

IMPACT ASSESSMENT REPORT FOR CSR PROJECTS UNDERTAKEN IN

FY 2022-23

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Submitted by

NuSocia (registered as In2x Sustainability Advisors Pvt Ltd)



The Clearing Corporation of India Limited (CCIL) launched a series of projects in FY 2022-23 aimed at expanding healthcare access and providing financial aid for cancer and eye care treatment across eight states in India.



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List of Abbreviations

AKITF	Dr. Arun Kurkure Initiation and Treatment Fund
ASHA	Accredited Social Health Activists
ВМС	Balco Medical Centre
CCF	Cancer Cure Fund
CCHRC	Cachar Cancer Hospital & Research Centre
CCIL	The Clearing Corporation of India Limited
CSR	Corporate Social Responsibility
СТ	Computed Tomography
ECG	Electro Cardio-Gram
DALYs	Disability- Adjusted Life Years
ICMR	Indian Council of Medical Research
ICS	Indian Cancer Society
КСН	Kailash Cancer Hospital
KIIs	Key Informant Interviews
МРММСС	Mahamana Pandit Madan Mohan Malaviya Cancer Centre
MRF	Medical Research Foundation
MRI	Magnetic Resonance Imaging
OECD DAC	Organisation for Economic Co-operation and Development's Development Assistance Committee
RCCs	Regional Cancer Centers
REECIS	Relevance, Effectiveness, Efficiency, Coherence, Impact, Sustainability
SDG	Sustainable Development Goal
TCCCs	Tertiary Cancer Care Centres
TMC	Tata Memorial Centre
WIA	Women's Indian Association

Executive Summary

India faces significant challenges in cancer care and eye health due to its vast population, limited healthcare resources, and uneven access to medical services. In 2022, India reported 1.46 million new cancer cases, with childhood cancers representing 4% of these and disproportionately affecting those from low-income families¹. Meanwhile, India is home to 62 million people with visual impairment, including 8 million cases of blindness, where 62.6% stem from preventable conditions like cataracts. These critical health challenges highlight the need for accessible cancer and eye care services, particularly in rural and underserved areas.

To address these pressing issues, The Clearing Corporation of India Limited (CCIL) launched a series of projects in FY 2022-23 aimed at expanding healthcare access and providing financial aid for cancer and eye care treatment across eight states in India. Partnering with Tata Memorial Centre, Indian Cancer Society, Sankara Nethralaya (a unit of Medical Research Foundation), and Cancer Institute (WIA), CCIL's Corporate Social Responsibility (CSR) initiatives provided free diagnostic and treatment services to marginalized groups, aiming to reduce healthcare disparities in these critical areas.

CCIL's project with the Tata Memorial Centre supported 234 children and young adults with initial diagnosis and treatment through emergency funding, which provided essential financial support for early detection and treatment and holistic support services, including accommodation and nutrition. In addition, Dr. Arun Kurkure Initiation and Treatment Fund (AKITF) and the Cancer Cure Fund (CCF) established by the Indian Cancer Society helped provide cancer treatments to 639 patients, focusing on reducing financial barriers to accessing early treatment. Both initiatives helped address financial and geographic barriers to cancer treatment, contributing to improved survival rates by reducing treatment dropout rates and ensuring continuity of care for economically disadvantaged patients.

For eye care, CCIL's partnership with the Medical Research Foundation facilitated free surgical treatments for 500 beneficiaries suffering from complicated eye disorders, primarily targeting rural senior citizens and children at Sankara Nethralaya's facilities in Tamil Nadu and West Bengal. This initiative focused on critical, life-changing surgeries for conditions like diabetic retinopathy and retinal detachment, which, if untreated, could lead to irreversible blindness. Additionally, outreach efforts such as eye screening camps and telemedicine-based follow-ups ensured sustained access to care for patients in remote regions.

At the Cancer Institute (WIA) in Tamil Nadu, CCIL supported free treatment and comprehensive cancer care for 841 women from economically marginalized backgrounds. This project focused on treating prevalent cancers among women, including breast, ovarian, and uterine cancers. By covering medical treatment costs, food, and accommodation, the initiative addressed the unique healthcare barriers faced by indigent women, creating a supportive environment that reduced isolation and promoted resilience through psycho-social support programs.

These initiatives, reaching over 2,200 individuals, exemplify CCIL's commitment to improving healthcare equity through financial aid, capacity-building, and partnerships with medical institutions across India. CCIL's focus on reducing financial strain, providing advanced medical equipment, and engaging local communities has not only directly benefited individual patients but also enhanced healthcare infrastructure in underserved areas. This holistic approach has facilitated early diagnosis, promoted treatment adherence, and built awareness within communities, contributing to long-term improvement in healthcare outcomes for cancer and eye care in India.

Through these targeted projects, CCIL has made a significant impact on healthcare access for vulnerable populations, establishing a model of CSR-driven healthcare interventions that addresses India's cancer and eye care challenges with sustainable solutions.



1 INTRODUCTION

1.1. Background:

Growing Burden of Cancer in India

Cancer has become a pressing public health crisis in India, contributing significantly to the nation's disease burden and mortality rates. Globally, cancer ranks as the second leading cause of death, responsible for approximately 9.6 million fatalities in 2018². In India, it accounts for over 5% of the total disease burden. The projected number of new cancer cases in India reached 1,461,427 in 2022, with a crude incidence rate of 100.4 per 100,000 individuals³. This translates to an alarming reality where 1 in 9 people in the country is expected to receive a cancer diagnosis during their lifetime.

While adult cancer cases are prevalent, childhood cancer is also a serious concern, representing approximately 4% of total cancer cases among children aged 0–14. The highest incidence rates have been reported by the Population-Based Cancer Registry in Delhi, with boys and girls having age-adjusted rates of 203.1 and 125.4 per million, respectively⁴. In this age group, eye cancers and lymphoid leukemia are leading contributors to disability-adjusted life years (DALYs), indicating the profound impact of these cancers on children's health and quality of life. Despite advances in pediatric cancer care, significant barriers persist from diagnosis through treatment, including a lack of comprehensive national data on childhood cancer incidence, survival, and morbidity. Moreover, healthcare policy has traditionally prioritized other pressing issues, such as reproductive health, infectious diseases, and malnutrition, leaving limited attention and resources for childhood cancers.

