



National Society
for Change for
Childhood Cancer
in India

PAGES OF CHANGE

STORIES OF COURAGE.
STORIES OF CARE.



ANNUAL REPORT 2024-2025

“
EVERY CHILD'S JOURNEY
WITH CANCER IS A STORY.
IN THESE PAGES, WE CELEBRATE
STORIES OF COURAGE, CARE, AND
CHANGE.

THIS YEAR WE SUPPORTED AND
CELEBRATED THOUSANDS OF STORIES.

”

PAGES THAT TELL OUR STORY OF HOPE



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THE FIRST PAGE OF CHANGE

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We are closer to our 2030 vision of 100% access, 100% financial protection, and 60% survival. You inspire us every day to keep dreaming bigger, working harder and believing in a world where every child with cancer will survive and thrive.

Reflecting on 2024 Milestones of Impact



2024-25 was full of some lovely high notes.

At our SIRO-certified Pediatric Cancer Research Institute, partners Dr. Pooja Aggarwal and Dr. Padam Singh of Apar Health highlighted that the financial protection we provide under YANA (You Are Not Alone) is as vital as the access to care we drive—especially since 92% of children we support are from low-income families. Our relentless efforts and work with State Governments and other stakeholders have driven Access to Care to 53%—up from 29% in 2019. In September 2024, Childhood Cancer Awareness Month, Member Health, NITI Aayog Dr. Vinod Paul, launched our campaign for 100% Financial Protection by 2030, affirming these as twin pillars of Universal Health Coverage for children with cancer.

When I had cancer, back in year 2000, my boys Angad and Akram were 7 and 3. In December this year, Days before my son Angad's wedding, I was persuaded by our internationally recognized Ocular Oncologist, Dr Santosh Honavar, to fly in to deliver a keynote at the International Society of Ocular Oncology (ISOO) 2024-Goa, addressing 350 specialists from 56 countries. "India is Fighting RB (Retinoblastoma) and We are Winning" is the remarkable story of the power of collaboration among all stakeholders, research and service delivery and the committed support by our Gold hero Champions Kanaka and Siddhant Sirpal's Sajeev CanKids RB Fund which has driven access to 84% and survival outcomes approaching global bests. Through One Cancer at a Time (OCAT), we are extending this model to 6 other focussed childhood cancers.

Receiving the Lifetime Achievement Award from the Indian Academy of Paediatrics – Paediatric Haematology Oncology Chapter (IAP PHO) at the 8th National Social Support Conference (PHOSSCON), organized by CanKids, alongside the 27th PHOCON in Jammu in November, was deeply humbling. The award goes to the children, survivors, families, team, and you our supporters and partners, whose courage and commitment define our journey. Thank you.

A PAGE OF LOVE



Sonal Sharma
Co-Founder / Board Secretary

Patient-Centred Care – Sonal Sharma
Parent of Childhood Cancer Survivor
- Shubhangi Sharma
Patient Advocate.

At CanKids, every program begins with the child and family, recognizing that care is not complete unless it addresses education, emotional rights, and dignity alongside treatment.

Through YANA (You Are Not Alone), over 22,000 families received navigation, care coordination, and holistic support services as we held their hands at every step of the journey. Our survivors and parent member patient navigators worked at district and primary health levels to raise awareness, enable early detection, and facilitate timely diagnosis and referral.

They also championed "My Right to Care" ethical frameworks for practice and consent, built capacities through PACER (Patient Advocates for Clinical Research), presented research internationally, and helped set up and run Passport2Life Survivor Clinics and advancing reintegration, livelihoods and patient parent education.

The UICC theme for World Cancer Day – United by Unique – launched on World Cancer Day Feb 4th truly resonates with us, reaffirming that the patient and her journey must always remain at the center of all healthcare. Through 45 days of Cycle for Gold Edition 4, survivors, parents, cycling groups, and communities came together to ride over 700,000 km, across 97 cities- carrying our message of Go Gold India across the country.

A PAGE OF VISION



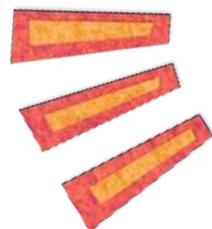
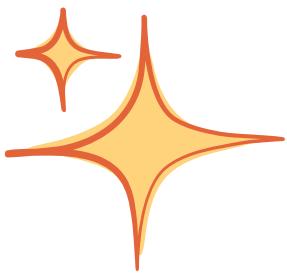
*Mukul Marwah
Co-Founder / Vice Chairman*

Harmony, Balance & Organisational Strength

This year marked a turning point for CanKids. After two consecutive years of deficit, we achieved a surplus, with income rising 37% to ₹54.89 crore (USD 6.4 million) and expenditure by 25% to ₹52.56 crore. This balance reflects not just numbers but resilience and disciplined growth.

We strengthened systems at every level—state projects, grassroots sensitisation, hospital partnerships, capacity building, leadership, donor management, impact assessment, policy and process, —ensuring that resources translate into sustainable impact.

It was a year of continued harmony and balance : between ambition and responsibility, vision and execution. With gratitude to our partners and teams, we move forward with renewed confidence that every rupee we raise and spend – is an investment that brings us closer to our 2030 goals of access, protection, and survival.



PAGE OF INTEGRITY



Tarun Ohri, Treasurer

The last two years of deficit were a strong reminder that financial sustainability is as vital as mission delivery. In 2024-25, I am pleased to share that we turned a corner. Our income grew by 37% to ₹54.89 crore, while expenditure rose by 25% to ₹52.77 crore, leaving us with a healthy surplus of [₹2.12 crore]. With the FY 25-26 annual budget of nearly ₹60 crore (US\$ 7 million), CanKids today stands among India's leading NGOs.

These numbers are not just about financial discipline and stewardship. They reflect the deep trust our donors and partners place in us — a trust we are committed to honour with even greater rigor.

CanKids is a nationally recognized institution delivering end-to-end support for children with cancer. With partnerships across 141 hospitals in 22+ states, we have built a unique national footprint that allows us to serve children and families wherever they are in their cancer journey.

The evolving CSR landscape, sharper audits, impact assessments, and the demand for greater transparency are not just compliance requirements; they represent the priorities of our donors.

As we scale, we are embedding compliance, monitoring & evaluation, financial sustainability, and cash management into our very core. We owe this commitment to our donors and stakeholders — for it is their faith and support that allow us to bring care, dignity, and hope to every child with cancer.



TURNING THE PAGES FORWARD



Vaibhav Dayal, CEO



I joined CanKids as CEO in April 2025, with deep respect for the extraordinary journey that has brought us here. The year 2024-25 was one of a determined march to the goal with an increase of more than 3,000 additional children supported, compared to the year before. The recognition of Cankids in various forums including by several state governments is heart warming.

I am grateful to our board of governors and the cankids family, teams, and supporters who made this possible.

My commitment is to strengthen the foundation with processes and structures supporting efficient execution, ensuring accountability, and nurturing a culture which makes us deliver care with happiness

I look forward to carrying forward our mission with compassion and determination, as we move steadily toward our 2030 goals.

PAGES OF LEADERSHIP



• "GUIDED BY DEDICATED LEADERS AND
• ADVISORS, WE DRAW STRENGTH FROM
• THEIR VISION AND COMMITMENT THAT
• SHAPE OUR MISSION, INSPIRE OUR
• TEAMS AND DRIVE CHANGE FOR EVERY
CHILD WITH CANCER."

AMBASSADORS

RUCHIRA AND PIYUSH GUPTA

EX - CEO DBS, SINGAPORE



SANJAY AND MEETA KHURANA

CHAIRMAN AND MANAGING DIRECTOR, GOOD EARTH INFRA



ALAMELU AND ARVIND NARAINSWAMY

SAMBA BANK, RIYADH, UAE

DR. BLOSSOM KOCHHAR

FOUNDER & CHAIRPERSON,
AROMA MAGIC, DELHI, INDIA



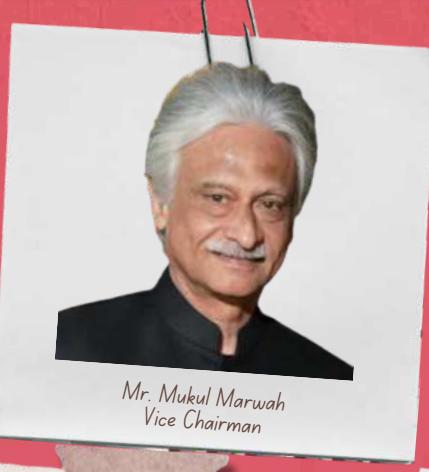
N JAYAKUMAR
MD & GROUP CEO, PRIME SECURITIES



BOARD MEMBERS



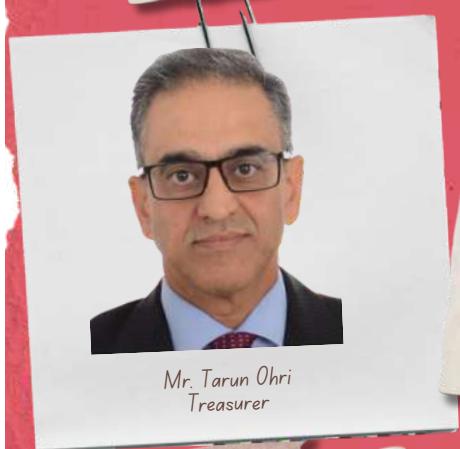
Ms. Poonam Bagai
Founder-Chairman



Mr. Mukul Marwah
Vice Chairman



Ms. Sonal Sharma
Secretary / Parent Member



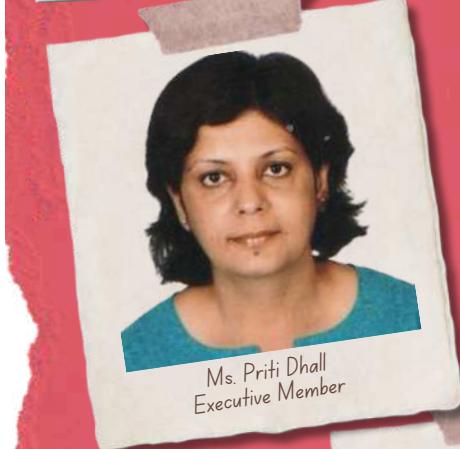
Mr. Tarun Ohri
Treasurer



Mr. Chandan Kumar
Joint Secretary / Survivor Member



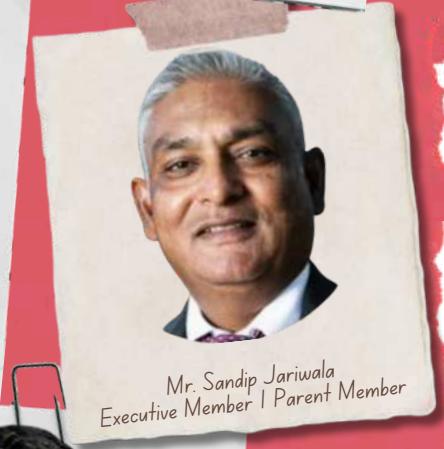
Mr. Srinath Mukherji
Executive Member



Ms. Priti Dhall
Executive Member



Rabani Garg
Executive Member / Parent Member



Mr. Sandip Jariwala
Executive Member / Parent Member



Ms. Gini Gulati
Executive Member



Dr. Venkatraman Radhakrishnan
Executive Member / Pediatric Oncologist

BOARD MEDICAL COMMITTEE ADVISORS



Dr. Amita Mahajan (Chair)
Sr. Consultant, Pediatric Hematology/Oncology
Indraprastha Apollo Hospitals
Lead Project Suddhik, CanKids KidsCan



Dr. Manas Kalra
Senior Consultant - Pediatric Hematology
Oncology and BMT, Sir Ganga Ram Hospital,
New Delhi



Dr. Vikramjit Kanwar
Former Chief of Pediatric Oncology
HBCH/MPMMCC Varanasi



Dr. Sameer Bakshi
Pediatric Oncologist
AIIMS, Delhi



Dr. Revathi Raj
Consultant-Pediatric Hematologist,
Apollo Hospitals, Chennai



Dr. Shruti Kakkar
Consultant, Clinical Hematology and Stem Cell
Transplant Unit. CMC & H. Ludhiana.



Dr. Shushma Bhatnagar
Clinical Lead and Senior Consultant for Pain
and Palliative Medicine at
Indraprastha Apollo Hospitals

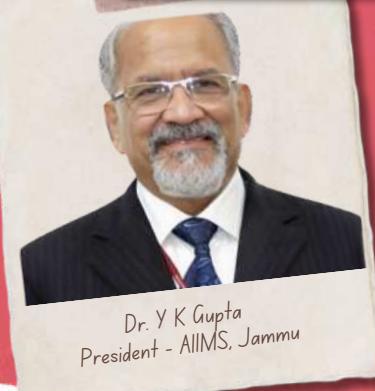


Dr. M. R. Rajagopal
Palliative Care Leader:
Founding Trustee, Pallium India.



Dr. Santosh Honavar
Director of Medical Services
Centre for Sight Eye Hospital

BOARD RESEARCH ADVISORY COMMITTEE



Dr. Y K Gupta
President - AIIMS, Jammu



Dr. Scott Howard
PDG chez Resonance

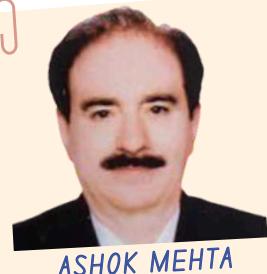


Dr. Pooja Sharma
Sr. Researcher PCRI, CanKids KidsCan
CEO APAR Health

BOARD ADVISORS



SOUMYA BANERJEE



ASHOK MEHTA



DR SURESH SUNDAR



AMIT JAIN

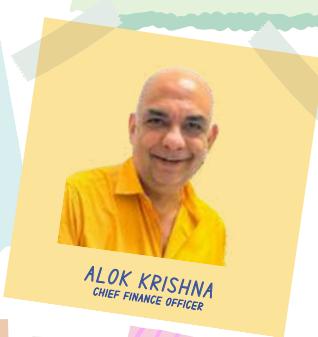
SENIOR LEADERSHIP



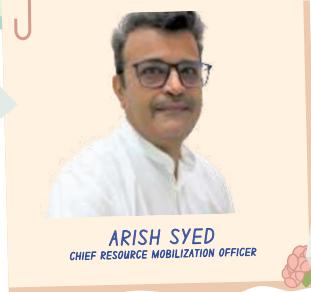
VAIBHAV DAYAL
CHIEF EXECUTIVE OFFICER



HARESH GUPTA
CHIEF PROGRAM OFFICER,
CHIEF PROGRAM, MEDICAL DIVISION & PALLIATIVE CARE PROGRAM AND
PEDIATRIC CANCER RESEARCH INSTITUTE.



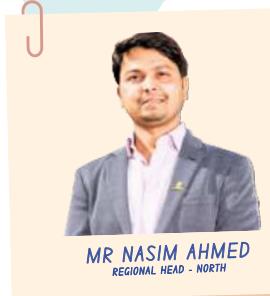
ALOK KRISHNA
CHIEF FINANCE OFFICER



ARISH SYED
CHIEF RESOURCE MOBILIZATION OFFICER



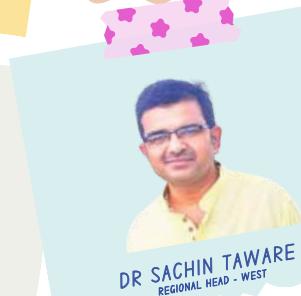
POONAM THARAD
CHIEF HUMAN RESOURCE OFFICER



MR NASIM AHMED
REGIONAL HEAD - NORTH



MR NABARUN PANDA
REGIONAL HEAD - EAST



DR SACHIN Taware
REGIONAL HEAD - WEST



MS LATHA MANI
REGIONAL HEAD - SOUTH



DR. NEELIMA THAKUR
HEAD, MEDICAL PROJECT & SUPPORT SERVICES PROGRAM



NIRBHAY SINGH
HEAD, PATIENTS NAVIGATION, ADVOCACY & FAMILY ENGAGEMENT
(PARENT AND SURVIVOR GROUPS)



SMARAJIT CHAKRABORTY
DIRECTOR, NATIONAL OUTREACH PROJECTS &
PROGRAMS



MAJ (DR) RASHMI SHARMA
HEAD - PEDIATRIC PALLIATIVE CARE PROGRAM &
TREATMENT SUPPORT PROGRAM



RUMI MITRA
DIRECTOR, COMMUNICATIONS EDUCATION PUBLIC
AWARENESS & ADVOCACY

EVERY PAGE GUIDED BY PURPOSE

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 throughout their journey.
- To secure the five rights of health-impaired children with cancer: the right to health, education, childhood, pain and palliative care, and the right to be heard.

MISSION

Deliver access to holistic care to children and families affected by childhood cancer

VALUES

- Engaging patients, parents & survivors & community. Working with passion, dedication and emotion that will always keep children and their families as central focus
- Creating a strong, sustainable organization to make the Change for Childhood Cancer.
- Collaborating and partnering with all stakeholders at India and International level.
- Developing low-cost sustainable models and solutions best suited to resource constrained to low middle income countries (LMICs).
- Working with honesty and transparency.
- Working professionally to ensure efficiency and accountability.
- Ensuring that 80% and more of all funds raised are utilized to support the children and their families.

PAGES OF IMPACT

"EVERY NUMBER TELLS A STORY, EVERY CIRCLE
CHANGES A LIFE."

Access - 40,618 (53%)

children with cancer accessed care in India

Reach - 27,260

children accessed care at our 141 partners hospitals

12,269

new children enrolled in our care

23,207 children

Direct Beneficiary Support

9217

children provided with Direct Medical Support

State Government MoUs signed
recognising Childhood Cancer Care as
Child & Health Priority

Uttar Pradesh

Punjab

West Bengal

Maharashtra

Madhya Pradesh

Gujarat

Tamilnadu

Puducherry

Karnataka & Odisha MoUs in process

141 Hospital Partnership
(CanKids Hospital Support Units)
in 60 cities, 22 states, 4 regions

19 Care Centers operational nationwide

15 Home Away from Home (HAHs), 3 CanShalas,
1 Pediatric Palliative Care Centre (PPCC)

16
Change for Childhood Cancer State Projects
Operational:

2,727
Total KidsCan Konnect (KCK) - Patient Advocates

4,219
Total Path Pradarshak Parivarik Sahayak Group
(P3SG) - Patient Navigators

509 staff members
(326 social support, 46 medical/para-medical,
137 admin/managerial)

Cycle For Gold IV
1,300+ riders | 7.32 lakh km | Rs.2+ Cr raised

Childhood Cancer Awareness Month 2024

20,000+ participants |
"Close the Care Gap & Serving the Underserved"
#SayNoToFinancialHardship campaign

World Cancer Day & International Childhood Cancer Day 2025
Theme: United By Unique: Inspiring Action
15+ states | Tens of thousands reached

PAGES OF ACTION

CHANGE FOR CHILDHOOD CANCER IN INDIA

EVERY CHILD HAS THE RIGHT TO SURVIVE AND THRIVE.

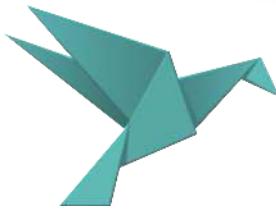


100 %
Access
100%
Financial Protection
60%
Survival by 2030

CanKids leads the national movement to ensure that every child with cancer—wherever they live—has access to quality care, financial protection, and the right to survive and thrive. Aligned with WHO CureAll and The Global Initiative for Childhood Cancer (GICC), this is our call to action for equity, evidence, and empathy.

5 Rights

Health | Education | Voice | Pain-Free Childhood | Financial Protection



CANKIDS THEORY OF CHANGE 2023–2030

TRANSFORMING CHILDHOOD CANCER CARE IN INDIA

BECAUSE (THE PROBLEM AREAS WE ADDRESS)

Access

Children with cancer from underserved communities face social, cultural, financial, and geographic barriers that delay diagnosis and treatment. Limited health services, lack of affordable transport, and financial hardship prevent timely access to quality cancer care.

Care

Children and families often lack psychosocial support, pain and symptom management, palliative care, nutrition, education continuity, and rehabilitation—leading to reduced quality of life during and after treatment.

Cure

Survival rates remain low due to delayed diagnosis, inadequate treatment facilities, limited trained healthcare providers, poor referral linkages, and lack of continuity of care. These gaps increase mortality and long-term disability, placing a heavy burden on families and the nation.

Awareness

Low awareness among families and communities about early signs of childhood cancer and available services leads to late detection and poorer outcomes.

CAUSAL PATHWAY (HOW CHANGE IS CREATED)

CanKids works through an integrated, child-centric approach by focusing on:

- **AWARENESS AND ACCESS**
- **TREATMENT AND CONTINUITY OF CARE**
- **MULTIDISCIPLINARY CARE**
- **POLICY AND ADVOCACY**
- **RESEARCH AND DEVELOPMENT**
- **CAPACITY AND SKILL BUILDING**

These interventions operate together across the entire childhood cancer journey—from early detection to treatment, survivorship, or palliative care.

OUTCOMES (WHAT CHANGES IN THE SYSTEM AND LIVES)

- Children and families gain access to holistic cancer care, including treatment, psychosocial support, rehabilitation, and palliative care.
- Patients and families are rehabilitated and reintegrated into society, reducing long-term financial, social, psychological, and neurocognitive challenges.
- Childhood cancer gains higher priority at regional, national, and global levels.
- Healthcare systems and service delivery mechanisms are strengthened to respond more effectively to childhood cancer.



IMPACT (LONG-TERM CHANGE)

- 100% access to holistic care by 2030 for every child with cancer in India and their family.
- Secured rights of children with cancer to health, education, childhood, pain relief, and palliative care—and the right to be heard.
- Improved survival rate to 60% for childhood cancer in India by 2030.

FROM THEORY TO PRACTICE THE CANKIDS CARE PATHWAYS

Detect → Diagnose → Refer → Treat → Support → Reintegrate → Survive & Thrive

1. **Samanvay** – Care Coordination: State CCC projects, CHSUs, and MoUs with governments link hospitals, systems, and stakeholders to drive access.
2. **Sajhakaran** – Shared Care: From PHC to tertiary and home, enabling detect, diagnose, refer, treat, and continuity of care.
3. **Sugamikaran** – Financial Protection: Facilitation of government schemes, bridge funding, and protection from out-of-pocket expenditure.
4. **YANA** – You Are Not Alone: Patient-navigation and social-support teams walking beside families through the entire journey.
5. **OCAT & PCRI** – Evidence & Outcomes: Disease-specific projects and collaborative research networks improving survival and informing policy.
6. **Suddridh & Capacity Building** - Training HCPs, HCWs, SSTs, and institutions to deliver skilled, standardised, and sustainable care.
7. **Patient-Centred Healthcare** - The unifying philosophy ensuring that every intervention honours the child's rights, dignity, and dreams.



