account to match the incurred revenue and deptal expenditure. At the end of the agreement, the unutilized project fund is either returned to the respective donor or the same is transferred to Income and Expenditure Account in the relevant year in which the project is completed.





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Significant accounting policies and notes to the financial statements for the year ended 31 March 2023

(All amounts in ₹ lakhs, unless otherwise stated)

(ii) Unrestricted fund

General fund

The Society also receives "general funds" which are not subject to grantor stipulations as to use, and the same may be used as per the management's discretion. The surplus earned during the year, being general purpose in nature is carried forward for use in future periods. In case of deficit, if in any year, the same is adjusted against General fund.

g) Foreign currency transactions

Transactions in foreign currency and non-monetary assets are accounted for at the exchange rate prevailing on the date of the transaction. All monetary items denominated in foreign currency are converted at the year-end exchange rate.

The exchange differences arising on such conversion and on settlement of the transactions are dealt with in the Income and Expenditure Account.

h) Employee benefits

Provident fund

The Society makes contribution to statutory provident fund in accordance with Employees Provident Fund and Miscellaneous Provisions Act, 1952. This is a post-employment defined contribution plan and the contribution paid or payable is recognized as an expense in the period in which services are rendered by the amployee.

Gratuity

Gratuity is a post-employment benefit and is in the nature of a defined benefit plan. Gratuity is calculated in the manner prescribed under Income Tax Act, 1961 and is recognized as expense on actual payment basis

Other short-term benefits

Other short-term benefits are recognized as expenses on actual payment basis for the period during which services are rendered by the employee.

i) Impairment of assets

The Society on an annual basis makes an assessment of any indicator that may lead to impairment of assets. If any such indication exists, the Society estimates the recoverable amount of the assets. If such recoverable amount is less than the carrying amount, then the carrying amount is reduced to its recoverable amount by treating the difference between them as impairment loss and is charged to the income and Expenditure Account. If at the balance sheet date there is an indication that if a previously assessed impairment loss no longer exists, the recoverable amount is reassessed and the asset is reflected at the recoverable amount subject to a maximum of depreciated historical cost.





Significant accounting policies and notes to the financial statements for the year ended 31 March 2023

(All amounts in ₹ lakhs, unless otherwise stated)

j) Provisions and contingent liabilities

The Society makes a provision when there is a present obligation as a result of a past event where the outflow of economic resources is probable and a reliable estimate of the amount of the obligation can be made.

A disclosure is made for a liability when there is a:

- a) possible obligation, the existence of which will be confirmed by the occurrence/ non-occurrence of one or more uncertain events, not fully with-in the control of the Society; or
- present obligation, where it is not probable that an outflow of resources embodying economic benefits will be required to settle the obligation; or
- c) present obligation, where a reliable estimate cannot be made.

Where there is a present obligation in respect of which the likelihood of outflow of resources is remote, no provision or disclosure is made.

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Significant accounting policies and notes to the financial statements for the year ended 31 March 2023

(All amounts in ₹ takhs, unless otherwise stated)

Schedule 15: Notes to the financial statements

(i) Allocation of common expenses

- a. Central core services expenses comprise of core staff and administrative expenses of all the core service programs including medical program, treatment support program, pediatric palliative care program, pediatric psycho-oncology program, education program, patient navigation and family engagement program, medical and social support informatics program, national outreach program, communication education patient awareness and advocacy, capacity and skill building, quality care and research impact program and salaries and allowances of the staff. The allocation of central core services expenses to all the CHSU's is a fixed percentage of the net cost of the CHSU or Care Center as determined by the management. No allocation of such expenses is done where funding for a specific program is secured from a donor.
- b Central administrative expenses allocation is a fixed percentage of each CHSU or care center budget as determined by the management. Central administrative expenses include Administrative, HR, Finance, Resource mobilization Planning & Governance expenditure. No allocation of such expenses is done where funding is secured from a donor.
- (iii) During the year, the Society has received donations amounting to ₹28.40 (Previous year, ₹29.04) as anonymous donation. However, the aggregate amount is within the permissible limit under Income Tax Act, 1961 (i.e. less than 5% of the total donation received during the year), hence it is not treated as taxable donation.
- (iii) During the year, the Society has incurred the expenses from local books of accounts to facilitate the running of ongoing foreign contribution projects and program activities, and an amount of ₹33.34 is outstanding as on 31 March 2023 (Previous year: ₹57.62), which will be transferred to local bank account in the next financial year.
- (iv) During the year, interest earned on earmarked funds has been allocated on the respective earmarked funds on actual basis to utilize the same for directed purposes.
- (v) The Society follows project accounting in case of specific projects, resultant unutilized amount of specific project funds has been shown as a 'Project specific fund' in the Balance Sheet. Similarly, in case if the Society spent excess amount against the amount received for specific projects, such amount has been shown as 'Grant receivable' up to the amount spent/utilized on the same projects.
- (vi) Balances appearing under current assets and current liabilities are subject to confirmation in certain cases.
- (viii) The annual financial statements of the Society are the consolidation of all the charitable activities run by the Society across the country.
- (viii) Note 1 to Note 15 form an integral part of the Financial Statements.