The incidence of cancer in India also reveals a distinct gender disparity; among males, head and neck, gastrointestinal, and lung cancers account for 50% of cases, while in females, breast, cervix uteri, and gastrointestinal cancers are prevalent. Unfortunately, the prognosis for cancer patients is grim, with around 60% of those diagnosed ultimately succumbing to the disease⁵. Over the past two decades, India has witnessed a concerning 28% increase in its cancer burden. Yet, access to quality cancer care remains a critical challenge, as many individuals face barriers to treatment, including high costs and late-stage diagnosis, largely due to inadequate screening and healthcare infrastructure. These factors contribute to a high case-fatality ratio and underscore the urgent need for improved cancer prevention, early detection and prevention, and treatment strategies across all age groups in the country.

Challenges in Eye Care in India

India faces a significant burden of blindness and vision impairment, with around 62 million visually impaired individuals and 8 million blind people, accounting for nearly a quarter of the global total⁶. As the population ages, the prevalence of vision diseases is expected to increase.

²https://www.weforum.org/agenda/2024/01/future-of-cancer-care-exploring-evidence-based-learnings-from-northeast-india/ ³https://ncdirindia.org/display/wcd.aspx

https://www.thelancet.com/journals/lansea/article/PIIS2772-3682(23)00095-1/fulltext

⁵https://www.ey.com/content/dam/ey-unified-site/ey-com/en-in/insights/health/documents/ey-making-quality-cancer-care-more-accessible-and-affordable-in-india.pdf

⁶https://health.economictimes.indiatimes.com/news/industry/visioning-tomorrow-expectations-of-the-eye-care-industry-from-the-union-budget-2024/107182768





Fortunately, major causes of vision loss—such as cataracts, refractive errors, glaucoma, and diabetic retinopathy—can often be prevented through early detection and intervention. However, two critical challenges in eye care continue to persist, inadequate facilities and limited professional medical access. With only about 15,000 ophthalmologists and 45,000 optometrists available for a population exceeding 1.32 billion, the shortage of medical professionals severely hampers the screening and treatment of eye ailments⁷.

Therefore, the need for financial support for organizations working in cancer and eyecare is critical. Both cancer and eye care organizations require adequate funding to enhance their diagnosis, treatment, and prevention capabilities. This support is essential to ensure that all individuals can access timely and effective treatment regardless of socio-economic status. Financial backing can facilitate the establishment of new facilities, the procurement of advanced equipment, and the training of healthcare professionals. By investing in these areas, we can significantly improve the quality of care provided to patients.

1.2. Project Description

In response to India's growing burden of cancer and eye diseases, The Clearing Corporation of India Limited (CCIL) has launched a significant Corporate Social Responsibility (CSR) initiative. In FY 2022-23, CCIL collaborated with four non-profit organizations to enhance treatment facilities across eight states, demonstrating its commitment to public welfare and healthcare accessibility.

As a leading financial institution specializing in clearing and settlement services for various financial markets, CCIL actively allocates resources out of its CSR Corpus to improve access to essential healthcare services, particularly in cancer and eye care.

During this fiscal year, CCIL initiated four transformative projects aimed at bolstering cancer and eye care services nationwide. These efforts reflect CCIL's dedication to addressing the healthcare needs of vulnerable populations and fostering long-term access to critical services throughout India, contributing to the Sustainable Development Goal (SDG-3).

S.No	Projects	Implementation Partners	Locations	No. of Beneficiaries
1	Contribution to emergency fund/seed fund to initiate cancer treatment and Complete financial adoption of children / young adult for cancer treatment	Tata Memorial Centre, ImpaCCT Foundation	Mumbai, Maharashtra	234
2	The Indian Cancer Society – Dr. Arun Kurkure Initiation and Treatment Fund (AKITF)	Indian Cancer Society (ICS)	Maharashtra, Chhattisgarh, Assam, Tamil Nadu, Andhra Pradesh, Gujarat, Uttar Pradesh Maharashtra, Tamil	639
	Cancer Cure Fund (CCF)		Maharashtra, Tamil Nadu and Uttar Pradesh	

⁷https://www.expresshealthcare.in/blogs/guest-blogs-healthcare/challenges-and-opportunities-of-ophthalmic-care-in-india/411165/





3	Support for complicated major eye surgeries performed on indigent patients	Medical Research Foundation (Sankara Nethralaya)	Tamil Nadu and West Bengal	500
4	Free of Cost Cancer Treatment for Women	Cancer Institute (WIA)	Tamil Nadu	841



2 Research Methodology

CCIL has engaged NuSocia, an impact advisory firm, to assess four projects implemented by various non-profit organizations during FY 2022-23. This assessment aims to evaluate the impact of these projects and determine how effectively they have met their outlined objectives.

2.1. Research Objectives

- To assess the impact of contributions to the emergency/ seed fund that supports the initiation of cancer treatment and provides complete financial adoption for children and young adults undergoing cancer treatment.
- To evaluate the impact of cancer treatment contributions through the Dr. Arun Kurkure Initiation and Treatment Fund (AKITF) and the Cancer Cure Fund (CCF).
- To assess the impact of providing free ophthalmic care, including surgery for complicated eye disorders, to indigent patients in rural areas and across the country.
- To evaluate the impact of providing free cancer treatments—such as surgery, radiotherapy, and chemotherapy—along with food and accommodation, for indigent women suffering from breast, ovarian, or uterine cancer.

2.2. Research Framework

The impact assessment follows the REECIS Framework, developed by the OECD DAC (Organisation for Economic Co-operation and Development's Development Assistance Committee). This framework provides a comprehensive approach to evaluating projects by focusing on the following key elements:

- **Relevance:** Evaluating the necessity and appropriateness of the project within its broader context.
- **Effectiveness:** Assessing the degree to which the project's objectives have been achieved.
- **Efficiency:** Examining the optimal use of resources, including cost, time, and effort.
- **Coherence:** Ensuring the intervention aligns with and complements other relevant initiatives to foster consistency.
- **Impact:** Determining the broader effects of the intervention, including both intended and unintended outcomes.
- **Sustainability:** Assessing the likelihood of the project's long-term success and its lasting impact.

The REECIS Framework provides a structured methodology for systematically assessing these critical aspects during the impact evaluation process.