STATE PROJECTS & GOVERNMENT PARTNERSHIPS

FROM MODEL TO MOVEMENT — COLLABORATING WITH STATES

CanKids partners formally with state governments through signed MoUs with Departments of Health, Medical Education, and NHM. These partnerships embed the CanKids models into public health systems—recognising childhood cancer as a state priority. Current dialogues underway in Odisha, Karnataka, and Bihar aim to expand the CCC India framework nationwide.

Active Government MoUs: Punjab, Uttar Pradesh, West Bengal, Maharashtra, Madhya Pradesh, Gujarat, Tamil Nadu, and Puducherry.

States in Progress: Odisha, Karnataka, Bihar.

16 CCC State Projects | 12 State Samanvay Kendras | 141 CHSUs linked to government networks.

The CanKids National-State-District Framework

The CanKids National District Framework connects every level of the health system — from national leadership to state Samanvay Kendras, district outreach, and hospital CHSUs. It operationalises our 100% Access goal by linking children, families, and health facilities through an integrated referral and support pathway.

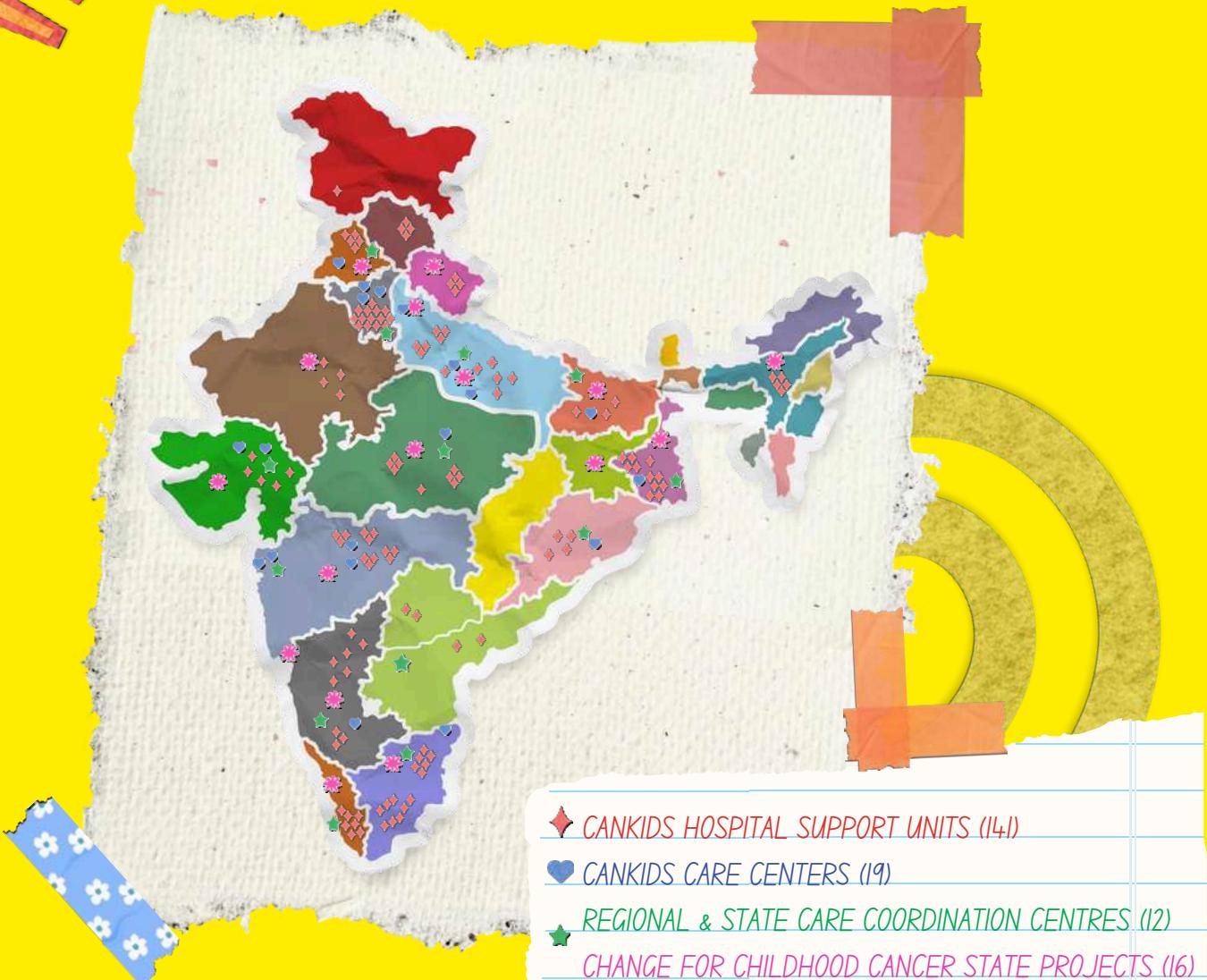
Level	Institutions & Mechanisms	Functions / Focus	Key Outputs / Reach
National (CanKids HQ)	Governance, Policy, Research (ICCI, pCRI, OCAT, Advocacy)	Strategy, Evidence, Standards, Policy Influence	100% Access — 100% Financial Protection — 60% Survival Framework
State (Samanvay Kendras)	12 State Care Coordination Centres + 16 CCC State Projects	Government liaison, Data & Scheme facilitation, MoU execution	8 MoUs + 3 in progress Integrated State Dashboards
District / Hospital (CHSUs)	141 Hospital Support Units + 19 Care Centres	Patient navigation, financial facilitation, shared care, outreach	10,000+ children supported annually End-to-End Care Coordination

This three-tier framework is the backbone of Change for Childhood Cancer in India — connecting national vision, state ownership, and district-level delivery.

"When states own the mission, children win."
- Poonam Bagai

PAGES OF STRENGTH

CANKIDS NETWORK & NATIONAL OUTREACH



“Our work under the National Outreach Program at CankidsKids can is anchored in strengthening public health systems so that no child is denied timely, quality cancer care due to geography or socio-economic barriers. Through structured partnerships, capacity building, and evidence-based program design, we continue to support States in translating policy intent into measurable outcomes.



SMARAJIT CHAKRABORTY
DIRECTOR, NATIONAL OUTREACH PROJECTS & PROGRAMS

CANKIDS NETWORK

NATIONAL OUTREACH

19 CanKids Care Centres
 15 — Home Away from Home
 1 — Pediatric Palliative Care Centre
 3 — CanShalas

12 Regional & State Care Coordination Samanvay Kendras
 16 Change for Childhood Cancer State Projects

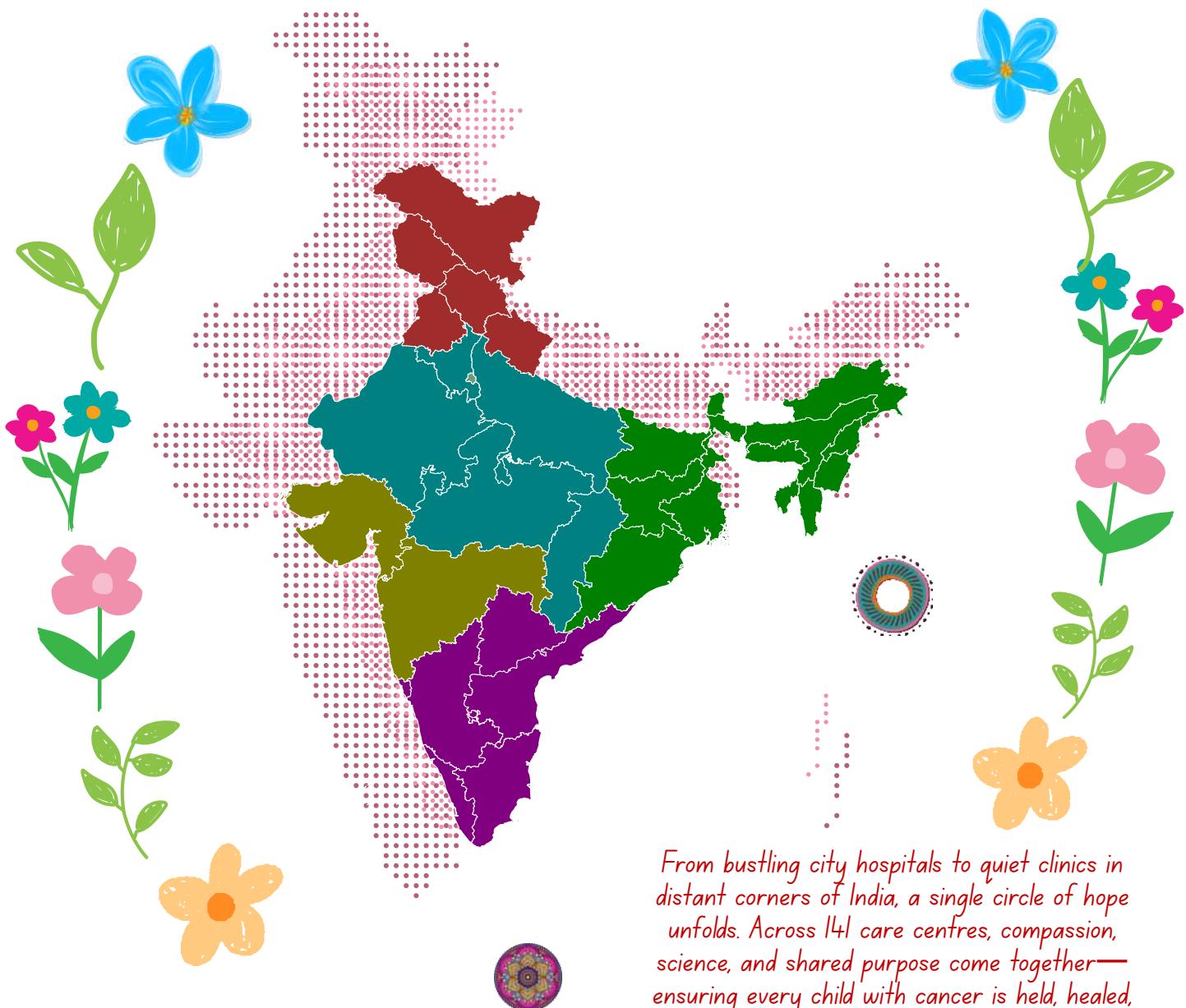
Regions	North	East	West	South
Children registered/ supported	5497/5426	1485/1230	3670/2846	1679/1463
CHSUs	46	20	42	33
RCCC/SCCC	Delhi, Lucknow, Chandigarh, Patna	Kolkata, Bhubaneswar	Mumbai, Ahmedabad, Bhopal	Chennai, Trivandram, Bengaluru
MOU	State Govt. of Punjab, Uttar Pradesh	State Govt. of West Bengal	State Govt of Maharashtra, Madhya Pradesh, Gujarat,	State Govt. of Tamil Nadu, Puducherry
Coverage	Delhi, Uttar Pradesh & Uttarakhand, Rajasthan, Punjab & UT Chandigarh (also covering HP, Haryana, Ladakh and J&K)	West Bengal, Odisha, Bihar & Jharkhand, North East States (8 states)	Maharashtra, Gujarat & UT Daman & Diu & Dadar & Nagar Havelli, Madhya Pradesh & Chhattisgarh, Goa	Tamil Nadu & UT Puducherry Andhra Pradesh & Telangana Karnataka Kerala

NATIONAL OUTREACH

S.No	CCC State Project	CHSUs	Care Centers	RCCC/SCCC
1	Andhra Pradesh and	2	0	0
2	North East	5	0	0
3	Bihar	3	1	1
4	Delhi	14	3	1
5	Goa	1	0	0
6	Gujarat	8	2	1
7	Punjab and Adjoining States	12	1	1
8	Maharashtra	24	4	1
9	Madhya Pradesh	9	1	1
10	Karnataka	9	1	1
11	Kerala	8	1	1
12	Odisha	4	1	1
13	Tamil Nadu & Puducherry	14	2	1
14	Rajasthan	5	0	0
15	Uttar Pradesh & Uttarakhand	12	1	1
16	West Bengal	11	1	1
	Total	141	19	12

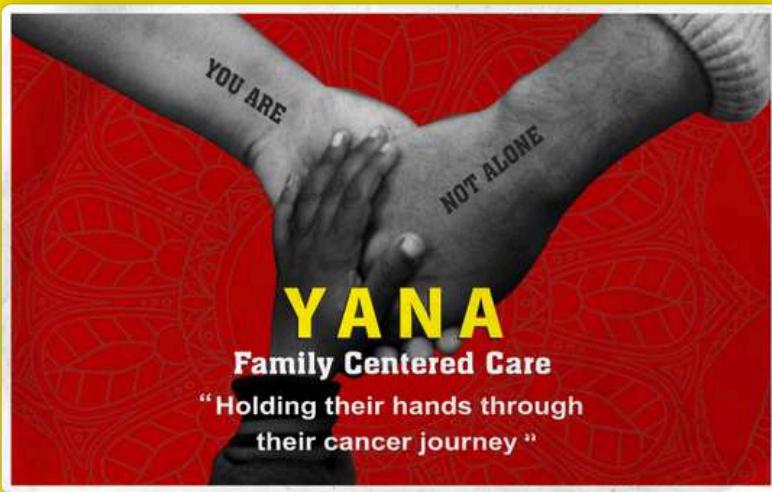
WARD TO WARD ACROSS INDIA

CANKIDS HOSPITAL SUPPORT UNIT PROJECTS ARE PARTNERSHIPS WITH CHILDHOOD CANCER TREATMENT CENTERS WHICH FOCUS ON STRENGTHENING INFRASTRUCTURE AND EQUIPMENT, MANPOWER, TREATMENT MODALITIES, AND SUPPORT SERVICES ADDRESS GAPS IN SERVICES YEAR ON YEAR WITH THE GOAL TO ACHIEVE BEST TREATMENT, CARE AND SUPPORT FOR CHILDREN AND FAMILIES GETTING TREATMENT AT THE CENTER.



From bustling city hospitals to quiet clinics in distant corners of India, a single circle of hope unfolds. Across 141 care centres, compassion, science, and shared purpose come together—ensuring every child with cancer is held, healed, and never alone on their journey.

PAGES OF BRIDGES



OVER THE YEARS, CANKIDS HAS WIDENED ITS CIRCLE OF REACH AND ACCESS, ENSURING THAT MORE CHILDREN AND FAMILIES TOUCHED BY CHILDHOOD CANCER RECEIVE TIMELY, HOLISTIC AND COMPASSIONATE SUPPORT. FROM STRENGTHENING ACCESS TO EXPANDING OUR PROGRAMME YOU ARE NOT ALONE (YANA), OUR COMMITMENT IS TO LEAVE NO CHILD BEHIND.

BENEFICIARIES SUPPORT SERVICE-WISE

WE STOOD BY EVERY CHILD WITH CANCER & THEIR FAMILY

MEDICAL



We provided essential medical support to **9217** children

OTHER HOLISTIC SERVICES

PATIENT NAVIGATION



- **7,000+** members in KidsCan Konnect (KCK) for survivors and Path Pradarshak Parivarik Sahayak Group (P3SG) for parents
- **100+** trained Patient Navigators guiding families across CHSUs and hospitals

TREATMENT SUPPORT PROGRAM



- A total of **14,784** children & families were benefitted with nourishment, blood support, transportation & accommodation

PEDIATRIC PSYCHO-ONCOLOGY PROGRAM



- We offered emotional and psychological care to **7,451** children & families

EDUCATION



- **6,120** children supported through bedside and structured education during treatment
- **9,771** children engaged in non-formal education
- **1,150** children supported with scholarships

NATIONAL OUTREACH PROGRAMME



- **141** hospital partnerships in 60 cities
- **19** Care Centers operational nationwide
- **16** Change for Childhood Cancer State Projects operational
- **12** Regional & State Care Coordination Samanvay Kendras
- **8** State MoUs

PEDIATRIC PALLIATIVE PROGRAM



- **874** children found comfort and relief through our care. **188** children were admitted for specialized inpatient care, where comfort, rest and dignity were the focus. We stood beside **147** grieving families, offering not just financial aid, but compassion and presence.

SURVIVORSHIP



- **62** survivors employed within CanKids and partner hospitals
- **3,000+** Survivor Passports issued for tracking reintegration
- **24** Passport2Life (P2L) Clinics supporting education and employment continuity

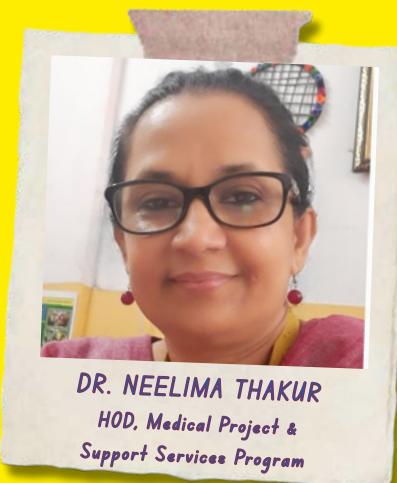




PAGES OF CARE

RIGHT CARE. RIGHT TIME. RIGHT SYSTEM.

Standing by Every Child, Strengthening Every System
60% survival by 2030 | Aligned with WHO GICC CureAID



DR. NEELIMA THAKUR
HOD, Medical Project &
Support Services Program

“ When a child is diagnosed with cancer, the first fear and uncertainty for parents are the financial challenges of medical treatment. We ensure timely Availability, Affordability, and Quality (AAQ) of diagnostic and treatment care, maintaining the highest standards to improve the quality of life for children with cancer and their families. We remain deeply committed to giving every child the chance to survive, thrive, and dream again. ”

We have made considerable progress in Retinoblastoma and Hodgkin's Lymphoma.

This year, our focus is on Acute Lymphoblastic Leukemia (ALL), but there is still much more to be done. For 'One Cancer at a Time (OCAT)' we continue to move forward, one step at a time.



DR AMITA MAHAJAN
Lead Project Suddridh, CanKide

MEDICAL & HEALTH SYSTEMS

RIGHT CARE. RIGHT TIME. RIGHT SYSTEM.

RIGHT CARE. RIGHT TIME. RIGHT SYSTEM.

Access to Treatment and Financial Protection In FY 2024-25, CanKids provided comprehensive medical assistance to children across India — ensuring access to essential drugs, diagnostics, surgeries, radiation, and emergency care.



9,217 children received direct medical support worth ₹17 crore

2,219 children received indirect support worth ₹28 crore

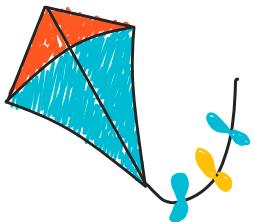
Support Types:

- Drugs & Therapies – 5,114 children | ₹8.33 Cr
- Diagnostics (incl. MRD) – 4,820 children | ₹5.6 Cr
- Surgeries & Radiation – 117 children | ₹0.41 Cr
- BMT Support – 41 children | ₹0.41 Cr
- Emergency Medical Aid – 1,136 children | ₹1.7 Cr
- Prosthesis & Implants – 533 children | ₹0.99 Cr
- After-Cancer Treatment – 533 children | ₹0.99 Cr

Regional Reach: North 4,267 | West 2,774 | East 1,194 | South 1024



No family walks
this journey alone.



FINANCIAL FACILITATION & SUGAMIKARAN

FROM FUNDING TO FACILITATION - TOWARDS 100 % FINANCIAL PROTECTION

Beyond providing direct medical aid, CanKids works to ensure that no family abandons treatment for want of money. Through Sugamikaran — our financial-protection and scheme-facilitation program — we connect families to the full range of government and institutional funding available for children with cancer.

Our Social Support Teams (SSTs) stationed in partner hospitals, together with State Samanvay Kendras, help families navigate complex systems. They identify eligible beneficiaries, prepare documentation, submit and track applications, and follow up with government departments. Where delays occur, we provide bridge funding of ₹20,000–₹25,000 per child to keep treatment on track until institutional funds are released.

FY 2024-25 Highlights:

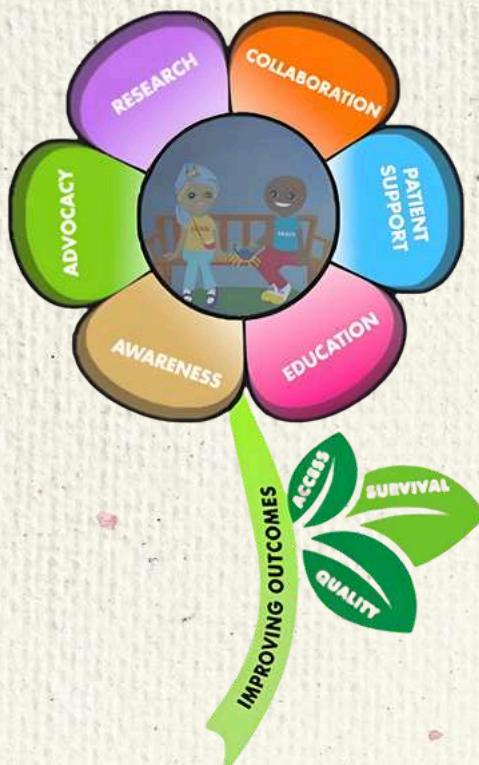
- Active in 12 states through Samanvay Kendras
- 5561 children assisted with insurance and welfare-scheme access
- Average processing time reduced from 60 days to 35 days
- ₹28 crore of government and institutional financing unlocked
- ₹17 crore provided as bridge funding to prevent treatment interruption
- 72 % of children received some form of government financial support

"When ₹20,000 in bridge funding helps a family unlock ₹5 lakh through Ayushman Bharat, that is real financial protection." — Dr Neelima Thakur

Sugamikaran = Simplifying Access / Strengthening Protection



ONE CANCER AT A TIME (OCAT)

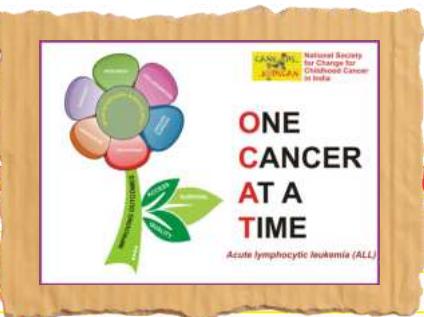


ONE CANCER AT A TIME

DRIVING SURVIVAL, ONE CANCER AT A TIME

Through One Cancer at a Time (OCAT), CanKids brings clinicians, treatment centres, and families together to improve survival and quality of life for India's most curable childhood cancers. Each OCAT track strengthens early detection, diagnostics, protocol adherence, and follow-up care — building evidence, improving outcomes, and aligning India's response to the WHO Global Initiative for Childhood Cancer (CureAll).

Together, these eight focus cancers represent over 60 % of India's childhood-cancer burden. By addressing them systematically, OCAT is helping India move from fragmented care to disease-based survival networks.



Acute Lymphoblastic Leukemia (ALL) Lymphoblastic Leukemia (ALL)

ALL is the most common childhood cancer, accounting for 74 % of all cases. Under OCAT, CanKids ensures that every child with ALL receives comprehensive diagnostic and treatment support.