Significant accounting policies and notes to the financial statements for the year ended 31 March 2023

(All amounts in ₹ lakhs, unless otherwise stated)

(ix) Previous year figures

Previous year figures have been regrouped/ reclassified wherever necessary to confirm to the current year's presentation/classification.

For Walker Chandiok & Co LLP

Chartered Accountants

Firm's Registration No.: 001076N/N500013

Ashish Gupta

Partner Membership No.: 504662

Place : Gurugram Date : 22 August 2023 For and on behalf of Cankids...Kidscan

Poonam Bagai

Tarun Ohri Gopal Sharma Treasurer

Chief Finance Officer

Place: New Delhi Date : 22 August 2023



Change for Childhood Cancer in India Cankids Offices & Care Centres

OUR OFFICES

Head Office

J-161/A, Gautam Nagar, New Delhi -110049 | Phone: 011-40512467, 011-45512466

Registered Office:

D-7/7, Vasant Vihar, New Delhi-110057 | Phone: 011-41663670 | Directions To Gautam Nagar Office

Mumbai:

CanKids KidsCan & CanShala Jagannath Bhatankar Municipal School, Vithal Chavan Marg, Parel, Mumbai -400012 | Phone: 09833569590

CARE CENTRES:

Head Office Services & Subhita PPC Centre, Delhi:

CanKids Pediatric Palliative Centre: J-161/A Gautam Nagar, New Delhi 110049 Phone: +91-11 40512467, 45512466, 45792888, 41006617/18

North Region

Regional Care Coordination Centre - North:

CanKids KidsCan 161- J, Gautam Nagar, New Delhi - 110049 | Phone: +91-11 40512467, 45512466, 45792888, 41006617/18

Snehograh HAH Kotla Delhi

1463/A, Street No 5, Wazimagar, Kotla Mybarakpur, New Delhi - 110003 Phone: 011-23340004, 7654137597

Snehsharan HAH Kalawati Delhi

Quarter No 18, Telegraph, P.K.Road, New Delhi -110001 Phone: +91 9958560881 State Care Coordination Centre - Uttar Pradesh and Sapno ka Ghar HAH Lucknow 201, sector-6B Vrindavan Yojna, Telibagh, Lucknow 226029

Snehashish HAH Varanasi

AN 287, Susuwahi, Varanasi, Uttar Pradesh - 221011

State Care Coordination Center and Sneh Niwas HAH Patna

B-200, Police Colony, Anisabad, Patna – 800002 | Helpline number - 8860177017

State Care Coordination Centre - Punjab & UT & Sadda Veda HAH Chandigarh

Near Mehra Dhaba Village-Majra, Sub-Tehsil-Majri, Tehsil-Kharar, District- SAS Nagar (Mohali), Punjab 140110 Phone: +917888729707, 9953590210, 8264874723, 9682565132

West Region:

Regional Care Coordination Centre - West & Canshala Mumbai:

CanKids KidsCan, Jagannath Bhatanakar Municipal School, (Near Elphinstone Bridge) Parel, Mumbai - 400012 Phone: (022)24712923 | Maharashtra Helpline: 9152735010

State Care Coordination Centre – Gujarat & Subhag Awas HAH Ahmedabad:

NO 2, Civil Hospital Rd, Ganpat Colony, Bardolpura, Girdhar Nagar, Ahmedabad, Gujarat 380016 | Phone: +91 9953591571, 9712613087

State Care Coordination Center and Sukh Anand HAH Bhopal:

157, sector- 2 A saket nagar, Huzur, Bhopal, H.e. Hospital, Madhya Pradesh 462026

Sneh kunj HAH Aurangabad:

G No. 13, Plot No. 09, Zakir Husain Housing Society, Padegaon, Aurangabad 431001

Sneh Sansaar HAH Nagpur:

Plot No.201 Parfect Cooping Housing Society Pannase Layout Krashna Classic Indraprastha Nagar Bhamti Nagpur 440022

South Region:

Regional Care Coordination Centre:

South - Snehalaya HAH Chennai & Canshala Chennai GRN Sarvesh, New No 98 Old No 5, South West Boag Road, T Nagar, Chennai 600017 | Phone: +91 - 9444096660, 044 24413531

State Care Coordination Centre and Salil Niwas HAH Bangalore:

No: 52, Reliable lifestyle Layours 1/1, Haralur Village, Varthur Hobli, Bengaluru East Taluk, Bengaluru — 560 102 | Phone : 080 41627749, 9444096660



Because we are able

Because we can do anything we set our mind to,

DREAM BIG.....

Reach for the stars.....

Touch the sky.......

Then hold out a helping hand

And be the wind beneath another's wings

Soaring upwards, fly in the face of her storm.

Share the joy of the rainbow and soak up the energy of the sun

Forever stand tall and live the life of a hero

Because we are able....Because we can



cankidsindia.org | +91-9953591578





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