Source : OECD DAC : Organization for Economic Co-operation and Development's (OECD)

Development Assistance Committee (DAC)

2.3. Sampling

S.No	Projects	Implementation Partners	Surveys	No. of Beneficiaries
1	Contribution to emergency fund/seed fund to initiate cancer treatment and Complete financial adoption of children / young adults for cancer treatment	Pediatric Care Surgeon- 1 Medical Social Worker/Counsellor- 1 Impact Foundation -1 Total KIIs- 3	60	Hospital visits
2	The Indian Cancer Society – Dr. Arun Kurkure Initiation and Treatment Fund (AKITF) and Cancer Cure Fund (CCF)	Head of Oncology-6 MSW/Counsellor 6 ICS team 2 Total Kils-14	142	Hospital visits to 3 hospitals in Maharashtra, Uttar Pradesh, and Tamil Nadu; online discussions
3	Support for complicated major eye surgeries performed on indigent patients	Hospital staff 2 Medical Research Foundation 2 Surgeon 2 Total KIIs- 6	125	Hospital visits and online discussions
4	Free of Cost Cancer Treatment for Women	Cancer Institute -1 Total KII-1	216	Online discussions





2.4. Data Collection

Data collection for this program was carried out using the following methods:

- **Desk Research:** Relevant materials, such as annual reports, assessments, and documents provided by implementation partners, were reviewed. Additionally, secondary data from online sources was incorporated.
- **Key Informant Interviews (KIIs) and Surveys:** In-depth interviews were conducted using a tool with open-ended questions. Participants, including medical social workers, hospital staff, and implementation teams, were interviewed either in person or virtually to evaluate the project's effectiveness. Surveys were also conducted with patients and their family members/caretakers.



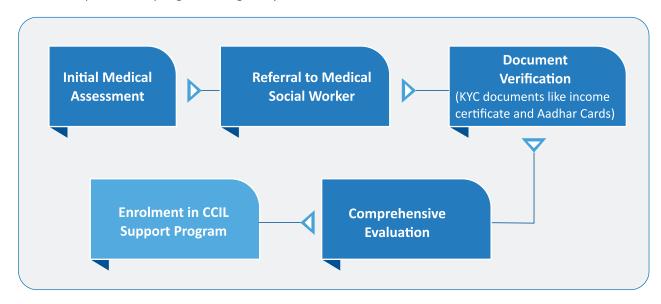
3 Findings & Analysis

3.1 Impact of Contribution to Emergency Fund/Seed Fund to initiate cancer treatment and complete financial adoption of children/young adults for cancer treatment

Established under the guidance of the Tata Memorial Center in 2010, the ImpaCCT Foundation Society aims to provide holistic support for childhood cancer patients, offering comprehensive services from diagnosis to treatment. The foundation also offers assistance through staff specializing in nutrition, social work, supplementary aid, counseling, and residential support for both patients and their caregivers. A significant challenge faced by the Tata Memorial Center is that the majority of its patients come from low-income backgrounds, struggling to access quality medical care due to limited financial resources. This often results in treatment discontinuation, contributing to low survival rates among patients.

Emergency Fund/Seed Fund to initiate cancer treatment

With the support of the Emergency Fund/Seed Fund provided by CCIL, the ImpaCCT Foundation has assisted a total of 101 patients (aged 0–16 years), by providing Rs. 50,000 per patient directly to the hospital to cover essential diagnostic procedures such as blood tests, X-rays, ECGs, and PET/CT/MRI scans necessary for cancer screening. Beneficiaries were selected based on family background and income as part of the program's eligibility criteria.



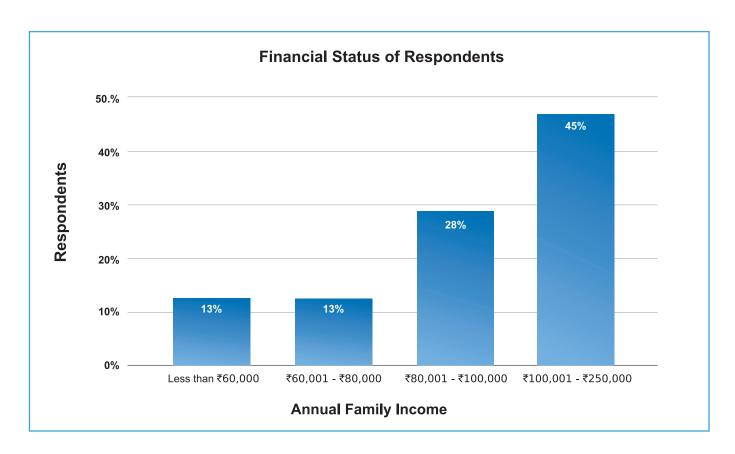
Accessing the emergency fund at Tata Memorial Center (TMC) involved several steps to ensure prompt assistance. Upon arrival, families underwent an initial assessment, followed by a referral to the social worker department, where a comprehensive evaluation of their psycho-social-economic situation was conducted. Social workers then guided families through the application process, assisting with paperwork and bank account setup. Once eligibility was confirmed, families were enrolled in the CCIL Emergency Fund/Seed Fund Support Program, which provided financial aid for treatment and additional support services, including nutrition, education, counseling, and accommodation.





To assess the project's impact, the study gathered insights through key informant interviews and surveys with a range of stakeholders, including parents and caregivers of cancer patients, medical professionals, social workers, counselors, and implementation partners. In alignment with policy guidelines, direct interactions with the child patients themselves were not conducted, ensuring ethical compliance and a focus on feedback from those directly involved in the patients' care and support. This approach provided a comprehensive understanding of the project's reach, effectiveness, and areas for improvement from diverse perspectives.

It was observed that all 60 respondents came from low-income backgrounds in Mumbai, Maharashtra, with annual family incomes ranging from Rs. 60,000 to Rs. 2,50,000. Their family members were primarily employed as daily wage earners, manual laborers, vendors, and factory workers.



During interactions with the beneficiaries' families, it was found that the most common type of cancer diagnosed among them was blood cancer. The emergency fund played a key role in supporting patients who, otherwise, could not afford treatment. It enabled many to receive early detection and diagnoses for timely care, which is vital for better health outcomes, particularly in pediatric oncology. Social workers were instrumental in assisting patients with registration, conducting family profiling to assess socio-economic conditions, and offering counseling to parents. They also organized social support meetings to address concerns and clarify families' doubts.

Of the survey respondents, over 91% of families acknowledged that they had previously been unaware of CCIL's Emergency Fund/Seed Fund and lacked knowledge of relevant state health/insurance schemes and programs. However, they expressed deep gratitude, noting that the fund significantly eased their financial and emotional burdens. This support enabled them to focus on their children's treatment without the additional stress of financial worries.

With the support of CCIL funding, various positive changes have been observed in the beneficiaries' health.





Numerous examples exist where children in poor health receive timely treatment and diagnosis, greatly improving their chances of survival. Consequently, the fund has directly contributed to higher survival rates among these patients.

"The initial stage of cancer requires funds for initial detection and diagnosis to understand the patient's condition. The Emergency Fund was crucial in providing financial assistance to initiate treatment."

- Coordinator at the ImpaCCT Foundation.

"The cost of cancer treatment is so high that the majority of people can't afford it. Thanks to the Emergency Fund, many sick children are now receiving treatment free of charge."

- Pediatric Oncologist at TMC.