- Advanced diagnostics: Cytogenetics, MRD testing, BCR ABL in all registered centres
- Treatment continuity: Access to all chemotherapy and supportive drugs
- Adherence support: patient navigation through the You Are Not Alone (YANA) system
- Research collaboration: participation in INPHOG-ICICLE, and ICMR-iCALL national studies

FY 2024-25 Snapshot:

- 9901 children supported
- 111 ALL-treating centres across India
- 5-year survival trend (participating centers 6): from <40 % to ~65 %) - Reference- Gogoi et al, 2025, Lancet Reg Health Southeast Asia <https://pubmed.ncbi.nlm.nih.gov/40487914/>

Advisory - Dr. Amita Mahajan, Dr. Howard Scott, Dr. Smita Bhatia, Dr. Arpita Bhattacharyya, Dr. Shuvadeep Ganguly

Hodgkin's Lymphoma

HL is the most curable childhood cancer, accounting for 5.5% of all cases. Under OCAT, CanKids ensures that every child with HL receives comprehensive diagnostic and treatment support.

1. Advanced diagnostics: PET-Scan in all registered centres
2. Treatment continuity: Access to all chemotherapy and supportive drugs
3. Adherence support: patient navigation through the You Are Not Alone (YANA) system

- Research collaboration: participation with INPHOG (Abstract submitted)
- INPHOG-HL-15-01 (HL Study)- Survival: 92.2% (OS), 84.6% (EFS)
- INPHOG-RHL-17-02 (Relapse HL Study)- Survival: 74.3% (OS), 67.1% (EFS)
- INPHOG-HL-24-04 (HL Immunotherapy Study)- Survival: 92.2% (OS), 89.1% (EFS)

doi: 10.1097/MPH.0000000000002423. Epub 2022 Mar 16. PMID: 35293880.

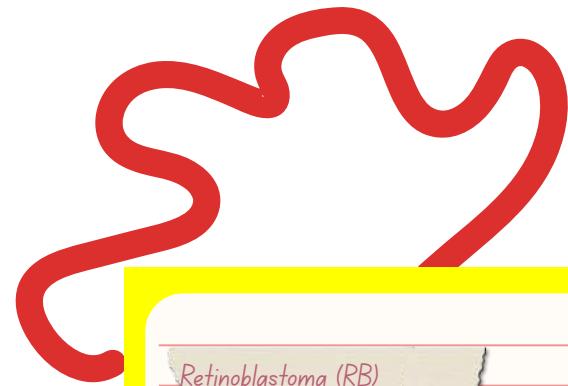
FY 2024-25 Snapshot:

- 1523 children supported
- 81 HL-treating centres across India

5-year survival trend (participating centre-21]: ↑ from 92.2% to ~74.3%

Advisory - Dr Amita Mahajan, Dr Manas Kalra





Retinoblastoma (RB)

RB is the most rare type of childhood eye cancer, accounting for 3 % of all cases. Under OCAT, CanKids ensures that every child with RB receives comprehensive diagnostic and treatment support.

- Advanced diagnostics: MRI (brain and orbit), Genetic Testing in all registered centres
- Treatment continuity: Access to all chemotherapy and supportive drugs
- Adherence support: patient navigation through the You Are Not Alone (YANA) system
- Research collaboration: participation in INPHOG study

FY 2024-25 Snapshot:

- 1689 children supported
- 64 RB-treating centres across India
- 5-year survival trend (participating center- 20): ↑ 83.6%(OS) 74.1% (INPOG-RB-19-01)

DOI: [10.4103/IJ0.IJ0_3031_24](https://doi.org/10.4103/IJ0.IJ0_3031_24)



Advisory -

Dr. Santosh Honavar, Dr. Amita Mahajan, Sima Das, Dr. Rollika Bansal, Dr. Narendra Patidar, Dr. Surbahi Shao, Dr. Divyansh Mishra, Dr. Himika Gupta

BSTS - Emergency-care protocols to improve outcomes

Bone and soft tissue sarcomas are important childhood cancers that require specialized and multidisciplinary care, accounting for 10 - 15% of all childhood sarcoma cases. Under OCAT, CanKids ensures that every child with BSTS receives comprehensive diagnostic, treatment, and supportive care.

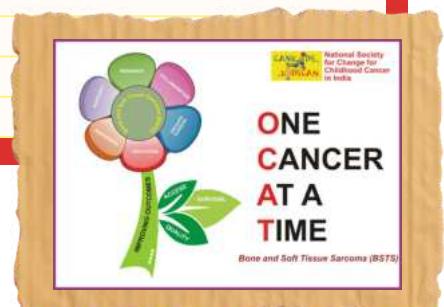
- Advanced diagnostics: Imaging (MRI/CT/PET), biopsy, and molecular testing at all registered centres
- Treatment continuity: Access to surgery, chemotherapy, radiotherapy, and supportive care drugs
- Adherence support: Patient navigation through the You Are Not Alone (YANA) system

FY 2024-25 Snapshot:

- 2062 children supported
- 91 BSTS-treating centres across India
- 5-year survival of Osteosarcoma: ↑ above 70% <https://www.inphog.org/InPHOG-OST-23-01>

5 Year survival rate of Ewings sarcoma (participating center- KGMU) - OS-23.5% and OS localised disease (42.3%)
<https://doi.org/10.1016/j.cegh.2024.101708>

Advisory - Dr. Manish Agarwal





APML - Emergency-care protocols to prevent early Deaths (APML)

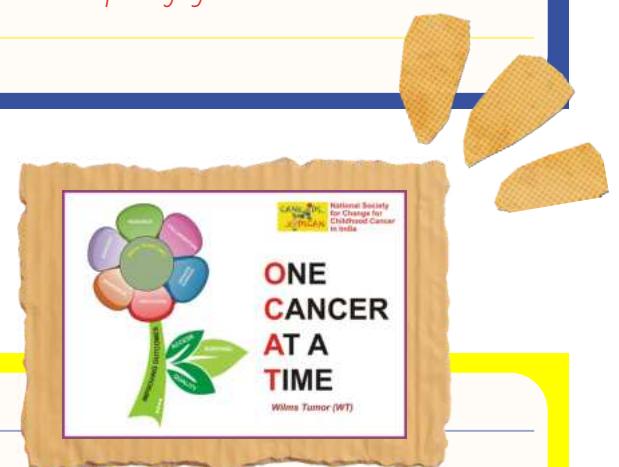
APML is a rare but highly curable subtype of childhood leukemia, accounting for 10-15% of children. Under OCAT, CanKids ensures that every child with APML receives timely and comprehensive diagnostic and treatment support.

- Advanced diagnostics: Flow-cytometry, PML-RARA testing, in all registered centres
- Treatment continuity: Access to all chemotherapy, targeted therapy (ATRA/ATO), and supportive drugs
- Adherence support: Patient navigation through the You Are Not Alone (YANA) system
- Research collaboration: INDIAN CHILDHOOD ACUTE PROMYELOCYTIC LEUKEMIA STUDY INPHOG-(I-ChAMP) research study

FY 2024-25 Snapshot:

- 213 children supported
- 47 APML-treating centres across India
- 3-year survival trend (10 participating centres): ↑ 91% : [10.1007/s12098-023-04689-4](https://doi.org/10.1007/s12098-023-04689-4)

Advisory - Dr Amita Mahajan, Dr Nishant Verma, Dr Smita Kayal, Dr. Shuvadeep Ganguly, Dr. Shweta Pathak, Dr. Maya Prasad, Dr. Anand Jillella, Dr. Howard Scott



WILMS TUMOR

Wilms tumor, also called nephroblastoma, is a kidney cancer that primarily affects children, usually under the age of 5.

It is the most common type of kidney cancer in children. Renal Cancer accounts for 6-7% of all childhood tumors.

- Advanced diagnostics: CT/MRI in all registered centres
- Treatment continuity: Access to all chemotherapy and supportive drugs
- Adherence support: patient navigation through the You Are Not Alone (YANA) system

FY 2024-25 Snapshot:

- 710 children supported
- 76 WT-treating centres across India
- 5-year survival trend (participating centers 17 pediatric oncology centers across India.) : (OS): 91.5% & Event-Free Survival (EFS): 85.9%. <https://doi.org/10.1002/pbc.3187>



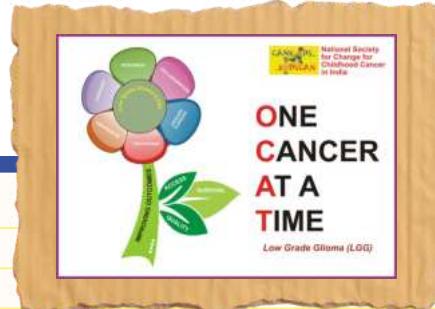
BURKITT LYMPHOMA

Burkitt Lymphoma (BL) is a highly aggressive B-cell non-Hodgkin lymphoma (NHL) that primarily affects children and young adults. It is characterized by the translocation and deregulation of the MYC gene on chromosome 8, leading to rapid cell proliferation. ~6–8% of all childhood non-Hodgkin lymphomas in India.

- Advanced diagnostics: PET-SCAN, MR/CT in all registered centres
- Treatment continuity: Access to all chemotherapy and supportive drugs
- Adherence support: patient navigation through the You Are Not Alone (YANA)

FY 2024–25 Snapshot:

- 276 children supported
- 64 BL-treating centres across India
- 10-year survival trend (participating centers, only 1,85 children treated over 10 year 2007-2017) - ~70–75%
<https://doi.org/10.1111/bjh.20093>



LOW GRADE GLIOMA

Low-grade gliomas (LGGs) are slow-growing primary brain tumors arising from glial cells in the central nervous system. In children, they are typically WHO Grade I or II tumors. These tumors are less aggressive than high-grade gliomas and generally have a favorable prognosis. LGG has an incidence rate of 30–50% of all childhood brain tumors.

- Advanced diagnostics: MRI, Surgery in all registered centres
- Treatment continuity: Access to all chemotherapy and supportive drugs
- Adherence support: patient navigation through the You Are Not Alone (YANA) system
- Research collaboration: Department of Neurosurgery, All India Institute of medical Sciences, and research section.

FY 2024–25 Snapshot:

- 219 children supported
- 34 LGG-treating centres across India
- 5-year survival trend (45 eligible survivors in a single centre): Overall survival 90–95%
<https://scispace.com/papers/lgg-ii-cognitive-academic-and-quality-of-life-outcomes-in-lgvubls>

PROJECT SUDDRIDH | PEDIATRIC ONCOLOGY CAPACITY & SKILL BUILDING (POCSB)

Quality care depends on strong institutions and skilled people. Through Project Suddridh, CanKids is building the backbone of pediatric oncology in India — strengthening hospitals, empowering clinicians, and standardising training across the country.

II INSTITUTIONAL CAPACITY BUILDING:

- State Partnerships

We have established two State Tumor Boards in Uttar Pradesh and Madhya Pradesh, comprising a multidisciplinary team to discuss difficult and challenging cases referred from hospitals, CHS, and PHCs.

- Pediatric Oncology Units Model

As part of our health system strengthening efforts, we have facilitated the establishment of dedicated Pediatric Cancer Units at BRD Medical College and Mahaveer Cancer Sansthan, Patna, ensuring that children in need have access to optimal treatment and continuous care services.

- Virtual Tumor Boards

CanKids conducts regular Virtual Tumor Board meetings with treating centers to ensure adherence to the standard of care. In the last financial year, 130 virtual tumor boards were conducted, discussing 133 cases from six centers — AIIMS Jodhpur, CCHRC, IGIMS, KNMH, and SMGS.



2 | HUMAN RESOURCE DEVELOPMENT:

- A total of 392 trainees from five medical colleges and hospitals were trained under the National Training Program – Practical Pediatric Oncology (NTP-PPO), conducted across various states under the banner of the Indian Academy of Pediatrics – Pediatric Hematology Oncology (IAP PHO). The training enhanced their proficiency in the early detection and diagnosis of childhood cancers and the optimal care of children with cancer.



(NTP-PPO)

Christian Medical College & Hospital
Ludhiana, 23rd March, 2025



(NTP-PPO)

Dr. Ram Manohar Lohia Institute of Medical Sciences
Lucknow-August 24, 2024



Kailash Cancer Hospital and Research Centres
Gujarat - 5th Oct, 2024



King George's Medical University (KGMU)
Lucknow - 22nd of March 2025

A total of 309 nurses from six medical colleges and hospitals were certified through our Nursing Training Certification Module..

"To achieve 60 % survival by 2030, we must strengthen every link of care." — Dr Amita Mahajan
Suddridh at a Glance | FY 2024-25:

2 State Partnerships | 392 Trainees | 309 Nurses Trained | 130 Tumor Boards

Outcome Goal: Stronger institutions + trained professionals = better survival and quality care.

PAGES OF COURAGE



FROM SURVIVORS WHO BECAME ADVOCATES TO PARENTS WHO TURNED INTO NAVIGATORS, THESE PAGES CELEBRATE THE STORIES OF GIVING BACK AND COMPLETING THE CIRCLE OF LIFE



NIRBHAY SINGH
Head of Department
Patient Navigation, Advocacy & Family Engagement (Parent and Survivor Groups)

“Imagine being told your child has cancer — your world collapses in a heartbeat. In that storm of fear and uncertainty, our Patient Navigators become the first voice of reassurance. They guide families through every stage — diagnosis, treatment, and recovery — turning fear into courage, chaos into clarity. With compassion and care, we ensure no family walks this journey alone.”



PATIENT NAVIGATION & ADVOCACY FAMILY ENGAGEMENT (PNAFE)

PATIENT ADVOCATES & NAVIGATORS

WHY PNAFE MATTERS?

- Places the voice of the patient and family at the centre of care.
- Improves quality, continuity and trust in healthcare delivery.
- Builds sustainability through lived-experience human capital.
- Transforms care recipients into co-creators of change.

EMPOWERMENT: UNDERSTANDING AND OWNING CARE

- 7,000+ members across survivor and parent peer groups — KidsCan Konnect (KCK) for childhood cancer survivors and Path Pradarshak Parivarik Sahayak Group (P3SG) for parents.
- Quarterly Survivor & Parent Forums active across Childhood Cancer Hospital Units (CHSUs) and States.
- Patient & Family Education Modules developed on disease, treatment, side effects, rights and coping skills.
- "iDeserve" campaign builds rights awareness among children and families.

ENGAGEMENT: VOICE IN ACTION

- 100+ trained Patient Navigators active across CHSUs guiding families through treatment and care systems.
- Aawaaz — a community and district-level collective of survivors and parents mobilized under Sajhakaran, amplifying patient and family voices at the grassroots.
- Established Patient Advocacy Groups (PAGs) and PACER (Patient Advocates for Clinical Research) for patient-led research.
- Regular representation at WHO, SIOP, CCI, and UICC global forums.
- Survivor and parent leaders now represent and speak at local, national and international levels.

EMPLOYMENT • LIVELIHOOD • REINTEGRATION

- 4 District Parent Patient Navigator (DPPN) Navigators trained and stipended.
- 62 survivors employed within CanKids and partner hospitals.
- 24 P2L(Passport2life) Clinics supporting education and employment continuity.
- 3,000+ Survivor Passports issued for reintegration tracking.
- Scholarships and Bahali Program supporting higher education and livelihoods.

PATIENT ADVOCACY & FELLOWSHIPS

- Survivors and parents serve as Ambassadors and Advocates, leading Go Gold, Be the Gold, and policy dialogues.
- Represent India at WHO, SIOP, CCI, UICC and other global platforms.
- 12-18 month Fellowship Program with structured training and stipends builds leadership in advocacy and research.
- Impact: Authentic lived-experience voices now shape policy, practice, and research.

FAMILY ENGAGEMENT & PEER GROUPS

- Quarterly "Right to be Heard" Forums empower families to share feedback and experiences.
- Active Peer Groups — KidsCan Konnect (KCK) and Path Pradarshak Parivarik Sahayak Group (P3SG) — strengthen mutual support networks.
- Families co-create evidence through Patient-Led Research and Patient Advocacy Groups.
- Representation in MEL, Quality and Board Committees ensures families are true partners in care and governance.

EMPLOYMENT & LIVELIHOODS

- Bahali Internships: 6-12 months, ₹8-10k/month for young survivors.
- Aawaaz Community Roles: Honorarium-based leadership roles in awareness and advocacy.
- Fellowships: Structured tracks in Advocacy, Research and Leadership.
- Employment within CanKids and hospitals enables survivors to move from beneficiaries to co-workers and leaders.

ACHIEVEMENTS

Sonal Sharma elected to CCI Asia Regional Committee.

Poonam Bagai appointed CCI-WHO SEARO Co-Focal Point.

Best Practices Showcased: Disability Certificate Service & Passport2Life
presented internationally.

Largest national parent-survivor peer support network for childhood cancer
established in India. Innovations:

Online Passport2Life enrolment on Resonance portal.

State-level P2L clinics launched in UP & WB.



STORY OF A SUPER HERO

At 16, Tithi Aich was diagnosed with Acute Promyelocytic Leukemia, a rare blood cancer. Chemotherapy, infections, hair loss, and missed exams tested her strength, but could not take away her spirit.

She came back stronger, cleared her studies, graduated, and found her true power: turning pain into purpose.

Now 28-years-old, Tithi is a social worker with CanKids and a voice in the APML Patient Advocacy Group. She is also a reciter and anchor, winner of the Visharad Award, a successful entrepreneur, and has even recorded her pre-wedding film in her own voice. Tithi is more than a survivor.

She is a warrior, an artist, a leader, and many more.

She is a superhero, a proof that no challenge is too great, no dream too far.



PAGES OF NOURISHMENT, PROTECTION, LIFE & SHELTER

IT TAKES MORE THAN MEDICINE TO HEAL
IT TAKES NOURISHMENT AND RESILIENCE.

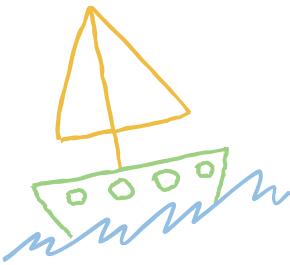
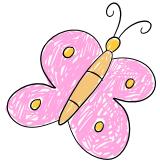


Ms Sarbani
Deputy General Manager,
Treatment Support Program

“ Every cancer journey is unique but in every journey a child is a seed of hope and our team provides the essential soil they need to grow with fundamental nutrition, hygiene and a safe child-friendly shelter. Through continuous capacity building, review and research we are dedicated to strengthening our fraternity and elevate the quality of care to ensure every child blooms! ”

TREATMENT SUPPORT PROGRAM

BEHIND EVERY CURE IS A STORY OF CARE.



NUTRITION MANAGEMENT SERVICES

Nutrition Management Services operate through the CanNourish model, staffed by dietitians and coordinators, offering baseline and follow-up assessments, counseling, customized diet plans, and supplements. The Poshtik Aahar Sahayata Karyakram (PASK) serves freshly prepared, safe meals at CanKids Care Centers, OPDs, and IPDs. Nutrition advocacy is powered through research, capacity building, and observing significant events like Poshan Maah and World Breastfeeding Week.

HYGIENE AND INFECTION CONTROL SERVICES

Hygiene and Infection Control Services empower families with WASH-C education, oral care, and safe food and water practices. Hygiene kits, water purifiers, sanitizers, and other facilities are provided under the CanSurvive Project. Awareness campaigns such as Global Handwashing Day further strengthen preventive practices.



BLOOD SUPPORT SERVICES

Blood Support Services ensure a steady supply of life-saving components through blood donation camps, Single Donor Platelet (SDP) donor mobilization, and advocacy on safe donations, supported by a strong donor database.

HOLISTIC ACCOMMODATION SERVICES

Holistic Accommodation Services extend beyond treatment—offering lodging, child-friendly spaces, transport, and financial aid for food, lodging, and travel, easing the burden on outstation families.

HIGHLIGHTS

Nutrition (PASK, Supplementation, Counselling, Ready-to-Use Therapeutic Food (RUTF) formed the largest share of assistance, with over 172,000+ records, supporting thousands of children and families.

Hygiene/WASH sessions reached 9,009 unique contacts, totaling 42,042 sessions – a strong community impact.

Holistic accommodation provided crucial housing support to 1,726 families.

Blood support and conveyance filled critical gaps in emergency and treatment access.

“
TOGETHER, THESE SERVICES
BUILD A COMPASSIONATE
ECOSYSTEM THAT UPLIFTS
CHILDREN AND FAMILIES AT
EVERY STEP.
”





SUB-TYPE OF ASSISTANCE

- 1,257 children were benefited through Canourish Kids.
- 1,788 children & families were benefited through Canourish Family.
- 3,648 children & families were benefited through Nutrition PASK.
- 2,429 children were benefited through Nutrition Supplementation.
- 7,753 children were benefited through Nutrition Counselling.
- 6 children were benefited through Nutrition RUTF.
- 5,174 children & families were benefited through HIC Kit.
- 9,009 children & families were benefited through Hygiene and WASH Sessions.
- 216 children received Blood Support.
- 180 children received SDP Kit.
- 172 children & families were provided Transportation support
- 1,726 children were benefited through Holistic Accommodation.
- 1,284 children were benefited through Poor Patient Support Assistance

PAGES OF SOLACE

HEALING IS ALSO ABOUT BEING HEARD, HUGGED AND HELD



OUR COUNSELLING, ART THERAPY, AND PARENT SUPPORT GROUPS HELPED FAMILIES COPE WITH FEAR AND UNCERTAINTY. THESE PAGES ECHO STORIES OF COURAGE BUILT NOT JUST IN BODIES, BUT IN HEARTS.



DR AALAPTI SINGH
General Manager, Pediatric
Psycho-Oncology Program

“ Childhood cancer is not just a medical diagnosis. It is an emotional, social, and developmental storm. Fear grips children, parents feel helpless, and siblings fade into the background. In these tender moments, psycho-oncology becomes essential. As psychologists, we bring change, by sitting with a mother, by handing crayons to a silent child, by turning hospital walls and wards into spaces of colour and play. This emotional support is not charity, but science wrapped in humanity. These are the pages of change we write each day, where healing is a journey, and no child walks it alone.

PEDIATRIC PSYCHO-ONCOLOGY PROGRAM



Our counselling, art therapy, and parent support groups helped families cope with fear and uncertainty. These pages echo stories of courage built not just in bodies, but in hearts.

- 7,765 patients & caregivers counselled through 17,992 sessions across India.
- 5,267 psychological tests conducted with patients & caregivers (psychometric, interviews, behavioral assessments).
- 4,552 Expressive Therapy sessions conducted with 5,562 patients, helping children develop positive coping techniques to deal with anxiety, fear and trauma. These sessions reduced anxiety levels, gave children a sense of control, lessened pain during procedures, and enhanced coping skills.
- 1,341 Sharing & Caring groups conducted with 3,755 caregiver participants, providing safe spaces to share experiences, reduce stress, and instill hope.
- 2,995 Psycho-education sessions held with 5,023 caregivers, empowering them with accurate knowledge about childhood cancer, improving adherence to treatment protocols, and countering myths/stigmas.
- 1,330 wishes fulfilled under the Kekadu Make-a-Wish program.
- 523 CanNurture e-Clinics conducted – with 317 new survivors/parents registered and 289 unique survivor beneficiaries supported through counseling. This included 165 follow-up cases of survivors/caregivers and 14 unique beneficiaries with 14 follow-up cases for PSGs & CanKids staff, addressing post-traumatic stress and psychosocial needs.