Complete Financial Adoption of Children/Young Adults for Cancer Treatment

The Emergency Fund/Seed Fund played a vital role in the early detection and diagnosis of cancer among patients. However, in many cases, the cost of further treatment exceeded the amount available through the fund. As a result, the ImpaCCT Foundation initiated complete financial adoption to provide additional treatment and counseling to such children and youth.

Over the last year, 133 children benefited, with their treatment expenses ranging from Rs. 1 lakh to Rs. 3 lakh being covered.

Most of the families reported receiving outstanding support from the medical and administrative staff at Tata Memorial Center. From patient treatment and ward visits to assistance in addressing their needs, the staff provided not only emotional support but also crucial guidance on available accommodation facilities for families. The center's dedication to improving early diagnosis, along with investments in nutritional and psychological support services, has significantly enhanced the success of cancer treatment among children. Additionally, medicines were offered at subsidized rates of 25% to 30%, which is particularly beneficial for low-income families from rural areas, where access to healthcare is often limited.

"The financial support has greatly improved the overall quality of life for our child and ourselves. With reduced financial stress, we can focus more on our child's emotional and physical well-being."

- Parent, Maharashtra.

In addition to offering financial support for comprehensive treatment, social support meetings have played a vital role in helping families navigate emotional health challenges and societal stigma. These gatherings, combined with financial assistance, have facilitated the successful treatment of their children. Furthermore, to ensure ongoing health and well-being, post-treatment follow-up consultations are available for up to 5 years. This approach helps prevent future medical complications and supports patients throughout their long-term care journey.

"If any assistance is needed to understand the treatment process, we provide counseling, and for applications for financial aid, we guide parents through available schemes and help them plan for treatment in every way. Regular monitoring and counseling meetings are also conducted for parents,"

- Social Worker at TMC.





A total of 234 children received support through the emergency fund/seed fund to initiate cancer treatment and Complete financial adoption of children / young adults for cancer treatment, which worked together to cover their treatment costs. The Emergency Fund/Seed Fund addressed early diagnostic and treatment expenses, while the Complete Financial Adoption program extended support for ongoing care. These programs ensured continuous treatment for children aged 7 months to 15 years, successfully achieving their goal of facilitating early diagnosis and providing necessary therapy. Families expressed profound gratitude, describing the assistance as transformative. By alleviating the financial burden, the programs not only granted access to better healthcare but also enabled families to focus fully on their children's recovery and well-being without the added stress.

The importance of CCIL's support is clear from the difficult alternatives families would have faced without it. Nearly 34% of families reported that they would have taken out loans to cover treatment costs, 32% said they would have been forced to sell their ornaments or assets, and 22% would have relied on extended family or friends for financial help. Around 6% stated that they would have abandoned the treatment if they had not received support. This support played a critical role in shielding families from severe financial hardship, allowing them to focus on their children's health.

"My 14-year-old daughter was diagnosed with glioma. We initially spent Rs. 25,000 at a local hospital, borrowing money from relatives and selling my wife's ornaments to cover expenses. I earn about Rs. 8,000/month and was extremely anxious about the treatment costs. At Tata Memorial Centre, the social worker spoke with my wife and me in detail, conducted a comprehensive psycho-social-economic assessment, and made us feel comfortable by answering all our questions. The social worker filled out the patient assessment form, helped us set up a bank account, and guided us through the process. After a complete evaluation of our documents, we were enrolled in the CCIL Emergency Support Program, which covered diagnostic procedures and additional support for nutrition and accommodation. This made all the difference."- Parent, Maharashtra.

However, a significant gap has been identified in the awareness and understanding among patients and their families regarding the CCIL Emergency Fund, Complete Financial Adoption, and other essential pediatric cancer support programs. Notably, 38% of respondents emphasized the urgent need for enhanced outreach efforts to increase awareness and educate families on available resources. By expanding education on these support options, families can be better empowered to access the help they need when facing the challenges of pediatric cancer.

In addition to raising awareness, respondents offered several key recommendations for improving program effectiveness. Suggestions included faster application processing, increased financial aid for the Emergency Fund/Seed Fund, greater transparency in the application process, and more effective follow-up and communication methods. Respondents also proposed collaborations with top-tier hospitals across regions, as well as support for travel and accommodation to alleviate logistical challenges. Addressing these areas is crucial for maximizing the impact of the program, ensuring that all eligible families are informed about and able to access the assistance available to them.





ANALYSIS

Parameters	Description
Relevance	In India, where cancer rates among children aged 0-14 continue to rise ⁸ , early detection and diagnosis are critical for effective treatment. Unfortunately, many low-income families struggle to afford the high costs of diagnosis and continued care, highlighting the urgent need for swift and comprehensive financial support. Although various central and state government schemes and programs exist, it often takes a long time (two weeks to a month) for financial aid to reach families, particularly in remote areas.
	To tackle this issue, the project aims to support beneficiaries, their families, and medical institutions, aligning with national policies. Its holistic approach addresses the diverse circumstances of families by providing financial aid to reduce out-of-pocket expenses, therapy, accommodation support, and assistance for all types of pediatric cancers.
Effectiveness	The project has assisted 234 children, effectively achieving its goal of helping families in need of access to cancer diagnosis, treatment, and care. Furthermore, the counseling services provided by medical social workers have been vital in supporting children and their families through the emotional and psychological challenges that come with a cancer diagnosis.
Efficiency	Of the Rs. 300 lakh granted to the ImpaCCT Foundation by CCIL, 50 lakhs were allocated to the Emergency Fund, assisting 101 children with an average support amount of Rs. 49,505 per child. The remaining 250 lakh were assigned to Complete Financial Adoption of 133 patients, with an average expenditure of Rs. 1,87,970 per beneficiary. All funds were utilized during the project's duration, solely for patient support, with no portion allocated to administrative costs.
Coherence	The Emergency fund / seed fund to initiate cancer treatment and Complete financial adoption of children / young adult for cancer treatment initiatives play a crucial role in addressing the gaps in existing healthcare programs offered by central and state governments. Ayushman Bharat and State Health Insurance often face slow processing times and may limit the types of treatments and diagnostics they cover. The amount will be disbursed only after the cancer diagnosis has been confirmed, not before it.
	By providing timely financial assistance, these initiatives create a vital safety net for families in need until they can secure additional support from government programs or private donations.