CHILD LIFE SERVICES AT CANKIDS KIDSCAN

WHERE HEALING MEETS CHILDHOOD

- "In the past year, 7,451 children experienced our services in ways that left lasting emotional and developmental impact. Beyond numbers, they are children who played in child-friendly wards, borrowed from our Toy and Book Bank, joined Child Life sessions, expressed themselves through art, music and storytelling, received comfort through our 'Kekadu Make-a-Wish' gifts, and bonded with Taklu-Takli Hospital Dolls that help normalize medical experiences."
- These services aren't just creative add-ons but evidence-based practices that reduce treatment distress, improve pain tolerance and adherence, and support emotional regulation and development. Tools like our Taklu-Takli dolls and expressive play help children process reality, regain control, and feel like more than just patients. Psychologists also use them during procedures to ease anxiety and pain in ways medicine alone cannot."



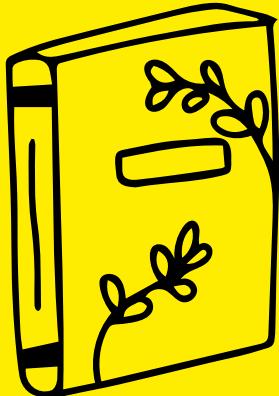
ACHIEVEMENTS

- **Child Life Program expansion:** Child-friendly wards created at 4 CHSUs (AIIMS Patna, IGIMS Patna, GCRI Ahmedabad, SSKM Kolkata), transforming hospital environments into therapeutic, engaging spaces.
- **Therapeutic Toy Libraries:** 2,245 children benefited from play-based interventions (expressive, fantasy, medical play, distraction toys).
- **National Recognition:** CanKids received the Clinical Excellence Award in Psycho-Oncology and co-organized the 1st National Conference on Psychotherapeutic Assessments & Interventions in Psycho-Oncology (NCPO 2025) with AIIMS Delhi, attended by 415 delegates.
- **Global Forums:** Representation at APPON-7 and multiple psycho-oncology research panels spotlighting Indian child-centered psycho-oncology.
- **Partnerships:** Collaborations with ELGI Group, Music Therapy Trust, Make-a-Wish Foundation to build scalable psychosocial models.



PAGES OF LEARNING

EVEN IN HOSPITALS, CHILDHOOD DREAMS MUST NOT PAUSE.



From hospital classrooms to digital learning, we kept education alive for children battling cancer. These pages showcase stories of little learners who held pencils and books alongside IV lines.



RAHUL SHARMA
General Manager, Education

“ Learning brings hope and normalcy for children with cancer, even when life feels uncertain. Hospital classrooms and schooling support help ensure treatment does not stop their dreams or growth, keeping each child connected and strong within our Circle of Care.

Every lesson, exam, or wish for the future is a step forward—a page of change that shapes each child's story and inspires everyone around them.

EDUCATION PROGRAM

EDUCATION REACH

- 50 teachers along with social support team helped 12184 children who continued learning in 102 units across India through Formal and Non-formal Education

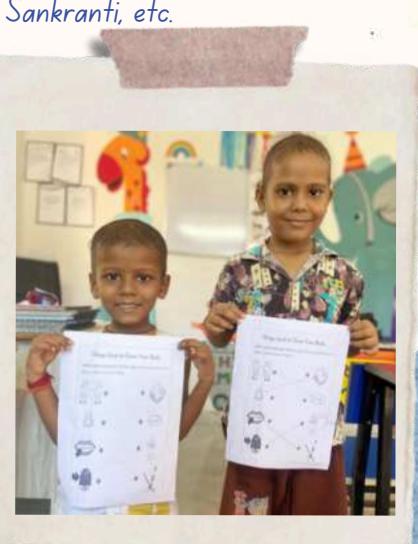


FORMAL EDUCATION

- 6,120 children supported through bedside and structured education during treatment.
- Teachers followed up with 1,407 children in Maharashtra and 836 in Tamil Nadu for academic continuity.
- 1789 Personalized Education Plans (PEPs) developed, improving measurable academic performance.

NON-FORMAL & THERAPEUTIC EDUCATION

- 9,771 children engaged in non-formal learning (art, music, storytelling, activity-based sessions).
- 4,571 children benefitted from therapeutic education approaches (art therapy, music, psychoeducation integrated with academics).
- 643 children participated in the Five Elements Diwali activity; 961 children created DIY kits on Ravan & Mahatma Gandhi.
- 15,213 WASH-C sessions conducted, reaching 4,314 children; 468 children marked Global Handwashing Day.
- Children participated in festivals & celebrations across centers – Diwali, Eid, Independence Day, Children's Day, Rakshabandhan, Republic Day, Janmashtami, Makar Sankranti, etc.



CANSHALA FOR LIFE

SCHOLARSHIPS & AWARDS

- 1,150 children supported with scholarships for reintegration into schools, higher education, and vocational training.
- Career counselling & mentoring programs run across 10+ cities.
- Case Impact - Rudra (RB child): admitted to NAB Delhi; annual fees reduced from Rs.1 lakh → Rs.12,000 with Education Team intervention.

3 CANSHALAS FUNCTIONAL - 2 IN MAHARASHTRA & 1 IN TAMILNADU

- In Maharashtra, the CanShala program registered 419 new children, with 588 supported through formal education, 425 through non-formal education, 418 receiving therapeutic education, and 783 online sessions held to keep children learning. Additionally, 182 children received general and higher scholarships.
- In Tamil Nadu, CanShala program registered 190 new children, 173 children were supported through the Education Program, ensuring continuity of learning during treatment.
- 1,676 children engaged through online CanShala.
- 12 Parent-Teacher Meetings held across CanShalas; Praveshotsav celebrated at CanShala-Mumbai for the new academic year.
- Classes blended with therapeutic art, music & psychoeducation.
- Teacher Development: 2-day CanShala training in Mumbai and Chennai



EDUCATION IN HOME-AWAY-FROM-HOMES

- Formal Education provided to 981 children.
- 1046 children engaged through Non-formal Education.
- Therapeutic education provided to 890 children.
- Refresher trainings in Delhi, Bhopal, Lucknow, Mumbai; monthly PAN India teachers meeting with 35+ educators.
- Gratitude Mela celebration held at 13 HAHs, 257 children, 372 parents, 111 Cankids staff participated

ACHIEVEMENTS

- International Recognition: Education abstract short listed for presentation in Riyadh
- 12,184 children received education support in 2024-25
- 58 educators trained PAN India in therapeutic & personalized education methods.



STORY OF A SUPER HERO

Meet Tamilvanan. He is just 13 years old, a student of CanShala, CanKids KidsCan, Chennai, and like many children his age, he loves to tell stories. But there is something extraordinary about him: Tamilvanan is not only battling Rhabdomyosarcoma, a rare childhood cancer, he is also an accomplished young writer.

In between hospital visits and treatment sessions, Tamilvanan has already done what many adults only dream of: he has published four books, and he is already working on his fifth. His stories, woven with courage, imagination, and adventure, are not just tales on paper. They are his way of reminding the world and himself - that hope is stronger than fear.

When you read Tamilvanan's books, you see a boy who refuses to be limited by cancer. You see a dreamer who writes worlds full of bravery, where heroes rise, and possibilities are endless. And you see a message that speaks to every child facing illness: your dreams don't have to stop. Tamilvanan's journey is a living example of what CanKids stands for - giving every child not just care, but also the chance to dream, to create, and to thrive. His books are available on Bribook.com, where his words continue to inspire readers far beyond Chennai, far beyond hospital walls.



Tamilvanan, 13-year-old



PAGES OF COMPASSION

SUBHITA - PEDIATRIC PALLIATIVE CARE CENTRE (PPCC)

INDIA'S FIRST AND ONLY STAND-ALONE PEDIATRIC PALLIATIVE CARE CENTRE FOR CHILDREN WITH CANCER



SUBHITA IS A HINDI WORD MEANING PALLIATION, ALLEVIATION, BALM, CHEER, COMFORT, EASEMENT, RESPITE, REST, SUCCOUR, SUPPORT AND SOLACE
SUBHITA MEANS COMFORT. SUBHITA MEANS COMPASSIONATE CARE.



Maj (Dr) Rashmi Sharma,
Head - Pediatric Palliative
Care Program

“ To heal beyond Cure, to Care beyond fear,
This is my calling, forever sincere.
As Head of Subhita, my purpose is bright -
To build a world, where every child lives with
Hope, Dignity, and Light... ”

STORIES THAT SHOW WHAT TRUE COMPASSIONATE CARE MEANS



Shaurya, a quiet 10-year-old boy at our Subhita PPCC in a wheelchair, came to celebrate Rakshabandhan with the brightest smile. When Zoya, another child, tied a rakhi on his wrist, he slowly pulled out a small, crumpled note, the only money he had, gifted by a stranger and placed it in her hand.

Shaurya showed us that you don't need much to give with your whole heart. This moment was simply an expression of pure love and gratitude.



Kunal, 10 years old, is bravely fighting Osteosarcoma. In hospital wards he often felt scared. But at Subhita PPCC, he felt comforted; cared for.

"I feel very good here. I have toys to play with, a teacher who comes to teach me, and a ma'am who talks only about me and how I feel. I know I am fighting cancer, but I feel like I will be fine. Here, I feel happy."

When 10-year-olds can speak such profound words and show acts of gratitude and kindness while facing such a relentless battle, it teaches us the true meaning of compassionate care.

This is exactly what Subhita embodies: a model where dignity, hope, and comfort are as essential as medicine.

This is what palliative care truly is -
A SANCTUARY OF COMPASSION AND SOLACE AMID ILLNESS.



WHY PALLIATIVE CARE MATTERS?

At Subhita, care extends beyond the hospital bed: easing pain, supporting families and helping children live fully in every stage of their journey. It is both a medical and ethical necessity and a vital part of universal health coverage (SDG 3.8)

OUR MODEL OF CARE

- 26 trained professionals and caregivers: Doctors, Nurses, Social Workers, Psychologists, Dieticians, Patient Navigators and Teachers.
- Fully aligned with the WHO Essential Pediatric Palliative Care Package.
- A child and family-centered model setting a benchmark for India.
- While Subhita sets the benchmark, our commitment goes further: to take palliative care across India, building systems that bring compassion, dignity and relief to children and families nationwide.

CARE IN ACTION

THE POWER OF BEDSIDE SUPPORT

Bedside support at the PPCC is a testament to unwavering care. With a dedicated 8-bed inpatient ward, the center provides a haven of compassionate 24/7 nursing care for children who need it the most. This round-the-clock support offers expert pain and symptom management, including the administration of morphine, while also providing essential services like wound care and financial support. We are empowering families by providing nutritional services, caregiver training, and crucial psychological and bereavement support, ensuring that each family feels supported both medically and emotionally. It's more than just medical treatment; it's a commitment.

- More than 800 children found comfort and relief through our care.
- Families experienced over 35,000 moments of support, from pain relief to counselling, from art classes to quiet conversations of hope.
- Nearly 800 families received financial and social support over 19,000 times when they needed it the most.
- 188 children were admitted for specialized inpatient care, where comfort, rest and dignity were the focus.
- To ease suffering, we gave morphine to 59 children, helping them smile, sleep or simply breathe without pain.
- And during the hardest moments, we stood beside 147 grieving families, offering not just financial aid, but compassion and presence.



THE LIFE-CHANGING POWER OF AMBULATORY CARE

The greatness of Subhita Pediatric Palliative Care Center's (PPCC) ambulatory care lies in its power to keep children out of the hospital and in the comfort of their own homes. This approach is a crucial solution to India's healthcare challenges, especially the lack of beds and long travel distances for families. By allowing children to receive vital treatments like IV antibiotics on an outpatient basis, it transforms a multi-day hospital stay into a simple, life-affirming visit. Ultimately, this service provides a profound sense of normalcy and dignity, allowing children to be with their families and avoid the isolating experience of inpatient care.



- In our Ambulatory OPD, 600 children received essential medicines and treatments.

HOLISTIC CARE

The PPCC understands that a child's journey with cancer affects the entire family. From providing psychological and bereavement support to nurturing a child's spirit with celebrations and "Wish Gifts," the Center goes beyond medicines. It is a source of hope that ensures no family feels alone, offering emotional, social and spiritual support that is vital as the medical care itself.



THE POWER OF FAMILY EMPOWERMENT

The PPCC's focus on *caregiving training* is a truly impactful service. By teaching parents and caregivers how to manage their child's care at home, the center empowers families to become an active and confident part of the care team. This knowledge gives them the skills and confidence they need to provide comfort and dignity, ensuring their child can spend more time at home, the place they feel safest and most loved.

- Through Virtual OPD, 72 children stayed connected to care, even when they couldn't travel, and 149 families received ambulance services to bring them safely to us.
- 1,300 caregivers found strength in our education sessions, learning how to care with courage and compassion.



These are beyond Numbers!

Every figure carries a face, a story and a family.

Children like Shaurya, who give even when they have little.

Children like Kunal who find safety and comfort in our care.

Families who find strength knowing they are not alone.





PAGES OF ADVOCACY

THE CEPAA (COMMUNICATION, EDUCATION, PUBLIC AWARENESS & ADVOCACY) DEPARTMENT, WE BELIEVE THAT EVERY CHILD'S STORY RIPPLES OUTWARD — CREATING CHANGE FOR OTHERS.



Through advocacy, awareness campaigns, trainings, capacity building and partnerships, we turned stories of survival into movements for systemic change. These pages remind us that together, we can rewrite the story of childhood cancer in India.



RUMI MITRA
Director, Communications Education Public Awareness & Advocacy (CEPAA)

“ As a cancer survivor, I know that every story carries the power to heal and inspire. Every child with cancer writes a page of courage, resilience, and hope. Pages of Change brings these stories together—turning voices into advocacy and experiences into action. As a communicator, I believe storytelling shapes futures. Each page shared builds a movement, ensuring children are seen not as statistics, but as heroes of tomorrow. ”

COMMUNICATION EDUCATION PUBLIC AWARENESS & ADVOCACY

Event	Month	Date
RB Awareness Week	May	14-20
Survivor Week	June	2
World Blood Donor Day	June	14
Childhood Cancer Awareness Month	September	1 to 30
National Nutrition Month	September	1 to 30
World Palliative Care Day	October	14
Global Handwashing Day	October	15
World Cancer Day	February	4
International Childhood Cancer Day	February	15

HIGHLIGHT

CHILDHOOD CANCER AWARENESS MONTH (CCAM) 2024

On September 1, 2024, CanKids KidsCan launched the "Say No to Financial Hardship" campaign for Childhood Cancer Awareness Month, with Dr. V.K. Paul, Member of NITI Aayog and leading pediatrician, emphasizing universal health coverage and financial protection for children with cancer. Aiming for 100% treatment access by 2030, the initiative leveraged hospitals, NGOs, and government schemes like Ayushman Bharat, addressing urban-rural disparities, early detection, and advanced treatments. The 2024 CCAM campaign, themed "Close the Care Gap and Serve the Underserved," engaged 21,000+ participants nationwide through survivor-led events, trainings, awareness drives, and creative outreach (walkathons, street plays, webinars, school sessions, mini-marathons), promoting early diagnosis, quality care, and holistic support across India's regions.



WORLD CANCER DAY (WCD) & INTERNATIONAL CHILDHOOD CANCER DAY (ICCD) 2025

Led by the Union for International Cancer Control (UICC), the 2025 theme for WCD-ICCD, "United by Unique – Your Story Will Be Heard," highlighted that every cancer journey is different and deserves recognition. CanKids reached 40,000+ people nationwide with survivor-led awareness and advocacy for early childhood cancer detection and holistic care.

- North: Delhi street plays, survivor forums, and ASHA trainings empowered families and frontline workers.
- East: Survivor Meets and psycho-oncology sessions in Kolkata and Odisha engaged schools, hospitals, and government bodies.
- West: Massive rallies and Cycle for Gold campaign in Maharashtra spread messages of resilience to 25,000+ citizens.
- South: Street plays, cycle rallies, and school programs in Tamil Nadu and Kerala mobilized 1,400 ASHA workers and 1,600 students.



PGI, Cankids join hands to check cancer in kids

Lucknow: To mark International Childhood Cancer Awareness Day and highlight that 70-80% of childhood cancers are curable, SGPGI's paediatric surgery department collaborated with social organisation CanKids to organise several awareness programmes.

Head of the department, Dr Basanta Kumar, said that delayed diagnosis significantly reduces survival chances. SGPGI director, Prof RK Dhiram, reaffirmed the institute's commitment to working with medical organisations to provide affected children with medication, diagnostic services, counselling, food, education and psychological support.

State coordinator of CanKids, Dr Yogita Bharti, outlined the support her organisation offers to children with cancer and their parents. The programme concluded with a rally to raise awareness about childhood cancer. TNN

ROOTING FOR EARLY DIAGNOSIS: Doctors rally to raise awareness about childhood cancer



TATA MUMBAI MARATHON 2025

At the 15th Tata Mumbai Marathon 2025, CanKids showcased the courage of childhood cancer survivors, with 67 runners, including 10 young survivors, joining supporters and caregivers to raise awareness and funds for childhood cancer care. Survivors embodied hope and resilience, while long-time partner United Way Mumbai helped channel the event's energy into early diagnosis, quality treatment, and nationwide support. The run highlighted the power of community and the unstoppable spirit of these young warriors.



CYCLE FOR GOLD (CFG) IV - 2025

Cycle for Gold (CFG), India's largest cycling challenge benefitting childhood cancer, ran from Feb 4 (World Cancer Day) to Mar 16, 2025, transforming cycling into a nationwide platform for awareness, advocacy, and solidarity. In 2025, 1,300+ participants from 125 cities and 5 countries pedalled 7.32 lakh km, raising Rs. 2+ crore for treatment, nutrition, education, and psychosocial care for 920 children, contributing to a total of Rs. 6.8 crore raised and 2,720 children supported since inception. Survivor-led rides, school and corporate activations, and on-ground events, starting from World Cancer Day, Women's Day, International Childhood Cancer Day (ICCD) helped amplify nationwide awareness, generating over 30 lakh social media impressions.



PAGES OF EXCELLENCE

BEHIND EVERY CHANGE ARE THE
PEOPLE, SKILLS, AND
DISCOVERIES THAT BUILD IT.



DR. HARISH GUPTA

Chief Program Officer, Medical Division &
Palliative care Program and Pediatric Cancer
Research Institute.

“ Holistic Care remains the cornerstone of CanKids' mission. Anchored in medical excellence, and in alignment with our long-term vision, we are committed to achieving 60% survival, 100% access, and 100% financial protection by 2030. To deliver on this commitment, we continue to invest in strengthening health systems, expanding hospital networks, building capacity among healthcare professionals, and driving innovation through research and partnerships. Our service is designed not only to save lives today but also to build a sustainable future where no child's outcome is determined by poverty or geography. This is both our responsibility and our promise. ”

PEDIATRIC CANCER RESEARCH INSTITUTE (PCRI)

76 studies/projects since 2013.

14 ongoing; 11 new; 28 closed.

52 studies presented. 27 published.

78% in-house. 22% out-house. 56 fully-funded.

APAR HEALTH- THE RESEARCH PARTNER OF CANKIDS

"At CanKids, we partner with APAR Health LLP, a Gurugram-based organization working at the intersection of research, education, and advocacy. Together, we share a vision to place patients and families at the center of healthcare and research, combining APAR Health's expertise with our deep patient advocacy and support network to bridge the gap between research, policy, and lived experience."

Key Areas of Collaboration

1. Patient-Centric Clinical Research
2. Capacity Building & Training
3. Advocacy & Policy Engagement
4. Innovation & Outreach
5. Statistical Support
6. Medical Writing
7. Strategy (Co-developing long-term roadmaps)

Ethics Committee Functioning & Board Meetings

PROJECTS SUPPORTED / INITIATED

1. Department of Scientific and Industrial Research (DSIR) Certification for PCRI
2. PACER Project – Training CanKids caregivers and survivors to become expert patient advocates who can actively contribute to clinical research.
3. Clinical Trials Registry- India (CTRI) Usability Study – Making India's Clinical Trial Registry more accessible and family-friendly, so patients can truly understand their options.
4. Pharmacovigilance Programme of India (PvPI) Study – Supporting families to identify and report side effects, strengthening India's pharmacovigilance system.
5. Girl Child Survivor Study – Shining a light on the unique challenges faced by young female cancer survivors
6. Nutrition & HAH (Home Away from Home) Study
7. Out-of-Pocket Expenditure (OOPE) Study – Measuring the real financial impact of childhood cancer care on families, to drive fairer health policies.

CAPACITY & SKILL BUILDING TRAININGS & CONFERENCES

- In 2024–25, CanKids prioritized capacity building through major initiatives, including three national workshops (PAN India Nurses Workshop, 8th PHOSSCON in Jammu, and PACER workshops with Pfizer and APAR Health) and the India Childhood Cancer Initiative with St. Jude's Global.
- Across Change for Childhood Cancer State projects, 9,162 healthcare workers were sensitized, and 2,922 participants attended 9 National Training Program workshops on Practical Pediatric Oncology.
- Stakeholder engagement was strengthened with 110 NGO participants, while 130 Virtual Tumor Boards facilitated discussions on 133 pediatric cancer cases, enhancing collaborative care and knowledge sharing nationwide.

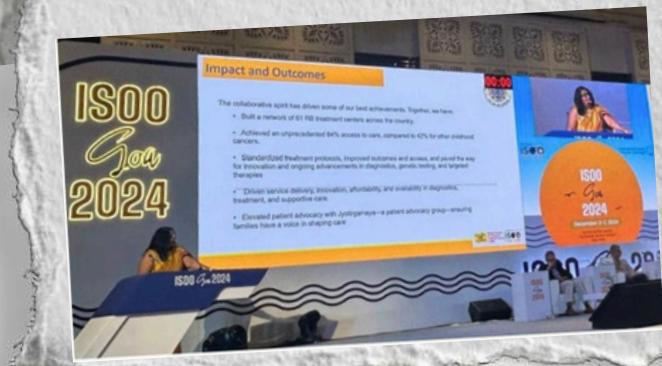
PEDIATRIC HEMATOLOGY ONCOLOGY SUPPORT SERVICES CONFERENCE (PHOSSCON) 2024:

PHOSSCON 2024, held on November 22–23 in Jammu alongside PHOCON, brought together 500+ healthcare professionals, NGO representatives, and stakeholders to usher in the latest facilities in holistic care for children with cancer and blood disorders. Sessions addressed medical treatment, psychosocial support, survivorship, financial protection, and bone marrow transplant access. Ms Poonam Bagai received the Lifetime Achievement Award for her contributions. The conference emphasized multisector collaboration to ensure no child faces barriers to care while promoting early detection, survivorship, and equitable access nationwide.



INTERNATIONAL SOCIETY OF OCULAR ONCOLOGY (ISOO) CONFERENCE IN GOA 2025

The **Fight RB India** initiative by CanKids KidsCan celebrates a decade of transforming childhood retinoblastoma care, achieving 83% access through 61 treatment centers. Highlighted at the pre-conference workshop on December 3, 2024, part of the five-day International Society of Ocular Oncology (ISOO) Conference in Goa, it showcased early detection, advanced therapies, family support, and the **Fight RB India Resource Directory**, while outlining the roadmap to meet the WHO's CureALL 2030 goals for universal access and improved survival. Key contributors were honored for advancing survival, policy advocacy, and holistic care, uniting hospitals, NGOs, specialists, and communities to ensure every child receives life-saving treatment and hope.



NATIONAL CONFERENCE ON PSYCHOTHERAPEUTIC ASSESSMENTS AND INTERVENTIONS IN PSYCHO-ONCOLOGY (NCPO-2025)



On January 8, 2025, CanKids KidsCan partnered with AIIMS Delhi at the National Conference on Psychotherapeutic Assessments and Interventions in Psycho-Oncology (NCPO-2025) to advocate for patient-centered cancer care that integrates mental health and psychosocial support. The conference, featuring survivors, caregivers, and experts, highlighted the emotional challenges of cancer, emphasized peer support, and showcased technology-driven solutions. Key outcomes included the "Raising the Patient Voice" workshop, a co-created Advocacy Statement calling for mental health integration into oncology teams, and a keynote by CanKids Chairperson Poonam Bagai sharing her personal cancer journey. CanKids was also honored with the Clinical Excellence Award in psycho-oncology for its pan-India model supporting patients, caregivers, and survivors.

PAGES OF MEMORY LANE

A LOOK BACK, A STEP FORWARD





NOT FOR ME BUT WITH ME, THE
HEART OF PATIENT-CENTRED CARE



PATIENT-CENTRED CARE IS THE HEART OF HEALTHCARE — A
PARTNERSHIP BUILT NOT FOR ME, BUT WITH ME, WHERE PEOPLE WITH
LIVED EXPERIENCE (PWLE) ARE EMPOWERED TO NAVIGATE, ADVOCATE
AND ENGAGE AS LEADERS IN SHAPING THEIR OWN HEALTH AND THE
SYSTEMS THAT SERVE THEM.

PAGES OF PEOPLE

THE HEARTBEAT OF CANKIDS LIES NOT IN NUMBERS OR STRUCTURES, BUT IN PEOPLE — A VAST FAMILY BOUND BY ONE SHARED PURPOSE: TO ENSURE NO CHILD WITH CANCER AND NO PARENT WALKS ALONE.

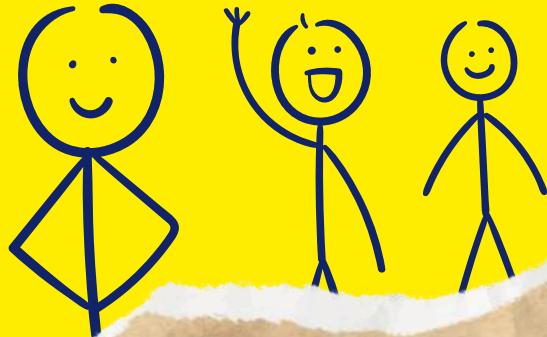
At CanKids, we believe people are not hired — they are chosen to become part of a movement. Every candidate we interview is seen first through the prism of our guiding philosophy. Skills and experience matter, but above all, we look for compassion, resilience, and the courage to walk alongside families in their hardest journeys. Parents who turned grief into grit, survivors who turned scars into strength, professionals who turned expertise into service — together, they form the lifeline of CanKids.

This is why Human Resource at CanKids is more than management — it is stewardship of a family bound by love and driven by one purpose.

As we write new Pages of Change, I stand in gratitude and pride for every member of this extraordinary family. Because it is people — their will, their passion, their humanity — who transform vision into reality



Ms. Poonam Tharad
Chief Human Resource Officer



LEADERS WHO GUIDE, FAMILIES WHO SERVE

Our strength flows from both ends of the spectrum. On one side, CanKids is guided by ex-bureaucrats, industry stalwarts, and management experts who shape policy, vision, and strategy. On the other, a force of survivors and parents — 4219 members of Path Pradarshak Parivar Sahayak Group (P3SG) and 2727 members of KidsCan Konnect (KCK) — bring lived experience and unshakable empathy to the mission.

AN ARMY OF CAREGIVERS WHERE EVERY ROLE IS A LIFELINE.

412 staff, Social Support Health Professionals, Dedicated Nurses, Social Workers, Teachers, Nutritionists, Psychologists, Patient Navigators/Care Givers) and 83 pro-bono advisors. They hold hands through the toughest battles.

WHERE SURVIVORS BECOME LEADERS

Perhaps uniquely, CanKids has seen children once treated under its care return as leaders, mentors, and even Board Members. Survivors do not just rebuild their lives — they build hope for others.

EQUITY, BALANCE, AND CARE WITHIN

From adhering to Equal Opportunity Policy under Rights of Persons with Disabilities Act, Prevention of Sexual Harassment (POSH) at Workplace policy, under the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013 2016, to being a Gender Balanced Organisation, we ensure CanKids is a safe, inclusive, and empowering workplace. With more than 60% women in the workforce, and equal opportunity for people with disabilities, we mirror the values we advocate for.

ONE THREAD, ONE GOAL

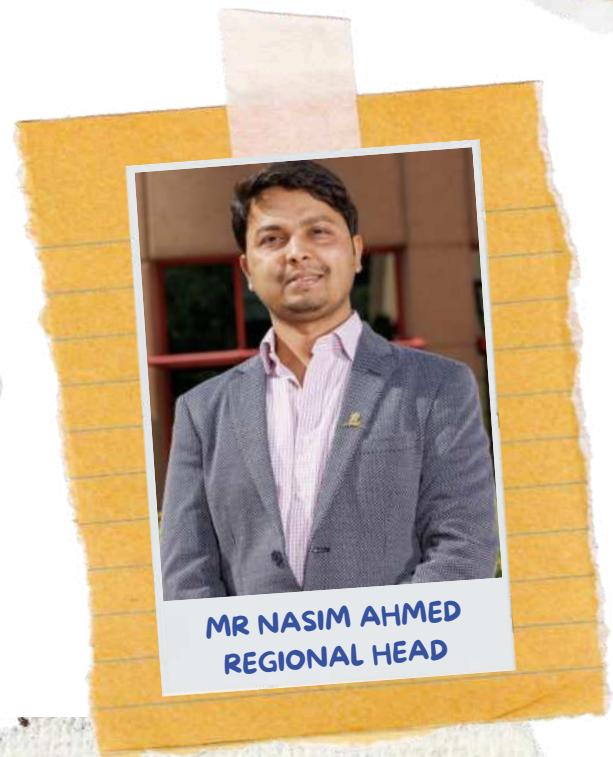
Across India — in hospitals, care centres, homes, and villages — our people are everywhere, a child with cancer needs them. They are teachers, social workers, navigators, dietitians, coordinators, nurses, and above all, companions.

What ties them together is a single thread: love. What drives them is a single mission: to write Pages of Change for childhood cancer in India.

PAGES OF CONNECT



"FROM EVERY CORNER OF THE COUNTRY, OUR REGIONAL TEAMS CREATE STORIES OF IMPACT, CONNECTION AND CARE, BRINGING CHILDREN AND FAMILIES CLOSER TO HOPE AND HEALING."



The partnerships we've built and the programs we've delivered reflect what CanKids stands for - collaboration that creates systems of care. Behind every MoU and every training is a child and family who can now access care with dignity and hope. Our work in the Northern regions of India (which includes 5 States Projects & 2 UTs (Delhi, Bihar, Rajasthan, Punjab, Himachal Pradesh, Haryana, Jammu & Kashmir, Ladakh, Chandigarh, Uttar Pradesh & Uttarakhand) is part of a larger effort to make quality care possible everywhere - by connecting hospitals, empowering health workers and walking beside families in their toughest journeys. Our mission is simple yet profound ...to drive access to care for every child with cancer across India's vast geographies.



NORTH

- Driving and ensuring access to care in the biggest geographies which accounts 44% of India's total childhood cancer incidences.
- Delivered signature program YANA, direct support to over 11,487 patients and families across 46 Hospitals partnerships, 7 Care Centers in 10 States/UTs.
- AIIMS Delhi MoU signed under stewardship of Director AIIMS – a landmark achievement.
- Renewed Punjab State MoU – a significant partnership.
- Inked Tripartite (CK, KGMU, ABCF) MoU in presence of UP Governor, Smt. Anandiben Patel at Raj Bhawan to setup BMT in KGMU, Lucknow.
- 3 State Level Webinars with UP National Health Mission - Orientation & Sensitization of Chief Medical Officers, Paediatricians, Ophthalmologists on Childhood Cancer across 75 districts of UP.
- Sensitized 4,135 healthcare workers through 74 Trainings – 64 cases referred by the field team to our State Care Coordination Center.
- Bagged Best Region award of FY 2024-25 during our annual day celebrations.



MR NABARUN PANDA
REGIONAL HEAD

EAST

A stylized map of India in yellow and orange tones. A red horizontal banner with the word 'EAST' in white is positioned across the eastern coast of the country.

- Supported 2715 patients between April 2024 to March 2025 against holistic care & support.
- 1485 new children registered under You Are Not Alone (YANA) initiative of CanKids during the reporting period of April 2024 to March 2025
- 1189 patients supported for direct medical support under the CCC WB Project
- First childhood cancer survivor meet in collaboration with NRS Medical College, where 200 survivors participated from West Bengal
- First Stakeholder meet with Government in Odisha conducted on 4th March 2025 at Health Department, on Change for childhood Cancer care for the state.
- Provided services to 192 patients through our 3 Survivor Passport clinic (P2L) running at TATA Medical Center, Nil Ratan Sircar Hospital Medical College and Hospital.
- Signed MoU with Institute of Post Graduate Medical Education and Research, West Bengal.
- Signed MoU with Regional Cancer Center Chittaranjan National Cancer Institute, West Bengal.
- Home Away from Home support
- A total of 150 children, 270 caregivers, and 4 siblings (New and Readmission family members of the children) were provided with accommodation and other holistic services at the HAH this year.
- Capacity Building of ASHA & ANMs
- The ASHA Sensitization workshop was organized in 2 districts and 8 blocks of West Bengal where 1076 ASHA were trained on basic signs and symptoms of childhood cancer and referral services. Also, the West Bengal helpline number was disseminated among them.

WEST



Beneficiaries Support 2024-25

- New Registrations (Beneficiaries): 3,522
- Old Cases Supported (Holistic): 6,239
- Medical Support Provided: 3,105 families facilitated

Treatment & Care

- PPSA Treatment Support Beneficiaries: 478
- Nutrition & Hygiene Counselling: 2,730
- Psychological Counselling (Patients): 2,240
- Palliative Care Support: 123

Family & Education Support

- Parent Support Group Forums: 88
- Education Support (Formal: 2,430 | Non-Formal: 3,250)
- Scholarships for Continuity of Education: 333

- State Helplines: 3 operational helplines received 253 calls (MP: 103, Maharashtra: 133, Gujarat: 17)
- State Resource Directories: Draft directories created for awareness in 3 States.
- Referral Pathways: Available in 3 states.

Training and Sensitization

- Medical Professional Training (NTPPO): 337 doctors trained in 5 sessions.
 - MP: 108 (Jabalpur), 50 (Indore), 62 (Rewa)
 - Maharashtra: 63 (Gondia), 54 (Pune)
- Doctor Sensitization Workshops: 865 doctors sensitized in 4 RB Awareness workshops.
 - Gujarat: 257 participants from 33 districts (Stakeholder Meeting, RBSK NHM Gujarat)
 - MP: 70 ophthalmologists (RB Awareness@ Sadguru Netra Chikitsalaya Chitrakoot)
 - Maharashtra: 478 participants from 35 districts (Virtual RB Webinar with
- ASHA Worker Training: 3,374 ASHAs sensitized in 99 sessions.
 - Maharashtra: 2,047 ASHAs sensitized in 54 sessions
 - Gujarat: 1,231 healthcare workers sensitized in 41 sessions
 - MP: 96 ASHAs sensitized in 4 sessions
- Nurse Training: 230 nurses trained in 4 sessions.
 - Gujarat: 50 nurses trained at Kailash Cancer Hospital
 - Maharashtra: 90 nurses trained at Shree Siddhivinayak Ganapati Cancer Hospital
 - Madhya Pradesh: 40 nurses trained at NSCB, 50 nurses trained at CHRC Gwalior

Child Life Services

- Birthday Celebrations: 264
- Festivals & Special Events: 198

Awareness & Capacity Building

- Awareness at State Level: 2 per state
- Capacity Building - SST Teams: 3 (1 per state)
- Capacity Building - Doctors/NTTPPO: 7
- Capacity Building - Nurses: 5
- Capacity Building - ASHA & Frontline Workers: 90



DR SACHIN Taware -
REGIONAL HEAD





In FY 2024-25, we were privileged to support 4,920 children and their families across Tamil Nadu & Puducherry, Karnataka, Kerala, and Andhra Pradesh—reaching nearly 6.5% of India's annual childhood cancer incidence. Behind this achievement are countless stories of courage and resilience, and a shared commitment to ensure that every child has access to care, hope, and the chance of a brighter tomorrow.

HIGHLIGHTS

- Data Patterns and Amphenol were included among the regional donors supporting the initiative.
- Mapping of hospitals across Tamil Nadu was revised and updated.
- 190 children were successfully enrolled in Canshala, Chennai. 22 children completed 10th and 12th and successfully passed the board examination.
- In the month of January 2025, a stakeholders' meeting was conducted in Bengaluru, where partner hospitals and donors participated.



PAGES OF PHILANTHROPY

EVERY DONOR, VOLUNTEER, AND PARTNER HAS WRITTEN A LINE IN THESE PAGES.



Every story of courage is sustained by countless hearts who believed in our mission. These pages honor you the changemakers whose support turns care into lasting impact.



ARISH SYED
Chief Resource Mobilization Officer

“ Every donor, volunteer, and partner has written a line in these pages. These stories of courage would not exist without the support of countless hearts who believed in our mission. These pages are for you - the changemakers who turned care into action. ”

RESOURCE MOBILISATION

CSR & INSTITUTIONAL GIVING

CSR continues to be the backbone of our fundraising model, contributing the largest share of funds. In FY 24-25, CSR accounted for nearly 84% of total fundraising, supported by both existing and newly onboarded partners.

HNI, RETAIL & EVENTS

Retail and HNI donors fuel our unrestricted income while spreading awareness. Campaigns like Bansuri, Roshan Ki Roshani, Summer Rays, Hair for Hope, Payroll & Monthly Giving, and marathons engage communities at scale. Flagship events—including the Singapore Gala and Cycle for Gold—have successfully engaged HNIs and UHNIs, with upcoming large-scale gala, golf, and cricket events set to expand this circle further.

GROWTH & PERFORMANCE

FY 24-25 was a landmark year with 41% growth in Resource Mobilisation, raising ₹55.48 Cr compared to ₹39 Cr the previous year. Campaigns like Bansuri (₹80 Lakh) and Payroll/Monthly Giving (₹90 Lakh) showed sustained strength and scalability.





ROLE OF DONORS

Our donors are not just funders—they are partners in change.

- CSR donors anchor critical medical assistance, treatment, and capacity-building programs.
- HNIs and retail donors often extend support to holistic care, survivorship, advocacy, and awareness campaigns.

This balance ensures that every child benefits from both treatment and the softer but equally essential aspects of care—nutrition, education, and psychosocial support.

DONOR ENGAGEMENT & STEWARDSHIP

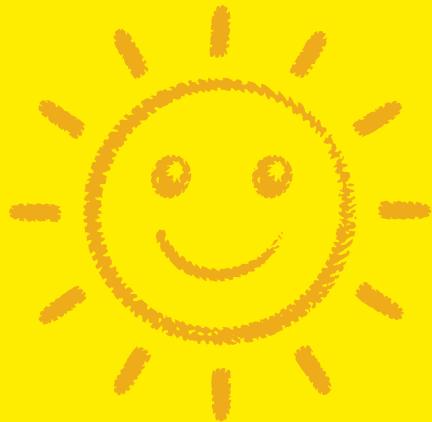
Donors are nurtured through regular program updates, case stories, newsletters, recognition platforms (Gold Circle stewardship), flagship events, field visits, and digital storytelling. With strong compliance and transparency, we ensure every donor sees the true impact of their contribution.

DIVERSIFICATION OF INCOME FY 24-25

Income	Amount In Cr	% Total
Restricted		
CSR Grants	36.39	66%
Foundation & Corporates Grants	9.49	
Individual Grants	0.78	
	46.66	85%
Unrestricted		
CCC India Individual Giving	2.03	4%
Retail and Campaign	5.81	
Other Income	0.39	
	8.23	15%
Total	54.89	
INR vs FCRA Ratio is	89 % : 11%	



PAGES OF GRATITUDE



“EVERY DONOR AND EACH CONTRIBUTION—
WHETHER TIME, RESOURCES, OR LOVE—HAS
BECOME PART OF A LARGER STORY THAT SUSTAINS
OUR MISSION. THESE PAGES ARE OUR WAY OF
SAYING THANK YOU, FOR BEING THE HANDS, HEARTS
AND VOICES THAT MAKE HEALING POSSIBLE.”



WITH HEARTFELT GRATITUDE

TO CSR AND FOUNDATION GRANTS AND OTHER CORPORATE DONORS

INR 5 CR & ABOVE

Kotak Mahindra Group

- Kotak Mahindra Bank Limited
- Kotak Mahindra Life Insurance Company Limited
- Kotak Mahindra Capital Company Ltd
- Kotak Securities Limited

INR 1 CR TO UNDER 5 CR

Aditya Birla Capital Foundation

Azim Premji Philanthropic Initiatives Pvt Ltd

Deutsche India Private Limited

M K Hamied Foundation

Experion Developers Private Limited

Access Health Care Group

- Access Health Care
- Vara Future LLP
- M/S Vridhi

Morgan Stanley India Company Private Limited

Markit India Services Private Limited

SBI Card and Payment Services Limited

Optum Global Solutions India Pvt Ltd

Cipla Foundation

St Jude Global

INR 50 LAKH TO UNDER 1 CR

Indorama Charitable Trust

Northern Aromatics Private Limited

ELGI Equipment Limited

EXL Services India Pvt Ltd

Credit Access India Foundation

Relief From Cancer

Hamdard National Foundation (India)

J B Chemicals and Pharmaceuticals Ltd

OUR HEARTFELT GRATITUDE

INR 10 LAKH TO UNDER 50 LAKH

Swiss Himalayan Amity
Society Pediatric Oncology
Century Plyboards India Limited
Servier India Private Limited
HDFC Life Insurance Company Limited
Markit India Services Pvt Ltd
Serenica Renewables India Private Limited
Corob India Pvt Ltd
Agiliad Technologies Private Limited
Akzo Nobel India Ltd
Indra Technologies Private Limited
Boston Scientific Technology and Engineering Services Pvt. Ltd
MRF Foundation
The Boston Consulting Group (India) Pvt Ltd
The Estate Of Late Soli Dinshaw Shroff

Surie Polex Industries Pvt Ltd
Data Patterns (India) Limited
Raj Seli Compassion Foundation
Albino Lifesciences Pvt Ltd
Space Matrix Design Consultants Pvt Ltd
Roshanlal Public Charitable Trust
GTN Enterprises Limited
Indoco Remedies Limited
Judith Investment Pvt Ltd
Mansi Share and Stock Advisors Pvt Ltd
New Berry Capitals
Prime Securities Limited
Sarovar Hotels Pvt Ltd
Sud Chemie India Pvt Ltd
Surya Roshni Ltd

OUR HEARTFELT GRATITUDE

INR 1 LAKH TO UNDER 10 LAKH

Galaxy Magnum Projects Private Limited
Kabir Leathers
Khattar Estates Private Limited
Multani Pharmaceuticals Ltd
Signpost India Limited
Lotus Valley International School
Swarn Vohra Memorial Foundation
Daasnav Solutions Private Limited
Resonance Health
Charities Aid Foundation
Rotary Club Of Bombay Hills South Charities Trust
Jiv Daya Foundation
Baazar Style Retail Pvt Ltd
Ashbee System Limited
Lajwanti Manilal Godhia Foundation
Sonoma Management Partners Pvt Ltd

Pathways World School -
(Unit Of Sarla Holdings Pvt Ltd)
Union for International Cancer Control
Bansi Vidya Memorial Trust
Hope Child Cancer Care Foundation
360 One Distribution Services Ltd
Amazon Development Center (India) Pvt Ltd
Avighna Associates
HI-Life Machine Tools Ltd
Infotel Business Solution Ltd
M S Agencies Pvt Ltd
Newgen Trend Centre Pvt Ltd
P Raj and Company
SPL Industries Ltd
Swathi Investments
VENT

TO OUR PARTNERS & PLATFORMS

Relief from Cancer
United Way of Mumbai
UK Fund For Charities
Milaap Social Venture

Give India Foundation
United Way Of Bengaluru
The UK Online Giving Foundation
Giving Impetus To Voluntary
Effort



OUR HEARTFELT GRATITUDE

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

INR 40 LAKH & ABOVE

SP Pant (V&AT)
Rohet and Arshna Tolani
Kanaka & Siddhant Sirpal

INR 10 LAKH TO UNDER 20 LAKH

Sophie Ahmed
Raj Seli Compassion Foundation
Piyush, Ruchira & Dr and Mrs Gupta
Ram Nayak
Poonam Bagai
Amit & Deepika Khanna
Manju Jain
Gokul & Lakshmi Laroia
Kishore Hemandas Mulani

INR 5 LAKH TO UNDER 10 LAKH

Arjjit Ranjan Sarker
Roopak Taneja
Winarto Putra Kurniawan
Anil Thadani
Samir & Anjali Soota
Joydeep Sengupta
Kirti Seth
Mala Rajan Bharvani
Shobha & Sunny Varghese
Vikram, Sunil & Anjali Sood
Ashish Shastry
Seema Tulsyan
Aditii Krishna Kumar
Akram Bagai
Andrey & Sangeeta Purushottam
Alok & Shobha Agarwal (Amogha Charitable Foundation)
Karan Singh Thakral
Rahul Mookerjee
Ravi Mehrotra
Samina Hamied
Satish Dhawan
Shirish Apte
Soona Shroff
Sunil & Anjali Duggal
Ananthraman Venkatraman
Arvind & Usha Narainaswami Family

OUR HEARTFELT GRATITUDE

INR 2 LAKH TO UNDER 5 LAKH

Chris Williams
Caesar Sengupta & Pooja B
Amee & Akash Prakash
Rishad Murtaza
Karanjit Singh Bal
Harit and Reena Talwar
Maninder Gulati
Vinati Kastia
Ajay Lal & Punita Lal
Michael Fernandes
Laxmi Vithaldas Kamath
Akshay Ashok Mahajan
Harish Nim
Proshant Mehra
Deenar Toraskar & Seema Toraskar
Godbole Family
Akila Vijay Lyengar
Amol Gupte
Kapish Jain
Kuldeep Tikkha
Pavan Bagai
Rohit & Nishta Sipahimalni
Tirthankar Sen & Sancharini Mazumdar
Gautham and Sujata Mukkavilli
Zeba Sultana & Zeenat Asra Iqbal

INR 1 LAKH TO UNDER 2 LAKH

Gini Gulati
Maj. Gen TPS Bakhshi
Promila Kukreja
Zubbair Darrab Aria
Ashish Bhutani
Lajwanti Manilal (Godhia Foundation)
S N Dhawan
Sharookh Lashkari
Rajeev Singhvi
Vimmi & Prakash Jayaram (Jagdish Kishorilal Aggarwal HUF)
Dr Suresh Sundar
Adil Ahmad
Aditya Mathur
Angad Bagai
Blossom Kochhar
M K Jain
Mantaj Dosaj
Mohammad Zafar Iqbal
Soumya Banerjee & Priti Dhall
Sivakami Kumar
Sudhir Kumar Sethi
Vasudevan

***THIS LIST INCLUDES DONORS CONTRIBUTING THROUGH A COMBINATION
OF FOREIGN (FCRA) AND DOMESTIC (INR) FUNDS IN DESCENDING ORDER**

MESSAGES FROM THE HEART

TESTIMONIALS



It has been a privilege for us at CMC Ludhiana to collaborate with Cankids in advancing pediatric oncology care in Punjab and beyond. The role of Cankids has been pivotal in enabling us to provide pro-poor, high-quality, and comprehensive care to children with cancer, especially those from marginalized and under-resourced backgrounds.