 $^{^8} https://www.thelancet.com/journals/lansea/article/PIIS2772-3682(23)00095-1/fulltext\#: \sim: text=According \% 20 to \% 20 a \% 20 recent \% 20 National, for \% 20 4.0 \% 25 \% 20 of \% 20 all \% 20 cancers. \& text=8. \& text=The \% 20 Population \% 20 Based \% 20 Cancer \% 20 Registry, 125.4 \% 20 per \% 20 million \% 20 in \% 20 girls.$





Impact	In addition to financial aid, emotional, physical, and psychological support was provided to 234 children (ages 0-15 years) and their families or caretakers through regular counseling sessions and assistance with accommodation arrangements. This comprehensive approach seeks to enhance overall health outcomes at the societal level and raise awareness among the general public.
Sustainability	From an economic standpoint, the project relies on donor funding to finance diagnosis and treatment services until patients can tap into government health programs or secure further support from other donors, making it dependent on ongoing external contributions. Despite this reliance, the project has achieved positive long-term health outcomes by enhancing children's survival rates and easing the financial strain on families, thereby fostering sustainable, long-term benefits.

3.2. Impact of the Indian Cancer Society-Dr. Arun Kurkure Initiation and Treatment Fund (AKITF) and Cancer Cure Fund (CCF)

The Indian Cancer Society (ICS), established in 1951, is a pioneering non-profit organization committed to combating cancer in India through prevention, early detection, treatment, and support services. Over the years, ICS has led efforts to control cancer by advocating for public health policies, raising cancer awareness, providing financial assistance to patients, and promoting cancer research.

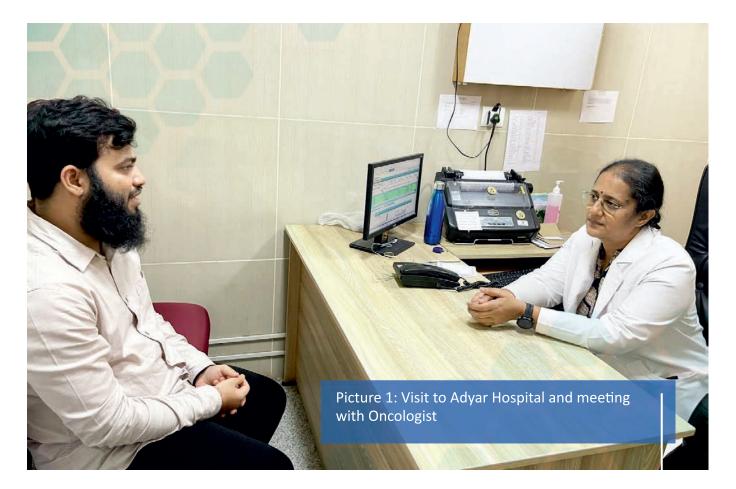
Under its Cancer Cure initiative, ICS runs two critical programs: the Dr. Arun Kurkure Initiation and Treatment Fund (AKITF) and the Cancer Cure Fund (CCF). These programs address the financial barriers that underprivileged patients often encounter when seeking cancer treatment. Supported by The Clearing Corporation of India Limited (CCIL), the Cancer Cure project facilitates diagnostic and treatment support across nine hospitals in seven states.

Through the AKITF intervention, hospitals were provided ₹25,000 per beneficiary, supporting 621 economically disadvantaged patients. This assistance covered initial diagnostic and treatment costs, enabling patients to start cancer treatment while seeking additional funding. Meanwhile, the Cancer Cure Fund (CCF) provided up to Rs. 5 lakh in financial aid to 18 patients diagnosed with early-stage or curable cancers. Eligibility for the AKITF & CCF programs required a family income below Rs. 4 lakh per annum, and applicants had to receive treatment as general patients (excluding private or semi-private options) at participating hospitals. To verify income accurately, patients are required to submit KYC documents, including income certificates and Aadhaar cards, as part of the qualification process. A one-time registration fee of Rs. 600 covers up to ten visits, eliminating the need for recurring payments and enhancing accessibility.









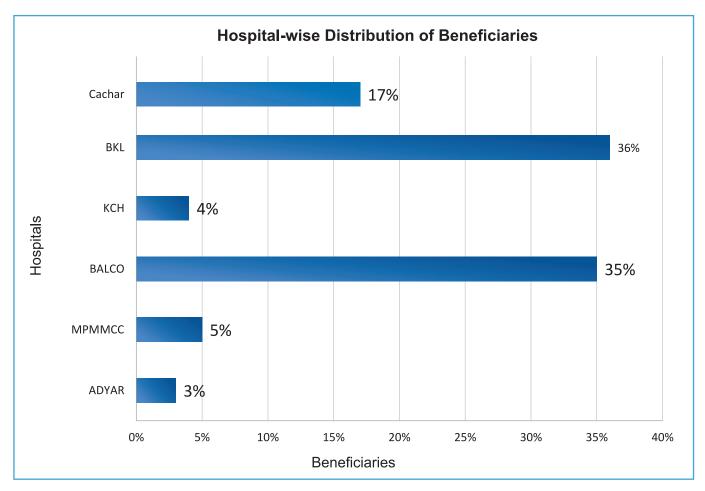
For specific diagnostic tests, such as CT scans, ICS allocates virtual funds through schemes like the AKITF, eliminating cash transactions. These allocated funds remain valid for 31 days, ensuring timely access to necessary procedures. Upon completion, hospitals submit the bills to ICS, with reimbursement typically processed within 10 to 15 days. ICS offers up to Rs. 25,000 per patient, allowing hospitals the flexibility to prioritize patients most in need of support. This flexible funding approach also enables hospitals to pay upfront and request reimbursement from ICS, ensuring prompt financial assistance. Additionally, if a patient's income slightly exceeds the eligibility threshold, they may still qualify for the program, expanding support to more patients.

For pediatric patients under 15, eligibility criteria included a projected five-year survival rate of 60% or higher, while adult patients (aged 15 and above) required a projected survival rate of 50% or more.

To evaluate the impact of these initiatives, a comprehensive study was conducted using key informant interviews and surveys among stakeholders, including caregivers, medical professionals, social workers, counselors, and implementation partners. Of the 142 respondents, 78 (55%) were female, and 64 (45%) were male. In terms of age distribution, 61% of respondents were over 45 years of age, 35% were between 15 and 45 years, and approximately 4% were under 15 years. Geographically, the majority of participants were from BKL, Walawalkar- Maharashtra (51), followed by Cachar Cancer Hospital & Research Centre-Assam (24), Balco Medical Centre for Madhya Pradesh (6) & Chhattisgarh (44), MPMMCC-Uttar Pradesh (7), and Kailash Cancer Hospital-Gujarat Additionally, there were 4 respondents from Cancer Institution-Adyar, Tamil Nadu.







Detailed interviews with doctors and hospital staff highlighted that they informed patients about the Cancer Cure Fund, implemented by ICS and supported by CCIL when the cost is a barrier to treatment.