Their support for expensive but necessary investigations and for funding potentially curative stem cell transplants has been a great blessing, allowing us to offer world-class care and give children and their families the gift of hope and healing. Equally noteworthy is their professional and transparent management of funds, ensuring that resources are utilized with accountability and directed only toward those who truly need them.

Beyond financial support, Cankids' involvement in working alongside government organizations has paved the way for training programs, education initiatives, and improved treatment adherence. This collaborative approach has strengthened the ecosystem for pediatric oncology in Punjab and has set a benchmark for sustainable models of care across India.

We value our partnership with Cankids and look forward to continuing this journey together—bridging gaps, building capacity, and ensuring that every child with cancer has access to timely, equitable, and compassionate care.

Yours sincerely,

27/09/2025



Dr M Joseph John MD, DM, MBA (HHS)
Associate Director
Professor & Head
Department of Clinical Haematology,
Haemato-Oncology &
Bone Marrow (Stem cell) Transplantation
CMC, Ludhiana 141 008.

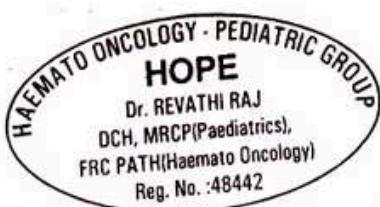


Cankids Kidscan.....

My association with the organisation has been over ten years and I have seen them provide consistent support for childhood cancer. Systems have been set in place to support all aspects of childhood cancer - patient treatment, clinical studies, nurse education, engaging with the government and above all to provide a safe space for families to stay close to the centre of treatment. Paediatric Oncologists across the country have been able to provide access to care to all children with dignity and thereby improve survival. I am truly honoured and proud to be a part of this group in my own small way and wish them more power in the space of advocacy for a better tomorrow!

Revathi Raj
Revathi Raj

26/9/2025



CACHAR CANCER HOSPITAL & RESEARCH CENTRE



SILCHAR-788 015, ASSAM (INDIA)

GSTIN : 18AAAAT1505G1ZU

TO WHOMSOEVER IT MAY CONCERN

"Cankids has played a pivotal role in advancing childhood cancer care in India through its comprehensive, patient-centered approach. By addressing gaps across the continuum of care – from awareness and early detection to treatment support, capacity building, and palliative care – the organization has made a measurable impact on improving outcomes and reducing inequities. Our collaboration with Cankids has strengthened systems of care, enabled families to access critical resources, and fostered a culture of partnership between civil society and medical institutions. Their contributions continue to be of great significance in the national effort to improve survival and quality of life for children with cancer."



Dr. R Ravi Kannan,
Director

PAGES OF ACCOUNTABILITY

EVERY RUPEE TELLS A STORY OF CARE. HERE, WE SHARE HOW YOUR SUPPORT BECAME MEDICINE, MEALS, EDUCATION, AND HOPE.

Accountability and transparency are at the heart of everything we do. This Financial Report is not only a record of income and expenditure, but also a reflection of our commitment to efficiency, sustainability, and measurable impact. It demonstrates how your support enables us to scale solutions, reach more families, and build a resilient ecosystem of care for every child with cancer in India.



Alok Krishna,
Chief Finance Officer

“At CanKids, we uphold the highest standards of transparency, accountability, and purpose in managing our resources. Through careful planning, budgeting, and monitoring, we strive to maximize the impact of every contribution. As custodians of these resources, our success is measured not just in financial statements, but in the lives, the touch and the futures we help build. In our work, the language of finance becomes the poetry of hope translating numbers into meaningful change for children and families battling cancer.”



AUDITOR'S REPORT

Walker Chandiok & Co LLP

Walker Chandiok & Co LLP
21st Floor, DLF Square
Jacaranda Marg, DLF Phase II,
Gurugram - 122 002
Haryana, India
T +91 124 462 8099
F +91 124 462 8001

Independent Auditor's Report

To the Members of Cankids...Kidscan

Qualified Opinion

1. We have audited the accompanying financial statements of **Cankids...Kidscan** ('the Society'), which comprise the Balance Sheet as at 31 March 2025, the Income and Expenditure Account, and Receipts and Payments Account for the year then ended, and notes to the financial statements, including a summary of the significant accounting policies and other explanatory information.
2. In our opinion and to the best of our information and according to the explanations given to us, except for the possible effects of the matter described in the Basis for Qualified Opinion section of our report, the aforesaid financial statements give a true and fair view in conformity with the Accounting Standards issued by the Institute of Chartered Accountants of India ('ICAI') and other accounting principles generally accepted in India to the extent considered relevant by management of the Society as at 31 March 2025, including the financial position of the Society as at 31 March 2025, its financial performance and its receipts and payments for the year ended on that date.

Basis for Qualified Opinion

3. During the earlier years, the Society had recorded Gratuity liability fully on payment basis however during the current year the Society has partially initiated recording it on accrual basis. However, as stated in Note 21(iii) of the accompanying financial statements, the gratuity liability as at 31 March 2025 as per the actuarial valuation amounts to ₹155.43 lakhs. The Society has partly recognised the gratuity liability of ₹ 20 lakhs during the year. Had the full liability been recognised on accrual basis of accounting, the employee benefit expense for the year would have been higher by ₹27.92 lakhs and surplus would have been lower by ₹27.92 lakhs and total liabilities would have been higher by ₹135.43 lakhs and corresponding deficit under General fund would have been higher by ₹135.43 lakhs.
4. We conducted our audit in accordance with the Standards on Auditing issued by the ICAI. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Society in accordance with the Code of Ethics issued by ICAI and we have fulfilled our ethical responsibilities in accordance with the Code of Ethics. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our qualified opinion.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

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



Chartered Accountants

Walker Chandiok & Co LLP

Independent Auditor's Report of even date to the members of Cankids...Kidscan on the financial statements for the year ended 31 March 2025 (cont'd)

6. In preparing the financial statements, the management is responsible for assessing the Society's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the management either intends to liquidate the Society or to cease operations, or has no realistic alternative but to do so.
7. 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

8. 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.
9. As part of an audit in accordance with Standards on Auditing issued by the ICAI, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:
 - Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control;
 - Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on whether the Society has in place an adequate internal financial controls system with reference to financial statements and the operating effectiveness of such control;
 - 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

Independent Auditor's Report of even date to the members of Cankids...Kids can on the financial statements for the year ended 31 March 2025 (cont'd)

10. We communicate with those charged with governance 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


Jagdish Kumar Gadi
Partner
Membership No.: 015651
UDIN: 25015651BPUACX2270



Place: New Delhi
Date: 11 September 2025

BALANCE SHEET

Cankids...Kidscan

Balance Sheet as at 31 March 2025

(All amounts in ₹ lakhs, unless otherwise stated)

	Notes	As at 31 March 2025	As at 31 March 2024
Sources of funds			
Funds			
Unrestricted funds	3	86.70	(125.63)
Restricted funds	4	496.84	520.24
		<u>583.54</u>	<u>394.61</u>
Current liabilities			
Short-term borrowings	5	6.78	318.78
Accounts payable	6	692.13	734.84
Other current liabilities	7	164.81	184.29
Short term provisions	8	20.00	-
		<u>883.72</u>	<u>1,237.91</u>
		<u><u>1,467.26</u></u>	<u><u>1,632.52</u></u>
Applications of funds			
Non-current assets			
Property, plant and equipment	9	489.65	525.46
Other non-current assets	10	52.78	52.28
		<u>542.43</u>	<u>577.74</u>
Current assets			
Accounts receivable	11	48.81	119.74
Cash and bank balances	12	751.40	871.69
Short-term loans and advances	13	123.76	62.54
Other current assets	14	0.86	0.81
		<u>924.83</u>	<u>1,054.78</u>
		<u><u>1,467.26</u></u>	<u><u>1,632.52</u></u>
Brief about the entity	1		
Notes including summary of significant accounting policies and other explanatory information	2-21		

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

For Walker Chandiock & Co LLP

Chartered Accountants

Firm's Registration No.: 001076N/N500013

Jagdish Kumar Gadi
Partner
Membership No.: 015651

Place: New Delhi
Date: 11 September 2025



For and on behalf of Cankids...Kidscan

Poonam Bagai
Chairman

Tarun Ohri
Treasurer

Alok Krishna
Chief Finance Officer

Place: New Delhi
Date: 11 September 2025



INCOME & EXPENDITURE STATEMENT

Cankids...Kidscan

Income and Expenditure Account for the year ended 31 March 2025

(All amounts in ₹ lakhs, unless otherwise stated)

	Notes	Year ended 31 March 2025	Year ended 31 March 2024
Income			
Grants and donations	15	5,449.45	3,956.35
Other income	15	39.57	44.87
		<u>5,489.02</u>	<u>4,001.22</u>
Expenditure			
Charitable (Programme) expenses	17	4,598.71	3,652.14
Fund raising expenses	18	86.08	76.86
Other expenses	19	488.63	392.40
Depreciation	9	84.90	85.32
Finance cost	20	18.37	14.30
		<u>5,276.69</u>	<u>4,221.02</u>
Surplus/(Deficit) for the year transferred to General fund		<u>212.33</u>	<u>(219.80)</u>
Brief about the entity	1		
Notes including summary of significant accounting policies and other explanatory information		2-21	

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

For Walker Chandlok & Co LLP
Chartered Accountants
Firm's Registration No.: 001076N/N500013

For and on behalf of Cankids...Kidscan

Jagdish Kumar Gadi
Partner
Membership No.: 015651




Poornam Bagai
Chairman


Tarun Ohri
Treasurer


Alok Krishna
Chief Finance Officer

Place: New Delhi
Date: 11 September 2025

Place: New Delhi
Date: 11 September 2025



Cankids...Kidscan
 Receipts and Payments Account for the year ended 31 March 2025
 (All amounts in ₹ Lakhs, unless otherwise stated)

	Year ended 31 March 2025	Year ended 31 March 2024
Opening balance		
Cash in hand	0.29	0.25
Cash at bank	537.29	289.96
Fixed deposits	334.11	349.19
Bank overdraft	(318.78)	-
	552.91	639.40
Receipts		
Grants and donations received		
- Grant and donations	5,428.41	3,832.48
- Corpus / earmarked fund / capital grant	-	175.00
Other receipts		
- Interest received from bank	35.63	32.75
- Miscellaneous receipts	72.39	54.37
Change in advances to employees/vendors	-	84.46
	5,536.43	4,179.06
Payments		
Charitable (Programme) expenses	4,610.00	3,231.51
Fund raising expenses	88.46	73.71
Other expenses	505.75	380.97
Finance cost	18.37	14.30
Tangible assets purchased during the year	60.42	240.27
Change in advances to employees/vendors	61.72	-
	5,344.72	3,946.76
Closing balance		
Cash and bank balances		
-Cash in hand	0.05	0.29
-Cash at bank	357.52	537.29
-Fixed deposits	393.83	334.11
-Bank overdraft	(6.78)	-
	744.62	871.59

This is the Receipts and Payments Account referred to in our report of even date.

For Walker Chandiok & Co LLP
 Chartered Accountants
 Firm's Registration No.: 001076N/N500013

Jagdish Kumar Gadi
 Partner
 Membership No.: 015651

Place: New Delhi
 Date: 11 September 2025



For and on behalf of Cankids...Kidscan


 Poonam Bagai
 Chairman

 Tarun Ohri
 Treasurer

 Akash Krishna
 Chief Finance Officer

Place: New Delhi
 Date: 11 September 2025



FINANCIAL STATEMENTS

Cankids...Kidscan

Notes including summary of significant accounting policies and notes to the financial statements for the year ended 31 March 2025

(All amounts in ₹ lakhs, unless otherwise stated)

1. Brief about the entity

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-7/7, Vasant Vihar, New Delhi-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 23 September 2025.

The Society has been granted an exemption under section 12A of the Income-tax Act, 1961, vide Document Identification Number AABAC3450GE2021401 dated 28 May 2021 and valid till AY 2026-27 (i.e. FY 2025-26). The Society 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 (i.e. FY 2025-26).

2. Summary of significant accounting policies

a) Basis of preparation

The financial statements have been prepared and presented under the historical cost convention on the accrual basis (except for Gratuity for which partial accrual) has been made and in accordance with the generally accepted accounting principles and the applicable Accounting Standards issued by the Institute of Chartered Accountants of India to the extent considered relevant by management of the Society. 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 may 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 lakhs 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

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

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.



The Society also receives donations which are not subject to donor stipulations as to use, and the same may be used as per the management's discretion and this is recognized as income on receipt basis.

(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.

Depreciation

Depreciation on tangible assets is provided on the written down value method at the rates prescribed under Income -tax Rules,1962.

f) 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 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.

g) Funds

(i) Restricted funds

Earmarked funds

Earmarked funds represent funds received for specific purposes such as Scholarship Fund for acknowledging the cancer affected scholar children and granting them scholarship; Home Away Fund for cancer affected children residing in Cankids; Retinoblastoma Fund for treatment of retinoblastoma cancer; Kumar Children Fund for children under cancer treatment and After Cancer Treatment Fund for treatment and other support services to cancer survivor children for follow up in hospitals to ensure it does not lapses.

Interest earned is allocated on the respective earmarked fund on actual basis for utilization on the specified purposes.

Capital grant fund

Capital grant fund represents property, plant and equipment received from ICS (Indian Cancer Society) on incorporation of the Society which are being recognized at a value certified by an independent valuer. However, the tangible assets which are received as donation in kind from individuals/trusts/societies are shown at nominal value at ₹1/- in the books of account.



BALANCE SHEET

Cankids...Kidscan

Notes including summary of significant accounting policies and notes to the financial statements
for the year ended 31 March 2025

(All amounts in ₹ lakhs, unless otherwise stated)

Project specific funds

"Project specific funds" represents grants received from various funding agencies to carry out specific activities. In case the Society incurs expenditure which is more than the amount received for specific projects, the differential amount is shown as 'Grant receivables'. At the end of the agreement, the unutilized amount is either returned to the respective donor or the surplus/deficit is transferred to Income and Expenditure Account in the relevant year in which the project is completed depending upon the terms of the grant.

(ii) Unrestricted funds

Corpus fund

Corpus fund represents amounts received from the donors as corpus. It also includes Life membership fees paid by members of the Society.

General fund

The fund represents the accumulated surplus or deficit.

h) Employee benefits

Defined contribution plan

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 employee.

Defined benefit plan

Gratuity is a post-employment benefit and is in the nature of a defined benefit plan. Gratuity is calculated in the manner prescribed under Payment of Gratuity Act, 1972 and is recognized as expense on actual payment basis.

i) 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:

- possible obligation, the existence of which will be confirmed by the occurrence/ non-occurrence of one or more uncertain events, not fully within 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
- 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.



INCOME & EXPENDITURE ACCOUNT

Cankids...!kidscan

Notes including summary of significant accounting policies and other explanatory information as at 31 March 2025

(All amounts in ₹ lakhs, unless otherwise stated)

	As at 31 March 2025	As at 31 March 2024
3 Unrestricted funds		
a) Corpus fund		
Balance at the beginning of the year	234.65	59.65
Add : Amounts received during the year	-	175.00
Balance at the end of the year	<u>234.65</u>	<u>234.65</u>
b) General fund		
Balance at the beginning of the year	(360.28)	(140.48)
Add: Surplus/(Deficit) for the year transferred from Income and Expenditure Account	212.33	(219.80)
Balance at the end of the year	<u>(147.95)</u>	<u>(360.28)</u>
Total (a)+(b)	<u><u>86.70</u></u>	<u><u>(125.63)</u></u>
4 Restricted funds		
a) Earmarked funds		
(i) Cankids Scholarship fund		
Balance at the beginning of the year	25.80	25.80
Add : Interest credited during the year	1.77	1.08
Less : Expenditure incurred during the year	(1.77)	(1.08)
Balance at the end of the year	<u>25.80</u>	<u>25.80</u>
(ii) Cankids HAH corpus fund		
Balance at the beginning of the year	5.00	5.00
Add : Interest credited during the year	0.35	0.16
Less : Expenditure incurred during the year	(0.35)	(0.16)
Balance at the end of the year	<u>5.00</u>	<u>5.00</u>
(iii) Sanjeev Cankids Retinoblastoma fund		
Balance at the beginning of the year	41.00	41.00
Add : Interest credited during the year	2.90	1.35
Less : Expenditure incurred during the year	(2.90)	(1.35)
Balance at the end of the year	<u>41.00</u>	<u>41.00</u>
(iv) Kumar Children fund		
Balance at the beginning of the year	10.00	10.00
Add : Interest credited during the year	0.71	0.30
Less : Expenditure incurred during the year	(0.71)	(0.30)
Balance at the end of the year	<u>10.00</u>	<u>10.00</u>
(v) After Cancer treatment		
Balance at the beginning of the year	5.00	5.00
Add : Interest credited during the year	0.35	0.16
Less : Expenditure incurred during the year	(0.35)	(0.16)
Balance at the end of the year	<u>5.00</u>	<u>5.00</u>
Total (i) to (v)	<u><u>86.80</u></u>	<u><u>86.80</u></u>
b) Capital grant fund		
Balance at the beginning of the year	32.53	36.78
Less : Depreciation during the year	(3.71)	(4.25)
Balance at the end of the year	<u>28.82</u>	<u>32.53</u>
c) Project specific fund		
Balance at the beginning of the year	400.91	388.99
Add : Amounts received during the year	4,960.45	3,876.46
Less : Expenditure incurred during the year	(4,880.14)	(3,684.54)
Balance at the end of the year	<u>381.22</u>	<u>400.91</u>
Total (a)+(b)+(c)	<u><u>496.84</u></u>	<u><u>520.24</u></u>
5 Short-term borrowings		
Bank overdraft (in books)	6.78	268.78
Unsecured loan from Chairman / Founder	-	50.00
	<u>6.78</u>	<u>318.78</u>
Note (a) : Bank overdraft		
Aforementioned Bank overdraft (against term deposits) has been taken at rates specified below :		
Name of bank	Rate of interest	
Bank of India	8.00%	
6 Accounts payable		
Payables	692.13	734.84
	<u>692.13</u>	<u>734.84</u>
7 Other current liabilities		
Expense payable	128.78	156.85
Statutory dues	36.01	27.44
	<u>164.79</u>	<u>184.29</u>
8 Short-term provisions		
Provision for Gratuity	20.00	
	<u>20.00</u>	

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RECEIPTS & PAYMENTS ACCOUNTS

Cankids...Kidscan
Notes including summary of significant accounting policies and other explanatory information as at 31 March 2025
(All amounts in ₹ lakhs, unless otherwise stated)

Note 9 - Property, plant and equipment

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

Current year

Particulars	Gross block			Accumulated depreciation			Net block As at 31 March 2025
	As at 1 April 2024	Additions	Sale/disposals	As at 31 March 2025	As at 1 April 2024	For the year On disposals	
Tangible assets							
Furniture and fixture	202.32	4.34	-	206.66	41.56	16.34	57.90
Office equipment	113.82	14.97	-	128.79	35.72	13.01	48.73
Plant and machinery	3.86	-	-	3.86	3.19	0.10	3.29
Software	2.62	4.78	-	7.40	1.97	1.21	3.18
Computers	164.32	18.07	-	182.39	118.17	23.60	141.77
Vehicle	135.05	6.90	-	141.95	20.35	17.72	38.07
Leasehold Improvement	100.84	-	-	100.84	8.93	9.19	18.12
Total	722.83	49.06	-	771.89	229.89	81.17	311.06
							460.83

Previous year

Particulars	Gross block			Accumulated depreciation			Net block As at 31 March 2024
	As at 1 April 2023	Additions	Sale/disposals	As at 31 March 2024	As at 1 April 2023	For the year On disposals	
Tangible assets							
Furniture and fixture	190.53	11.79	-	202.32	23.93	17.63	41.56
Office equipment	97.43	17.28	0.89	113.82	23.03	12.82	35.72
Plant and machinery	3.86	-	-	3.86	3.07	0.12	3.19
Software	2.62	-	-	2.62	1.54	0.43	1.97
Computers	140.00	24.32	-	164.32	90.65	27.52	118.17
Vehicle	23.16	111.89	-	135.05	4.56	15.79	20.25
Leasehold Improvement	40.73	60.11	-	100.84	2.04	6.89	8.93
Total	498.33	225.39	0.89	722.83	148.82	81.20	329.89
							492.94

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Note 3 - Property, plant and equipment

b) Property, plant and equipment received from other society

Current year

Particulars	Gross block					Accumulated depreciation			Net block As at 31 March 2025
	As at 1 April 2024	Additions	Sale/disposals	As at 31 March 2025	1 April 2024	As at 31 March 2025	On disposals	For the year	
Tangible assets									
Furniture and fixture	12.20	-	-	12.20	8.56	0.36	-	3.92	3.28
Office equipment	1.72	-	-	1.72	1.45	0.04	-	1.49	0.23
Electrical installation	0.34	-	-	0.34	0.24	0.01	-	0.25	0.09
Plant and machinery	4.20	-	-	4.20	3.55	0.10	-	3.65	0.55
Vehicles	0.05	-	-	0.05	0.04	0.00	-	0.04	0.01
Software	1.00	-	-	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	15.82	0.51	-	16.33	4.16

Previous year

Particulars	Gross block					Accumulated depreciation			Net block As at 31 March 2024
	As at 1 April 2023	Additions	Sale/disposals	As at 31 March 2024	1 April 2023	As at 31 March 2024	On disposals	For the year	
Tangible assets									
Furniture and fixture	12.20	-	-	12.20	8.16	0.40	-	8.56	3.64
Office equipment	1.72	-	-	1.72	1.41	0.05	-	1.46	0.26
Electrical installation	0.34	-	-	0.34	0.23	0.01	-	0.24	0.10
Plant and machinery	4.20	-	-	4.20	3.43	0.11	-	3.54	0.65
Vehicles	0.05	-	-	0.05	0.04	0.00	-	0.04	0.01
Software	1.00	-	-	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	15.25	0.57	-	15.82	4.67

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c) Property, plant and equipment received as donation

Particulars	Gross block			Accumulated depreciation			Net block As at 31 March 2025
	As at 1 April 2024	Additions	Sale/disposals	As at 31 March 2025	As at 1 April 2024	For the year on disposals	
Tangible assets	0.01	-	-	0.01	-	-	0.01
Total	0.01	-	-	0.01	-	-	0.01

Particulars	Gross block			Accumulated depreciation			Net block As at 31 March 2024
	As at 1 April 2023	Additions	Sale/disposals	As at 31 March 2024	As at 1 April 2024	For the year on disposals	
Tangible assets	0.01	-	-	0.01	-	-	0.01
Total	0.01	-	-	0.01	-	-	0.01

Particulars	Gross block			Accumulated depreciation			Net block As at 31 March 2025
	As at 1 April 2024	Additions	Sale/disposals	As at 31 March 2025	As at 1 April 2024	For the year on disposals	
Leasehold improvement	24.00	-	-	24.00	11.89	1.21	13.10
Furniture and fixture	18.29	-	-	18.29	10.56	0.77	11.33
Office equipment	11.06	-	-	11.06	8.17	0.43	6.60
Computers	3.39	-	-	3.39	3.28	0.04	3.32
Vehicle	15.85	-	-	15.85	10.83	0.75	11.58
Total	72.59	-	-	72.59	44.73	3.20	47.93

Particulars	Gross block			Accumulated depreciation			Net block As at 31 March 2024
	As at 1 April 2023	Additions	Sale/disposals	As at 31 March 2024	As at 1 April 2023	For the year on disposals	
Leasehold improvement	24.00	-	-	24.00	10.54	1.35	11.89
Furniture and fixture	18.29	-	-	18.29	9.71	0.86	10.57
Office equipment	11.06	-	-	11.06	7.66	0.51	8.17
Computers	3.39	-	-	3.39	3.22	0.07	3.29
Vehicle	15.85	-	-	15.85	9.94	0.89	10.93
Total	72.59	-	-	72.59	41.07	3.68	44.76

Particulars	Gross block			Accumulated depreciation			Net block As at 31 March 2024
	As at 1 April 2023	Additions	Sale/disposals	As at 31 March 2024	As at 1 April 2023	For the year on disposals	
Leasehold improvement	24.00	-	-	24.00	10.54	1.35	12.11
Furniture and fixture	18.29	-	-	18.29	9.71	0.86	7.72
Office equipment	11.06	-	-	11.06	7.66	0.51	6.60
Computers	3.39	-	-	3.39	3.22	0.07	3.29
Vehicle	15.85	-	-	15.85	9.94	0.89	10.93
Total	72.59	-	-	72.59	41.07	3.68	44.76



Cankids...Kidscan

Notes including summary of significant accounting policies and other explanatory information as at 31 March 2025

(All amounts in ₹ lakhs, unless otherwise stated)

	As at 31 March 2025	As at 31 March 2024
10 Other non-current assets		
Security deposits	52.78	52.28
	52.78	52.28
11 Account receivable (Unsecured, considered good)		
Grant receivables	48.81	119.74
	48.81	119.74
12 Cash and bank balances		
Cash and cash equivalents		
Balances with banks in		
- savings accounts	134.83	348.99
- current accounts	222.69	188.30
- Fixed deposits	393.83	334.11
Cash on hand	0.05	0.29
	751.40	871.40
13 Short-term loans and advances (Unsecured, considered good)		
Advances recoverable in cash or in kind or for value to be received	102.17	37.86
Prepaid expenses	15.53	20.30
Tax deducted at source	6.06	4.38
	123.76	62.54
14 Other current assets		
Interest accrued on deposits	0.86	0.81
	0.86	0.81
15 Grants and donations		
Grants	4,700.27	3,651.03
Donations	676.93	260.46
Anonymous donations	72.25	44.26
	5,449.45	3,956.35
16 Other income		
Interest income		
- on savings bank accounts	9.52	6.58
- on fixed deposits	26.16	23.93
- on income tax refund	0.08	-
Amortisation of capital grant	3.72	4.25
Undrawn balances written back	0.09	10.11
	39.57	44.87

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Cankids...Kidscan

Notes including summary of significant accounting policies and other explanatory information as at 31 March 2025

(All amounts in ₹ lakhs, unless otherwise stated)

17 Charitable (Programme) expenses

a)Cankids hospital support unit

Compensation, consultancy and other benefits

	Year ended 31 March 2025	Year ended 31 March 2024
-Employee cost	670.10	593.48
-Consultancy and other benefits	13.37	15.61
-Gratuity	-	1.07
Patient support expenses	1,971.94	1,570.61
Patient food expenses	95.19	81.98
Subscriptions	26.09	13.23
Office maintenance	11.23	8.61
Repair and maintenance	257.98	0.50
Printing and stationery	25.31	7.01
Travel and conveyance	13.81	7.49
Communication	3.39	1.81
	3,088.41	2,309.38

b)Cankids Care Centers

Compensation, consultancy and other benefits

-Employee cost	275.22	245.19
-Consultancy and other benefits	48.58	47.52
-Gratuity	1.01	0.51
Patient food expenses	114.09	87.09
Patient support expenses	61.94	63.04
Rent and electricity	214.39	195.88
Subscriptions	17.44	7.62
Office maintenance	25.43	24.11
Repair and maintenance	40.49	39.86
Printing and stationery	8.62	6.52
Travel and conveyance	23.39	22.44
Communication	4.75	7.28
	835.35	747.04

c)Access to care centers at national, regional and state level

Compensation, consultancy and other benefits

-Employee cost	301.89	279.89
-Consultancy and other benefits	84.56	59.85
-Gratuity	20.00	1.04
Patient support expenses	33.27	36.59
Patient food expenses	48.39	44.46
Subscriptions	5.81	4.01
Rent and electricity	50.03	31.83
Office maintenance	18.73	14.10
Repair and maintenance	1.27	2.90
Travel and conveyance	83.35	77.30
Printing and stationery	24.36	36.82
Communication	3.29	6.94
	674.95	595.73

Total(a+b+c)

4,598.71

3,852.15

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Cankids...KidsCan

Notes including summary of significant accounting policies and other explanatory information as at 31 March 2025

All amounts in ₹ lakhs, unless otherwise stated)

Year ended 31 March 2025	Year ended 31 March 2024
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Further the Charitable expenditure has also been disclosed project wise as given below -

a) Cankids hospital support unit

Medical projects and support program	1,765.61	1,412.77
Treatment support program	173.98	155.44
Pediatric palliative care	3.98	3.46
Pediatric psycho-oncology program	64.59	48.81
Education program	160.09	119.55
Parent and survivor groups and patient navigation	159.29	110.86
Medical and social support informatics (MASSI)	10.59	10.69
National outreach program	592.35	304.10
Awareness and advocacy program (CEPAA)	7.43	5.99
Capacity and skill building	134.39	121.37
Quality care research and impact (QCRI)	16.12	16.32
	3,088.42	2,309.38

b) Cankids cares centers*

Pediatric palliative care center	117.92	123.94
Home away from homes	579.81	522.31
Canshala special schools	137.63	100.79
	835.36	747.04

* Excludes common expenses allocation (refer note 21(i))

c) Access to care centers at national, regional and state level

Medical projects and support program	87.91	85.41
Treatment support program	47.53	26.80
Pediatric palliative care	9.13	0.75
Pediatric psycho-oncology program	13.15	11.38
Education program	28.07	41.14
Parent and survivor groups and patient navigation	56.66	57.39
Medical and social support informatics (MASSI)	19.73	16.72
National outreach program	135.17	116.86
Awareness and advocacy program (CEPAA)	53.91	63.96
Capacity and skill building	65.41	76.80
Quality care research and impact (QCRI)	158.27	98.22
	674.94	598.73

Total(a+b+c)

4,598.72	3,652.15
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Cankids...Kidscan

Notes including summary of significant accounting policies and other explanatory information as at 31 March 2025

(All amounts in ₹ lakhs, unless otherwise stated)

	Year ended 31 March 2025	Year ended 31 March 2024
18 Fund raising expenses		
Resource mobilisation team		
Compensation and benefits (including consultants)		
-Employee cost	54.56	40.99
-Consultancy and other benefits	1.68	-
-Gratuity	0.88	-
Event expenses	22.80	22.29
Travel and conveyance	2.04	2.33
Printing and stationery	0.96	4.46
Communication	0.83	1.77
Subscriptions	1.64	3.07
Staff welfare	0.21	1.03
Miscellaneous expenses	0.48	0.92
	86.08	76.86
19 Other expenses		
Compensation and benefits (including consultants)		
-Employee cost	339.15	255.84
-Gratuity	10.36	12.74
Staff welfare	8.48	7.62
Professional fees	45.89	37.42
Rent	17.41	12.75
Electricity and water	8.75	6.41
Payment to auditors	2.83	2.36
Insurance	1.20	1.34
-Building	4.78	7.73
-Others	5.58	2.94
Travel and conveyance	9.07	6.73
Communication	3.65	3.12
Subscriptions	2.95	5.06
Housekeeping supplies	13.11	7.85
Miscellaneous expenses	15.62	22.44
	488.63	392.40
20 Finance cost		
Interest on overdraft facility	18.37	14.30
	18.37	14.30

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Cankids...Kidscan

**Notes including summary of significant accounting policies and notes to the financial statements
for the year ended 31 March 2025**

(All amounts in ₹ lakhs, unless otherwise stated)

21. Notes to the Financial Statements

(i) Allocation of Program expenditure

- a. The Society receives contributions for its various projects/activities for specified time period and are subject to donor-imposed stipulations regarding the utilisation of these funds. The terms and conditions along with a detailed budget is laid down in the Memorandum of Understanding/agreement with each donor. Costs include 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.
- b. The above cost are allocated to the respective projects within the approved budget by the funder. Further, a separate cost center is created in the accounting software for each project enabling the Society to identify and track income and expenditure project-wise.

(ii) During the year, the Society has received donations amounting to ₹72.25 (Previous year: ₹44.26) 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.

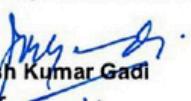
(iii) The Society is covered under the Payment of Gratuity Act, 1972. Gratuity is a defined benefit plan payable to employees on separation after completion of five years of continuous service, or earlier in case of death or disablement. An actuarial valuation of the gratuity liability has been carried out as at March 31, 2025. The present value of obligation amounts to ₹155.43 lakhs. During the year, the Society has recognized a provision of ₹20 lakhs towards gratuity obligations in the books of accounts. This represents a partial provision against the total actuarial liability. The balance liability will be addressed in subsequent periods based on a comprehensive management exercise currently under review. Management is examining funding options, including a Group Gratuity Scheme with LIC/other insurers, and will present a detailed plan to the Board for approval in the next financial year. It may be noted that, while the full liability has not been provided for on an accrual basis in the accounts as per accounting standards, the Society has invariably settled gratuity payments to all eligible employees on an actual payment basis as and when they fall due. Accordingly, the gratuity liability is partly provided and partly disclosed by way of this note.

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

For Walker Chandok & Co LLP

Chartered Accountants

Firm's Registration No.: 001076N/N500013


Jagdish Kumar Gadi
Partner

Membership No.: 015651

Place: New Delhi

Date: 11 September 2025



For and on behalf of Cankids...Kidscan


Poonam Bagai
Chairman


Tarun Ohri
Treasurer


Alok Krishna
Chief Finance Officer

Place: New Delhi
Date: 11 September 2025



Annexure -A to Schedule 4(c) not forming part of the financial statements as at 31 March 2025
(All amounts in ₹ lakhs, unless otherwise stated)

S.No.	Particulars	Name of donor	Opening balance As at 1 April 2024	Receipts during the year	Receivable during the year	Utilisation during the year	Closing balance As at 31 March 2025
(A)	Change for Childhood Cancer in States / CHSUs						
	Delhi NCR	As per Annexure : (i)	298.97	0.88			299.85
	Punjab, Haryana, Himachal Pradesh, and Jammu & Kashmir	As per Annexure : (ii)	31.31	-			31.31
	Uttar Pradesh and Uttarakhand	As per Annexure : (iii)	548.43	-			548.43
	Bihar	As per Annexure : (iv)	95.83	-			95.83
	Rajasthan	As per Annexure : (v)	42.00	45.70		42.00	45.70
	West Bengal	As per Annexure : (vi)	-	187.68			187.68
	Odisha	As per Annexure : (vii)	-	49.06			49.06
	Maharashtra	As per Annexure : (viii)	-	536.73			536.73
	Gujarat	As per Annexure : (ix)	-	220.96			220.96
	Madhya Pradesh	As per Annexure : (x)	37.65	396.01			345.69
	Tamilnadu and UT Puducherry	As per Annexure : (xi)	-	314.00			314.00
	Andhra and Telangana	As per Annexure : (xii)	-	25.00			25.00
	Kerala	As per Annexure : (xiii)	-	10.17			10.17
	Karnataka	As per Annexure : (xiv)	-	106.02			106.02
	North East	Perfect Writing Instruments	-	4.00			4.00
	Change for Childhood Cancer through States	As per Annexure : (xv)	-	983.22			968.90
(B)	Access to Holistic Care Projects and Funds						
	Access to Care Aspirational District Projects	Bharat Heavy Electricals Limited	-	-			-
	Holistic care project	As per Annexure : (xvi)	-	166.75			166.75
	Parent Helping Parent Fund	Contribution from Parent families	20.08	7.01	0.54	1.81	25.82
	Survivor Helping Survivor Fund	Contribution from various Donors & KCK Survivors	2.53	-	-		2.53
(C)	Medical Support Projects and Funds						
	Medical Assistance Fund	As per Annexure : (xvii)	-	-			-
	AAPS&R for RB	As per Annexure : (xviii)	-	290.00			290.00
	AAPS&R for APML	As per Annexure : (xix)	-	48.43			48.43
(D)	Other Access to Care Projects and Funds						
	Patient Advocated for Clinical Research - India	Patient Advocated for Clinical Research - India	4.50	-	-		4.50
	Patient Advocated for Clinical Research - India	Pfizer Limited	5.09	-	-		5.09
(E)	Change for Childhood Cancer in India Projects and Funds						
	Change for Childhood Cancer (Scale up and Sustainability Funds	As per Annexure : (xxi)	-	84.32	5.00	89.32	-
	Sub Total (a)		111.85	4,449.61	6.41	4,391.53	176.34



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Cankids...Kidscan
Project specific Fund (FCRA)
Annexure - 'B' to Schedule '4(c)' not forming part of the financial statements as at 31 March 2025
(All amounts in ₹ lakhs, unless otherwise stated)

S.No.	Particulars	Name of donor	Opening balance As at 1 April 2024	Receipts during the year	Receivable during the year	Utilisation during the year	Closing balance As at 31 March 2025
(A)	Change for Childhood Cancer in States / CHSUs						
	Delhi NCR	As per Annexure : I(i)	-	17.14	-	16.39	0.75
	Punjab and UT Chandigarh	As per Annexure : I(ii)	-	-	-	-	-
	Uttar Pradesh and Uttarakhand	As per Annexure : III(ii)	2.30	46.61	-	48.90	-
	Bihar	As per Annexure : IV(ii)	1.19	26.35	-	27.54	-
	Gujarat	As per Annexure : IX(ii)	0.16	50.33	-	50.49	-
	Kerala	As per Annexure : XIII(ii)	8.33	-	-	8.33	-
(B)	Access to Holistic Care Projects and Funds						
	Holistic care project	As per Annexure : XV(ii)	6.90	9.65	2.80	15.81	3.54
(C)	Medical Support Projects Funds						
	Medical Assistance Fund	As per Annexure : XVII(ii)	-	-	-	-	-
	APPsandR for Retinoblastoma	As per Annexure : XVIII(ii)	-	51.72	-	42.94	8.78
(D)	Other Access to Care Projects and Funds						
	Capacity and Skill Building	Society Pediatric Oncology	12.58	33.88	-	-	46.46
	International Childhood Cancer Initiative	ST. Jude Global	241.91	-	-	100.14	141.77
	Patient Advocated for Clinical Research - India	Pfizer Limiled	-	36.11	-	4.18	31.94
	Capacity and Skill Building -Global Scholarship Program	Alsaac ST Jude Children Research	0.01	-	-	0.01	-
	Capacity and Skill Building -Senior Leadership Executive Program	Alsaac ST Jude Children Research	4.64	14.09	-	-	9.15
	Capacity and Skill Building	Jiv Daya Foundation	-	1.67	-	1.67	-
	Capacity and Skill Building	Global Project Hope Inc	-	0.86	-	0.86	-
	Capacity and Skill Building- Nurses Workshop	RFC-Phoscon	-	1.50	-	1.50	-
	Capacity and Skill Building- Nurses Workshop	ST. Jude Children Research Hospital	3.89	-	-	-	3.89
(E)	Change for Childhood Cancer in India Projects and Fund						
	Change for Childhood Cancer (Scale up and Sustainability)	As per Annexure : XX(ii)	7.16	89.54	22.18	113.81	5.07
	Sub Total (b)		289.07	379.43	24.98	488.61	204.87
	Grand total		400.91	4,829.05	31.39	4,880.14	381.22



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S. No.	Particulars	Donor	As at 1 April 2024	Received during the year	Receivable during the year	Utilised during the year	As at 31 March 2025
I(i) : INR Change for Childhood Cancer (CCC) in Delhi NCR							
a	CHSU@Safidurjung, Delhi	Galaxy Magnum Projects Private Limited	-	2.00	-	2.00	-
b	CHSU@Safidurjung, Delhi	Hamdard National Foundation (India)	-	50.00	-	50.00	-
c	CHSU@SSPGHTI Noida	Charities AID Foundation	-	1.75	-	1.75	-
d	CHSU@AIMS-IRCH	KRYFS Power Components Ltd	-	3.00	-	3.00	-
e	CHSU@AIMS-IRCH	Agiliad Technologies Pvt Ltd	-	20.00	-	20.00	-
f	CHSU@KSCB Delhi	Indorama Charitable Trust	-	24.69	-	24.69	-
g	HAH Kolla, Delhi-Snehegarh , HAH Kalawati	Kolak Mahindra Bank Limited	-	58.80	0.88	59.68	-
h	CHSU@RML Delhi	Suri Polex Industries Pvt Ltd	-	17.23	-	17.23	-
i	CHSU@GTB SGRH, SAFD Delhi	Northern Aromatics Limited	-	72.53	-	72.53	-
j	CHSU@AIMS-IRCH, Delhi	Markit India Services Private Limited	-	38.97	-	38.97	-
k	CHSU@AIMS-POD, Delhi	Manju Jain	-	10.00	-	10.00	-
	Sub-Total of I(i)		298.97	0.98	299.95	-	-
I(ii) : FCRA Change for Childhood Cancer (CCC) in Delhi NCR							
a	CHSU@AIMS-POD, Delhi	RFC-RAJ SELI COMPASSION FOUNDATION	-	14.57	-	14.57	-
b	CHSU@SSPGHTI Noida	Resonance Inc.	-	2.57	-	1.82	0.75
	Sub-Total of I(ii)		17.14	-	16.39	-	0.75
	Grand Total(I)		316.11	0.88	316.24	0.75	-
Annexure: II - Change for Childhood Cancer (CCC) in Punjab, Haryana, Himachal Pradesh, and Jammu & Kashmir							
S. No.	Particulars	Donor	As at 1 April 2024	Received during the year	Receivable during the year	Utilised during the year	As at 31 March 2025
II(i) : INR Change for Childhood Cancer (CCC) in Punjab, Haryana, Himachal Pradesh, and Jammu & Kashmir							
a	Home Away From Home - Chandigarh	Kolak Mahindra Bank Limited	-	31.31	-	31.31	-
	Sub-Total of II(i)		-	31.31	-	31.31	-
II(ii) : FCRA Change for Childhood Cancer (CCC) in Punjab, Haryana, Himachal Pradesh, and Jammu & Kashmir							
	Sub-Total of II(ii)		-	-	-	-	-
	Grand Total (II)		-	31.31	-	31.31	-



S. No. Particulars	Donor	As at 1 April 2024	Received during the year	Receivable during the year	Utilised during the year	As at 31 March 2025
III(i) : INR Change for Childhood Cancer (CCC) in Uttar Pradesh and Uttarakhand Fund						
a	CCC in Uttar Pradesh	Gokul & Lakshmi Laroia	-	-	10.00	10.00
b	CCC in Uttar Pradesh	Aditya Birla Capital Foundation	-	-	150.35	150.35
c	CCC in Uttar Pradesh	EXL Services.com India Private Limited	-	-	55.00	55.00
d	HAH Varanasi	Kotak Mahindra Bank Limited	-	-	45.08	45.08
e	CCC in Uttar Pradesh	Albino Lifesciences Pvt. Ltd	-	-	13.00	13.00
f	CHSUS@KGNU-BMT Project	Aditya Birla Capital Foundation	-	-	275.00	275.00
	Sub Total III(i)		548.43			548.43
III(ii) : FCRA Change for Childhood Cancer (CCC) in Uttar Pradesh and Uttarakhand Fund						
a	CCC in Uttarakhand	Swiss Himalayan Amity	2.30	46.61	-	48.90
	Sub Total III(ii)		2.30	46.61		48.90
	Grand Total (III)		2.30	595.03		597.33
Annexure: IV - Change for Childhood Cancer (CCC) in Bihar						
S. No. Particulars	Donor	As at 1 April 2024	Received during the year	Receivable during the year	Utilised during the year	As at 31 March 2025
IV(i) : INR Change for Childhood Cancer (CCC) in Bihar						
a	HAH-Patna	Kotak Mahindra Bank Limited	-	-	44.25	44.25
b	CHSUS@AIMS_PAT	CreditAccess India Foundation	-	-	51.58	51.58
	Sub-Total of IV(i)		95.83			95.83
IV(ii) : FCRA Change for Childhood Cancer (CCC) in Bihar						
a	CCC in States in Bihar & Other Support	Corob India Private Limited	1.19	26.35	-	27.54
	Sub-Total of IV(ii)		1.19	26.35		27.54
	Grand Total (IV)		1.19		122.18	
					123.37	
Annexure: V - Change for Childhood Cancer (CCC) in Rajasthan						
S. No. Particulars	Donor	As at 1 April 2024	Received during the year	Receivable during the year	Utilised during the year	As at 31 March 2025
V(i) : INR Change for Childhood Cancer (CCC) in Rajasthan						
a	Change for Childhood Cancer (CCC) in Rajasthan	Seriver India Pvt Ltd	42.00	45.70	-	42.00
	Sub-Total of V(i)		42.00	45.70		45.70
V(ii) : FCRA Change for Childhood Cancer (CCC) in Rajasthan						
	Sub-Total of V(ii)		-	-	-	-
	Grand Total (V)		42.00	45.70		45.70