Financial Relief and Access to Treatment in Far-Flung Areas

The two cancer care projects under the Cancer Cure initiative, AKITF and CCF, have provided crucial financial support to underserved patients, particularly in remote and marginalized communities where cancer treatment is often financially prohibitive. For many, a cancer diagnosis brings severe financial hardship, as the costs of diagnostics, treatment, and follow-up can quickly exceed their means. Out of 142 respondents, 65% identified financial constraints as the greatest barrier to accessing essential cancer treatment, followed by 19% who cited geographic distance from treatment centers as a major challenge.

To address these barriers, the AKITF initiative offers free detection and evaluation services for treatment initiation at designated hospitals across seven states, serving both adult and pediatric patients. Meanwhile, CCF program ensures that patients can access vital cancer treatment services without exhausting family resources, which is especially important given that many families rely on their life savings or borrow heavily to meet medical costs. This financial relief also prevents the cycle of debt that often follows expensive treatments, ensuring that individuals can regain financial stability post-recovery.

Notably, hospitals like Cachar in Assam and Adyar in Chennai have been able to treat 250-300 pediatric patients (aged 0-18) annually, who might otherwise lack access to care due to geographic and financial barriers. By alleviating these financial burdens, the initiative plays a crucial role in promoting both individual and family stability, allowing patients to focus on recovery without the added strain of financial ruin.





"A significant challenge is that many patients require financial assistance beyond the standard schemes available in our state. When patients come in, they aren't prepared for the financial burden of diagnostics and treatment. AKITF is very helpful, especially for pediatric patients." — Surgical Oncologist, Adyar Hospital, Chennai.

"Most patients we serve come from remote, low-income areas, often with marginal cultivation-based earnings. They usually present at advanced cancer stages, posing challenges given the lengthy and costly treatment. When the family's breadwinner is affected, the financial and emotional strain is considerable. Lifestyle factors, particularly tobacco use, contribute to the high prevalence of head and neck cancers in this region."- Resource Manager at Cachar Hospital, Assam.

The initiative has been particularly impactful for women, with 55% of the patients diagnosed with breast, cervical, ovarian, or uterine cancers—some of the most prevalent types in India. By focusing on these gender-specific cancers, the program addresses a critical gap in women's healthcare. Through AKITF & CCF, the initiative provides free detection and diagnostic services, including surgery, chemotherapy, radiotherapy, accommodation, and meals, which has reduced treatment dropouts and ensured consistent care. Prior to this support, many patients either delayed treatment or abandoned it midway due to financial constraints. With the backing of these initiatives, dropout rates have significantly declined, contributing to improved survival rates.

Strengthening Family Through Holistic Support

Cancer diagnoses extend their impact beyond individual patients, affecting entire families. The AKITF initiative recognizes this reality, emphasizing the vital role of family in patient care and actively promoting support networks within families and communities. By alleviating financial burdens, the initiative allows family members to concentrate on providing essential emotional and practical support, which is crucial for a patient's recovery. This family-centered approach is particularly important for younger patients, as guidance and reassurance from loved ones can significantly bolster morale during extended treatment periods.







The initiative not only addresses clinical care but also mitigates psychosocial stress for both patients and their families. By easing the financial strain associated with managing a chronic illness, it empowers families to better understand the patient's experience and offer psychological support, thereby enhancing treatment adherence and resilience. Educational efforts also inform families about cancer symptoms and the importance of early diagnosis, raising community awareness and helping to de-stigmatize the disease.

In addition, the initiative has implemented a systematic follow-up treatment protocol. Among the 142 respondents, approximately 82% were initially scheduled for hospital visits every three months, transitioning to six-month intervals and eventually to annual check-ups. If a patient missed a follow-up appointment, medical staff proactively reached out to ensure continued care.

"Cancer patients and their families have shown visible signs of happiness and well-being after treatment, with significant improvements in their physical, emotional, and financial well-being. Access to emotional support from hospital staff has greatly enhanced their outlook and instilled a sense of hope."

- Medical Social Worker at Varanasi.

"We have implemented a system that ensures no patient leaves the campus without a follow-up appointment. Our team is dedicated to ensuring that everyone who visits the hospital is given a follow-up date, and we have personnel specifically tasked with reminding patients of their upcoming appointments, especially those due in three months."

- Oncologist, Tata Memorial Hospital, Mumbai.

Improving Patient Awareness and Engagement in Treatment

The Cancer Cure Initiative has made remarkable progress in promoting awareness about cancer prevention and early detection. Its targeted programs for rural and semi-urban communities have significantly encouraged patients to seek medical help sooner, thus increasing the chances of successful treatment.

Early detection is crucial for improving survival rates; however, many patients delay seeking care until their cancer has reached an advanced stage. This delay is primarily due to financial constraints, as most patients come from lower socio-economic backgrounds, making the cost of diagnosis unaffordable. Additionally, the requirement for income certificates creates further barriers, as obtaining these documents can take a week or longer. For instance, patients in old age homes often struggle to secure income certificates, preventing the timely allocation of funds for their treatment. At the same time, the application process for financial assistance is also lengthy. Typically, it takes 10 to 15 days for verification after submission, as each case undergoes a thorough review to ensure accuracy and completeness. At times, queries arise, requiring resubmission and further delay. Once approved, the funds are released to the designated cancer hospital, ensuring that financial support is disbursed efficiently and transparently to facilitate timely care.

Moreover, a lack of awareness about cancer care and available healthcare resources remains a significant obstacle to early detection and diagnosis. Addressing these awareness gaps, along with streamlining the application process, is essential for ensuring that patients receive timely care without unnecessary delays.





CCIL CSR Department shared their perspective about the awareness, as they emphasized that

"We believe that prevention is often more effective than treatment. By investing in preventive measures and raising awareness about health issues, we can reduce the number of people who require medical care. We believe that raising awareness about health issues is a critical component of our projects. Unfortunately, we have observed a decreasing emphasis on prevention and awareness initiatives, with many agencies focusing primarily on treatment and patient support. While these are essential services, it is equally important to invest in prevention to reduce the overall burden of disease. One way to address this issue is by increasing awareness and education about cancer prevention. By promoting healthy lifestyle choices, early detection methods, and the importance of regular check-ups, we can help reduce the number of people affected by cancer. We believe it would be beneficial for all agencies involved in cancer care to allocate a portion of their resources to awareness campaigns."

To combat this, the initiative emphasizes public education on the symptoms and causes of common cancers, as well as the necessity of regular health check-ups. By normalizing discussions around cancer and diminishing the stigma associated with the disease, the initiative has been instrumental in fostering early intervention.