Annexure: VI - Change for Childhood Cancer (CCC) in West Bengal

S. No. Particulars	Donor	As at 1 April 2024	Received during the year	Receivable during the year	Utilised during the year	As at 31 March 2025
VII(i) : INR Change for Childhood Cancer (CCC) in West Bengal						
a CHSU@SGCCRI, CNCL, NSH-H	Century Plyboards India Limited	-	45.31	-	45.31	-
b HAH - Kolkata-Snethioneer	Kotak Mahindra Bank Limited	-	8.45	-	8.45	-
c CHSU@KMC Kolkata	Indorama Charitable Trust	-	55.31	-	55.31	-
d CCC in states West Bengal	AGM India Advisor Pvt Ltd	-	5.61	-	5.61	-
	Sub-Total of VII(i)	187.68			187.68	
VII(ii) : FCRA Change for Childhood Cancer (CCC) in West Bengal						
	Sub-Total of VII(ii)					
	Grand Total (VI)	187.68			187.68	

Annexure: VII - Change for Childhood Cancer (CCC) in Odisha

S. No. Particulars	Donor	As at 1 April 2024	Received during the year	Receivable during the year	Utilised during the year	As at 31 March 2025
VII(i) : INR Change for Childhood Cancer (CCC) in Odisha						
a HAH- Bhuvaneswar	Kotak Mahindra Bank Limited	-	49.06	-	49.06	-
	Sub-Total of VII(i)	49.06			49.06	
VII(ii) : FCRA Change for Childhood Cancer (CCC) in Odisha						
	Sub-Total of VII(ii)					
	Grand Total (VII)	49.06			49.06	

Annexure: VIII- Change for Childhood Cancer (CCC) in Maharashtra

S. No. Particulars	Donor	As at 1 April 2024	Received during the year	Receivable during the year	Utilised during the year	As at 31 March 2025
VIII(i) : INR Change for Childhood Cancer (CCC) in Maharashtra						
a CHSU at TMH-Mumbai, BYL Nairi, Canshala Mumbai	Deutsche India Private Limited	-	315.61	-	315.61	-
b CHSU@GCH Aurangabad	Prime Securities Limited	-	10.00	-	10.00	-
c CHSU@GCH Aurangabad	Endress Hauser / Automation Instrumentation Pvt Ltd	-	3.00	-	3.00	-
d HAH Aurangabad	Kotak Mahindra Bank Limited	-	60.85	-	60.85	-
e HAH Nagpur	Kotak Mahindra Bank Limited	-	50.24	-	50.24	-
f CHSU@CFC Borivali, KEM Mumbai	Morgan Stanley India Company Private Limited	-	87.03	-	87.03	-
g CHSU@MGM Aurangabad	Indoco Remedies	-	10.00	-	10.00	-
	Sub-Total of VIII(i)	536.73			536.73	
VIII(ii) : FCRA Change for Childhood Cancer (CCC) in Maharashtra						
	Sub-Total of VIII(ii)					
	Grand Total (VIII)	536.73			536.73	



Annexure : IX - Change for Childhood (CCC) in Gujarat

S. No. Particulars	Donor	As at 1 April 2024	Received during the year	Receivable during the year	Utilised during the year	As at 31 March 2025
IX(i) : INR Change for Childhood Cancer (CCC) in Gujarat						
a CCC in Gujarat	Kotak Mahindra Life Insurance Limited		159.00			159.00
b HAH- Ahmedabad	Kotak Mahindra Bank Limited		61.96			61.96
	Sub-Total of IX(i)		220.96			220.96
IX(ii) : FCRA Change for Childhood Cancer (CCC) in Gujarat						
a CHSU@ TCI and Saachi, Surat	Relief From Cancer		0.16			0.16
	Sub-Total of IX(ii)		0.16			0.16
	Grand Total (IX)		0.16			0.16
			271.29			271.45

Annexure: X - Change for Childhood Cancer (CCC) in Madhya Pradesh

S. No. Particulars	Donor	As at 1 April 2024	Received during the year	Receivable during the year	Utilised during the year	As at 31 March 2025
X(i) : INR Change for Childhood Cancer (CCC) in Madhya Pradesh						
a CCC in States - MP	Ajim Premji Philanthropic Initiatives	37.65	396.01			345.69
	Sub-Total of X(i)	37.65	396.01			345.69
X(ii) : FCRA Change for Childhood Cancer (CCC) in Madhya Pradesh						
	Sub-Total of X(ii)					
	Grand Total (X)		37.65	396.01		345.69
						87.97

Annexure: XI - Change for Childhood Cancer (CCC) in Tamilnadu & UT Pondicherry Fund

S. No. Particulars	Donor	As at 1 April 2024	Received during the year	Receivable during the year	Utilised during the year	As at 31 March 2025
X(i) : INR Change for Childhood Cancer (CCC) in Tamilnadu & UT Pondicherry Fund						
a Change for Childhood Cancer (CCC) in Tamilnadu & UT Pondicherry Fund	HDFC Life Insurance Company Limited		40.00			40.00
	Change for Childhood Cancer (CCC) in Tamilnadu & UT Pondicherry Fund		172.00			172.00
b Change for Childhood Cancer (CCC) in Tamilnadu & UT Pondicherry Fund	Access HealthCare Services Private Limited					
c Change for Childhood Cancer (CCC) in Tamilnadu & UT Pondicherry Fund	Vridhi LLP		11.00			11.00
d Change for Childhood Cancer (CCC) in Tamilnadu & UT Pondicherry Fund	Vara Future LLP		11.00			11.00
e CHSU@Apollo Chennai, Jipmer	ELGI Equipment Ltd		59.00			59.00
f CHSU@KMC, Trichy	Amphenol Omnicomnect Pvt Ltd		6.00			6.00
g SCCC-Tamil Nadu	Data Patterns India Ltd		15.00			15.00
	Sub Total X(i)		314.00			314.00
X(ii) : FCRA Change for Childhood Cancer (CCC) in Tamilnadu & UT Pondicherry Fund						
	Sub Total X(ii)					
	Grand Total (XI)					
			314.00			314.00



Cankids...Kidscan
Annexure -I - XX to Annexure 'A&B' not forming part of the financial statements as at 31 March 2025
(All amounts in ₹ lakhs, unless otherwise stated)

Annexure: XII - Change for Childhood Cancer (CCC) in Telangana Fund

S. No. Particulars	Donor	As at 1 April 2024	Received during the year	Receivable during the year	Utilised during the year	As at 31 March 2025
XII(i) : INR Change for Childhood Cancer (CCC) in Telangana Fund						
a Change for Childhood Cancer (CCC) in Telangana Fund	Akzo Nobel India Limited	-	25.00	-	25.00	-
		Sub Total XII(i)	25.00	-	25.00	-
XII(ii) : FCRA Change for Childhood Cancer (CCC) in Tamilnadu & U.T. Pondicherry Fund						
		Sub Total XII(ii)	-	-	-	-
		Grand Total (XII)	25.00	-	25.00	-
Annexure: XIII - Change for Childhood Cancer (CCC) in Kerala						
S. No. Particulars	Donor	As at 1 April 2024	Received during the year	Receivable during the year	Utilised during the year	As at 31 March 2025
XIII(i) : INR Change for Childhood Cancer (CCC) in Kerala						
a CHSU@MVR Cancer, BMHK, MCC	GTN Enterprises Limited	-	10.17	-	10.17	-
	Kannur	Sub-Total of XIII(i)	10.17	-	10.17	-
XIII(ii) : FCRA Change for Childhood Cancer (CCC) in Kerala						
a HAH_Tiv	Mannkind Charitable Society	8.33	-	-	8.33	-
		Sub-Total of XIII(ii)	8.33	-	8.33	-
		Grand Total(XIII)	8.33	10.17	18.50	-
Annexure: XIV - Change for Childhood Cancer (CCC) in Karnataka						
S. No. Particulars	Donor	As at 1 April 2024	Received during the year	Receivable during the year	Utilised during the year	As at 31 March 2025
XIV(i) : INR Change for Childhood Cancer (CCC) in Karnataka						
a CHSU@NH, SSCH Bangalore, St. John, Morgan Stanley India Company Private Limited	-	106.02	-	-	106.02	-
	Ramaihan, Kidwai and Rainbow	Sub-Total of XIV(i)	106.02	-	106.02	-
XIV(ii) : FCRA Change for Childhood Cancer (CCC) in Karnataka						
		Sub-Total of XIV(ii)	-	-	-	-
		Grand Total(XIV)	-	106.02	106.02	-



Annexure XV - Change for Childhood Cancer (CCC) through States		As at 1 April 2024		Received during the year		Receivable during the year		Utilised during the year		As at 31 March 2025	
S. No.	Particulars	Donor									
	XVI(i) : INR Change for Childhood Cancer (CCC) through States										
a	Change for Childhood Cancer (CCC) through States	Cipla Foundation								135.49	0.27
b	Change for Childhood Cancer (CCC) through States	MK Hamied Foundation								173.55	-
c	Change for Childhood Cancer (CCC) through States	Kotak Mahindra Trustees Services Limited								10.20	-
d	Change for Childhood Cancer (CCC) through States	Space Matrix Design Consultants Pvt Ltd								12.50	-
e	Change for Childhood Cancer (CCC) through States	JB Chemicals & Pharmaceuticals Ltd								50.00	-
f	Change for Childhood Cancer (CCC) through States	Kotak Mahindra Capital Company								50.00	-
g	Change for Childhood Cancer (CCC) through States	SBI Card And Payment Services Limited								171.10	-
h	Change for Childhood Cancer (CCC) through States	Opium								142.18	-
i	Change for Childhood Cancer (CCC) through States	Kotak Securities Ltd								216.88	-
j	Change for Childhood Cancer (CCC) through States	Flipkart Foundation								14.05	-
k	Change for Childhood Cancer (CCC) through States	United Way Of Bengaluru								7.00	-
XVI(ii) : FCRA Change for Childhood Cancer (CCC) through States		Sub-Total of XVI(i)								983.22	14.32
Sub-Total of XVI(ii)										-	-
Grand Total(XV)										983.22	14.32
										988.90	



Annexure - XVI - Holistic Care Project

S. No. Particulars	Donor	As at 1 April 2024	Received during the year	Receivable during the year	Utilised during the year	As at 31 March 2025
XVI(i) INR Holistic Care Projects						
a Holistic Care Project	Surya Roshni Ltd		10.00		10.00	
b Holistic Care Project	Grand Royale Enterprises Ltd		8.05		8.05	
c Holistic Care Project	TLG India Pvt Ltd		5.00		5.00	
d Holistic Care Project	Jehan Numa Palace Hotel Pvt Ltd		4.00		4.00	
e Holistic Care Project	Ashbee System Limited		1.32		1.32	
f Holistic Care Project	Essel Surya Urja		2.50		2.50	
g Holistic Care Project	Boston Scientific Technology and Engineering Services		20.00		20.00	
h Holistic Care Project	Indra Technologies Private Limited		22.16		22.16	
i Holistic Care Project	Narendra Logistic		5.15		5.15	
j Holistic Care Project	Medipack Innovations Pvt Ltd		6.00		6.00	
k Holistic Care Project	The Boston Consulting Group (India) Pvt Ltd		20.00		20.00	
l Holistic Care Project	Kusum Charitable Trust		5.00		5.00	
m Holistic Care Project	Agiliad Technologies Pvt Ltd		6.55		6.55	
n Holistic Care Project	The Estate Of Late Soil Dinshaw Shroff		20.00		20.00	
o Holistic Care Project	Dimson's Metal Pvt Ltd		5.02		5.02	
p Holistic Care Project	Almonard Private Limited		5.00		5.00	
q Holistic Care Project	Amogha Welfare Foundation		5.00		5.00	
r Holistic Care Project	Daasraw Solutions Private Limited		2.00		2.00	
s Holistic Care Project	Multani Pharmaceuticals Ltd		2.00		2.00	
t Holistic Care Project	Sarovar Hotels Pvt Ltd		10.00		10.00	
u Holistic Care Project	Signpost India Limited		2.00		2.00	
	Sub-Total XVI(i)		166.75		166.75	
XVI(ii) FCRA Holistic Care Project						
a Holistic Care Project	Pallium India INC	0.03		0.03		
b Holistic Care Project	Give Foundation	0.79		0.79		
c Holistic Care Project	Milaap Social Venture	1.38		1.38		
d Holistic Care Project	UKFC-Cycle For Gold	0.10		0.10		
e Holistic Care Project	UK Fund for Charities	-		2.80		
f Holistic Care Project	Giving Impetus to Voluntary Efforts	-		2.95		
g Holistic Care Project	Brown University - Relief From Cancer	1.03		2.52		
h Holistic Care Project	Geelika Jain	3.57		3.57		
i Holistic Care Project	Devika Mishra	-		0.64		
	Sub-Total XVI(ii)	6.90	9.65	2.80	15.81	
	Grand Total (XVI)	6.90	176.39	2.80	182.56	3.54



Annexure: XVII - Medical Assistance Fund



Annexure - XX - Change for Childhood Cancer (Scale up & Sustainability) Fund

S. No.	Particulars	Donor	As at 1 April 2024	Received during the year	Receivable during the year	Utilised during the year	As at 31 March 2025
XX(i)	INR Scale up & Sustainability Funds						
a	Change for Childhood Cancer (Scale up & Sustainability) Fund	Arvind Narainaswami and Family	-	5.00	-	5.00	
b	Change for Childhood Cancer (Scale up & Sustainability) Fund	Ajay and Punita Lal	-	2.50	-	2.50	
c	Change for Childhood Cancer (Scale up & Sustainability) Fund	Vikram Sud	-	7.00	-	7.00	
d	Change for Childhood Cancer (Scale up & Sustainability) Fund	Anshul Aggarwal	-	5.00	-	5.00	
e	Change for Childhood Cancer (Scale up & Sustainability) Fund	Poonam Bagai	-	11.04	-	11.04	
f	Change for Childhood Cancer (Scale up & Sustainability) Fund	Angad Bagai	-	1.00	-	1.00	
g	Change for Childhood Cancer (Scale up & Sustainability) Fund	Ravi Mehrotra	-	5.00	-	5.00	
h	Change for Childhood Cancer (Scale up & Sustainability) Fund	Roshanlal Public Charitable Trust	-	11.00	-	11.00	
i	Change for Childhood Cancer (Scale up & Sustainability) Fund	Rahul Mookerjee	-	-	-	5.00	
j	Change for Childhood Cancer (Scale up & Sustainability) Fund	Seema Tulsiyan	-	5.04	-	5.04	
k	Change for Childhood Cancer (Scale up & Sustainability) Fund	Akram Bagai	-	5.00	-	5.00	
l	Change for Childhood Cancer (Scale up & Sustainability) Fund	R.S. Gupta & Minnie Swarup Gupta	-	3.00	-	3.00	
m	Change for Childhood Cancer (Scale up & Sustainability) Fund	Sunil Duggal	-	5.00	-	5.00	
n	Change for Childhood Cancer (Scale up & Sustainability) Fund	S N Dhawan & Co. LLP	-	1.25	-	1.25	
o	Change for Childhood Cancer (Scale up & Sustainability) Fund	Salish Dhawan	-	5.00	-	5.00	
p	Change for Childhood Cancer (Scale up & Sustainability) Fund	Vinali Kastiya	-	3.00	-	3.00	
q	Change for Childhood Cancer (Scale up & Sustainability) Fund	Pavan Bagai	-	2.00	-	2.00	
r	Change for Childhood Cancer (Scale up & Sustainability) Fund	Michael Jude Fernandes	-	2.50	-	2.50	
s	Change for Childhood Cancer (Scale up & Sustainability) Fund	Perowshaw Dhunjishaw Bolton Charities	-	5.00	-	5.00	
		Sub-Total XX(i)	-	84.32	5.00	89.32	



Annexure - XX - Change for Childhood Cancer (Scale up & Sustainability) Fund

S. No.	Particulars	Donor	As at 1 April 2024	Received during the year	Receivable during the year	Utilised during the year	As at 31 March 2025
XX(i) FCRCA Change for Childhood Cancer (Scale up & Sustainability) Fund							
a	Change for Childhood Cancer (Scale up & Sustainability) Fund	Ram Nayak - UKFFC	1.01	-	10.54	11.55	-
b	Change for Childhood Cancer (Scale up & Sustainability) Fund	Chris Williams - UKFFC	-	4.96	-	4.96	-
c	Change for Childhood Cancer (Scale up & Sustainability) Fund	Piyush & Ruchira Gupta	-	12.24	-	12.24	-
d	Change for Childhood Cancer (Scale up & Sustainability) Fund	Seema Tulsijyan	0.24	-	-	0.24	-
e	Change for Childhood Cancer (Scale up & Sustainability) Fund	Roopak Taneja	-	8.40	-	8.40	-
f	Change for Childhood Cancer (Scale up & Sustainability) Fund	Ankit Sood - Relief From Cancer	2.09	4.18	-	6.27	-
g	Change for Childhood Cancer (Scale up & Sustainability) Fund	Harit and Reena Talwar - Relief From Cancer	0.96	2.07	-	3.02	0.01
h	Change for Childhood Cancer (Scale up & Sustainability) Fund	Ashish Shastri -UKFFC	-	-	6.59	-	6.59
i	Change for Childhood Cancer (Scale up & Sustainability) Fund	Godbole Family-Relief From Cancer	2.86	-	5.05	-	2.86
j	Change for Childhood Cancer (Scale up & Sustainability) Fund	Joydeep Sangupta	-	8.00	-	8.00	-
k	Change for Childhood Cancer (Scale up & Sustainability) Fund	Sameer Soota/ Anjali Soota	-	8.23	-	8.23	-
l	Change for Childhood Cancer (Scale up & Sustainability) Fund	RFC-Rohet Tolani	-	41.46	-	41.46	-
	Sub-Total XX(i)		7.16	89.54	22.18	113.81	5.07
	Grand Total (XX)		7.16	173.87	27.18	203.14	5.07



Cankids...Kidscan**Annexure -'C' to Note '17' not forming part of the financial statements as at 31 March 2025***(All amounts in ₹ lakhs, unless otherwise stated)***Direct Support to beneficiary**

Particulars	For the year ended 31 March 2025			For the year ended 31 March 2024		
	INR	FCRA	Total	INR	FCRA	Total
Medical Projects & Support Program	1,670.42	125.65	1,796.07	1,217.28	217.52	1,434.80
Treatment Support Program	241.35	2.09	243.44	213.89	10.95	224.84
Pediatric Palliative Care	6.18	-	6.18	3.82	3.45	7.28
Pediatric Psycho-Oncology Program	10.40	0.29	10.69	5.66	0.32	5.97
Education Program	95.52	1.10	96.62	106.35	2.71	109.06
Total	2,023.87	129.13	2,153.00	1,547.01	234.95	1,781.95



CANKIDS OFFICES & CARE CENTRES

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

CARE CENTRES

North Region

State Care Coordination Centres (SCCC)

Uttar Pradesh - SCCC & Sapno Ka Ghar HAH, Lucknow - 201, Sector-6B, Vrindavan Yojna, Telibagh, Lucknow - 226029

Bihar - SCCC & Sneh Niwas HAH, Patna - B-200, Police Colony, Anisabad, Patna - 800002, Helpline: 8860177017

Punjab & UT - SCCC & Sadda Veda HAH, Chandigarh

Near Mehra Dhaba, Village Majra, Tehsil Kharar, SAS Nagar (Mohali), Punjab - 140110

Phone: +91 7888729707, 9953590210, 8264874723, 9682565132

Regional Care Coordination Centre (RCCC)

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

Pediatric Palliative Care

Subhita Pediatric Palliative Care Centre (PPCC), Delhi

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

Other Care Centres

Snehograh Home Away From Home (HAH), Kotla - Delhi

1463/H, Street No. 5, Wazirnagar, Kotla Mubarakpur, New Delhi - 110003, Phone: 011-23340004, 7654137597

Snehsharan HAH, Kalawati - Delhi - Quarter No. 18, Telegraph, P.K. Road, New Delhi - 110001, Phone: +91-9958560881

Snehashish HAH, Varanasi - AN-287, Susuwahi, Varanasi, Uttar Pradesh - 221011

East Region

State Care Coordination Centre (SCCC)

Odisha - SCCC & Snehara Ghara HAH, Bhubaneswar - GA-805, K/8, Ghatika, Kalinga Nagar, Bhubaneswar - 751003

Regional Care Coordination Centre (RCCC)

RCCC - East & Snehoneer HAH, 460/1, 4th Road, Ajay Nagar, Opp. Good Mission Education Church, Purba Jadavpur, Kolkata - 700075, Phone: +91-8860316404

West Region

State Care Coordination Centre (SCCC)

Gujarat - SCCC & Subhag Awas HAH, Ahmedabad

No. 2, Civil Hospital Road, Ganpat Colony, Bardolpura, Girdhar Nagar, Ahmedabad - 380016 Phone: +91-9953591571, 9712613087

Madhya Pradesh - SCCC & Sukh Anand HAH, Bhopal

157, Sector-2A, Saket Nagar, Bhopal - 462026

Regional Care Coordination Centre (RCCC)

RCCC - West & CanShala Mumbai, CanKids KidsCan, Jagannath Bhatankar Municipal School,

Near Elphinstone Bridge, Parel, Mumbai - 400012, Phone: (022) 24712923 Maharashtra Helpline: 9152735010

Other Care Centres

Sneh Kunj HAH, Aurangabad

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

Sneh Sansaar HAH, Nagpur

Plot No. 201, Perfect Coop Housing Society, Pannase Layout, Krishna Classic, Indraprastha Nagar, Bhamti, Nagpur - 440022

South Region

State Care Coordination Centre (SCCC)

Karnataka - SCCC & Salil Niwas HAH, Bengaluru

No. 52, Reliable Lifestyle Layouts, Haralur Village, Varthur Hobli, Bengaluru East Taluk - 560102, Phone: 080-41627749, 9444096660

Regional Care Coordination Centre (RCCC)

RCCC - South, Snehalaya HAH & CanShala Chennai, GRN Sarvesh, New No. 98, Old No. 5, South West Boag Road, T. Nagar, Chennai - 600017

Phone: +91-9444096660, 044-24413531

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