At MPMMCC in Varanasi, a dedicated team of medical social workers conducts outreach programs across various blocks, focusing on early detection, education, and awareness. These initiatives are essential for lowering cancer incidence and improving outcomes through timely diagnoses. The social work team specifically targets underserved and remote populations that have limited access to healthcare services, educating community members about cancer symptoms and risk factors, including smoking and tobacco use. Their outreach efforts also include counseling and risk assessments to identify high-risk individuals for early screening and preventive measures. These campaigns have been particularly successful in motivating women to seek treatment for breast and mouth cancers, while also encouraging men to address mouth cancer.

At Balco Hospital in Madhya Pradesh, a comprehensive strategy has been implemented to create tobaccofree environments in neighboring villages. This initiative carried out in partnership with the state government, includes community outreach through screening programs and awareness sessions led in collaboration with village leaders. Training sessions and the distribution of educational materials further strengthen these efforts, equipping local households with vital information. A recent collaboration with the Samuja Foundation trained approximately 70-80 community health workers, or sakhis, in cancer prevention. These sakhis actively disseminate knowledge in their villages and refer individuals with potential symptoms to the hospital for timely evaluation. Such community-based campaigns have significantly reduced the incidence of advanced-stage cancer by promoting early detection and intervention.

This focus on awareness and early detection is a critical challenge shared by hospitals across regions. As the Resource Manager at Cachar Hospital in Assam highlights,

"Awareness is a significant challenge. Many patients are unfamiliar with early cancer symptoms, and by the time they come to us, the cancer is often in an advanced stage. We have collaborated with ASHA workers to develop awareness programs that train them to recognize abnormal symptoms and encourage patients to seek screening." This shared commitment underscores the importance of equipping communities with the tools and knowledge to combat cancer effectively.





Despite its achievements, the AKITF and CCF initiatives have encountered several challenges, particularly regarding treatment compliance. Many patients, especially those from rural areas, often misunderstand the long-term nature of cancer care, mistakenly believing that surgery alone will suffice as a cure. This misconception about the necessity of follow-up treatments, such as chemotherapy and radiotherapy, has created significant barriers to maintaining patient adherence.

Logistical challenges further complicate patients' ability to return for follow-up care. Issues such as long travel distances, insufficient transportation options, and physical weakness following surgery contribute to this problem. Reports from hospitals indicate that a considerable number of patients defaulted on their treatments during the early phases of the project. Addressing these barriers requires more than just financial support; it necessitates comprehensive patient education, effective follow-up systems, and robust community outreach initiatives.

At Adyar Hospital, it was observed that patient dropouts were particularly prevalent in the initiative's early stages. This observation underscores the critical need for ongoing support and monitoring to ensure that patients not only begin their treatment but also complete it.

ANALYSIS

Parameters	Description
Relevance	The The Indian Cancer Society – Dr. Arun Kurkure Initiation and Treatment Fund (AKITF) and Cancer Cure Fund (CCF) are highly relevant interventions, filling a crucial need in providing financial assistance to underserved cancer patients across India. These programs address critical barriers that prevent economically disadvantaged populations from accessing essential cancer care, with 65% of surveyed respondents identifying financial constraints as a significant obstacle. Geographic challenges compound these issues, as patients from remote areas often face additional difficulties in reaching urban medical facilities. Given the high costs associated with cancer treatment, particularly for families in rural and semi-urban areas, these initiatives are appropriately designed to address these gaps and align with the broader healthcare needs of India's underserved populations.
Effectiveness	The effectiveness of these programs is demonstrated through their success in reaching and assisting a large number of patients who otherwise would not have access to treatment. With 621 beneficiaries supported under AKITF and significant financial aid extended to 18 patients through CCF, these programs have made substantial strides in achieving their intended objectives. The program's impact is also evident in the reduction of treatment dropout rates, as well as in the enhanced access to multi-disciplinary care for patients. Furthermore, improved survival rates, particularly among pediatric cancer patients, illustrate the success of these initiatives in fulfilling their mission to provide sustained support and increase patient access to life-saving treatments.





Parameters	Description
Efficiency	Of the two programs, the AKITF was allocated Rs. 90,00,000 and aided 621 beneficiaries in covering initial diagnostic costs, with an effective expenditure around of Rs. 14,493 per beneficiary. Conversely, the Cancer Cure Fund received Rs. 10,00,000, which provided full treatment support to 18 patients at an average cost of Rs. 55,555 per person. This financial assistance enabled patients to access quality care and significantly lessened the financial strain on their families within the fiscal year. In total, 639 patients across seven states benefited from the Rs. 1,00,00,000 grant provided by CCIL.
	The Cancer Cure initiatives efficiently utilize resources through cost-effective measures, such as virtual fund allocations for diagnostic tests, which provide timely support without cash handling. This approach minimizes administrative overhead by directing funds straight to patient care. By implementing a one-time registration fee and KYC-based eligibility verifications, ICS streamlines administration, allowing more resources for essential services. Additionally, hospitals like Tata Memorial and Cachar have established proactive follow-up systems, further enhancing efficiency and maximizing the programs' reach.
Coherence	The programs display strong coherence by aligning seamlessly with other public health efforts and local healthcare initiatives, filling critical gaps in existing support structures. For instance, many cancer patients who do not qualify for state-funded healthcare schemes can access care through CCF and AKITF. These initiatives also enhance public health outreach by fostering partnerships with local health workers and government bodies. By collaborating with ASHA workers, sakhis, and other community health advocates, the Cancer Cure initiatives complement national healthcare efforts, particularly in creating tobacco-free communities and raising awareness about early cancer detection.
Impact	The intended impacts of AKITF and CCF include increased access to early-stage cancer treatment, enhanced survival rates, and significant financial relief for beneficiaries. The initiatives' impact is particularly notable among women and pediatric patients, who often face unique healthcare challenges in low-resource settings. Additionally, by involving family members in the support process, the initiatives foster a culture of cancer awareness and early intervention within communities. Hospitals participating in these programs have expanded their capacity, benefiting the wider community by enhancing their ability to provide quality cancer care, which extends beyond the initial target group and improves local healthcare accessibility.





Parameters	Description
Sustainability	The long-term sustainability of AKITF and CCF is supported by their contributions to capacity-building within regional hospitals, which now have enhanced staff training, patient follow-up systems, and infrastructure capable of supporting comprehensive cancer care. This improvement ensures that hospitals are better equipped to serve as sustainable cancer care providers even after funding from ICS and CCIL subsides. Additionally, efforts to raise community awareness, create tobacco-free zones, and expand outreach through local health workers promote a self-sustaining impact, as health awareness grows and support systems continue to operate independently within these communities. Through these initiatives, the Cancer Cure programs leave a lasting legacy in both cancer care and preventive health in underserved areas.

3.3. Impact of Support for complicated major eye surgeries performed on indigent patients

The Sankara Nethralaya (a unit of Medical Research Foundation), is committed to advancing medical knowledge and improving ophthalmological care. This initiative aims to provide comprehensive eye care services by combining clinical expertise with innovative research to address critical vision-related issues.



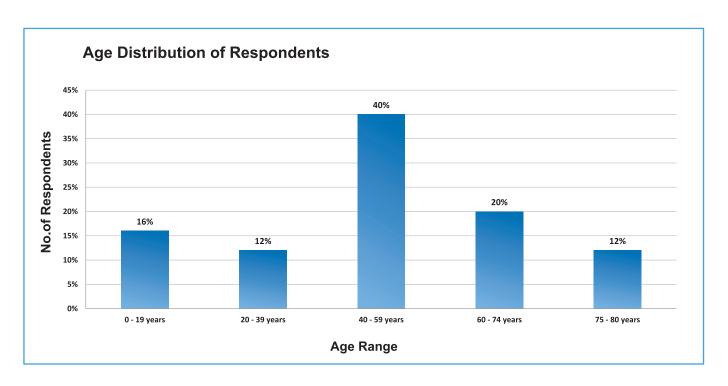




Access to quality eye care in rural and underserved regions presents significant challenges, including a shortage of specialized surgeons, inadequate medical infrastructure, and a lack of awareness about available treatments. Financial constraints, misconceptions about eye health, and logistical barriers such as transportation and accommodation further prevent patients from seeking necessary medical help. To address these issues, the partnership between CCIL and MRF has been crucial in delivering free surgical treatment and post-operative care for complex eye disorders at Sankara Nethralaya's hospitals in Chennai, Tamil Nadu, and Kolkata, West Bengal.

Over the past year, the initiative supported 500 patients, including children and senior citizens from economically disadvantaged households across rural and semi-urban areas of West Bengal and Tamil Nadu. Patients were selected based on socio-economic criteria, and verified through official documentation such as government IDs, income proof, medical records, and referral letters. Once verification was completed, funds were reimbursed within 15–30 days of application submission.

The annual family income of most patients ranged between Rs. 15,000 and Rs. 4,00,000, with adjustments made to account for differing socio-economic conditions across various regions. This flexible approach allowed the program to meet the evolving needs of vulnerable communities effectively.



Primary data was gathered through discussions and surveys with end beneficiaries, eye surgeons, hospital staff, and MRF representatives. These engagements offered valuable insights into the project's impact on marginalized communities, ensuring access to high-quality eye care.

Transforming Access to Quality Eye Care for Economically Marginalized Communities

The most common medical issues encountered and treated through this initiative were retinal detachment and diabetic retinopathy, affecting both senior and pediatric patients. Free surgical treatments were also provided for cataracts, glaucoma, and retinal disorders—conditions that could have led to irreversible vision loss if left unaddressed. Among 125 respondents, approximately 65% cited financial constraints as the primary barrier to accessing these treatments.





This initiative effectively bridged the healthcare gap for marginalized populations, delivering critical, life-saving care at no cost. Beyond physical health benefits, the program also had a profound impact on the emotional and psychological well-being of patients and their families, creating a positive ripple effect that underscored the importance of accessible healthcare for all.

"The ability to restore and preserve sight for hundreds of individuals has had life-changing effects on patients and their families, significantly improving their quality of life. This has enabled them to regain their financial independence to support their loved ones, filling them with a sense of hope for the future."

- Vitreo Retina Surgeon at Sankara Nethralaya, Kolkata.

"Sankara Nethralaya's foundation is built on treating all patients equally, regardless of their background, but especially those in rural areas. This initiative has helped bring specialized care to people who once had little to no access."

- Program Coordinator at Sankara Nethralaya, Chennai.

A distinctive feature of this initiative is its emphasis on holistic care, encompassing not only surgical procedures but also proper post-operative care and follow-up. Telemedicine played an essential role in this process, allowing for remote consultations and monitoring, particularly for patients from remote areas. This approach reduced the need for patients to travel for follow-up care, ensuring quality treatment continues even after surgery and minimizing the risk of complications.

"Our mission is to deliver services to every corner of India, with a special emphasis on rural areas with limited access to resources. Despite the challenges, we remain committed to bridging this gap and ensuring equal access to our services. The collaborative efforts of all stakeholders, from hospital staff to local outreach workers, have played a key role in ensuring that patients receive the necessary postoperative care without interruptions." - Medical Director of MRF.

"Through our ophthalmic care program, we have witnessed transformative changes in our patients' lives. The outcomes demonstrate the profound impact of our program, extending beyond physical health to emotional and financial well-being."

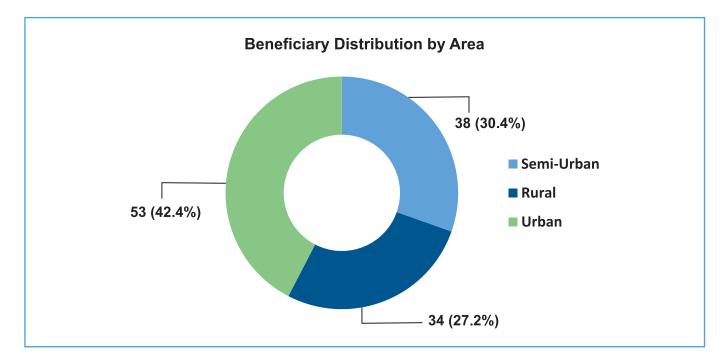
- Senior Manager, Chennai.

Mitigating the Challenges of Rural and Underserved Areas

One of the key challenges addressed by this project was the limited access to specialized eye care services in semi-urban and rural areas. To tackle this, eye camps were organized in these regions twice a week, serving as a vital tool for identifying patients who require surgery. The camps facilitated early detection of eye disorders, which is crucial for preventing vision loss, and offered free transportation and accommodation facilities for patients requiring further treatment.







"Temples and places of worship served as vital hubs for community engagement, enabling us to reach marginalized groups through health awareness programs and eye screening initiatives. Additionally, we targeted occupational centers, such as factories and farms, to provide on-site eye care services for workers. Walk-in camps at our hospitals catered to individuals seeking immediate attention, while school camps allowed us to screen children and provide corrective measures for vision impairments."

- Program Coordinator at Sankara Nethralaya, Chennai.

"Patients from rural areas can access eye care services easily during rural eye check-up camps. If a patient is experiencing severe issues, they are referred to Sankara Nethralaya. This organization also arranges transportation and accommodation to ensure that patients can access eye care services without difficulty."

- Eye Surgeon at Sankara Nethralaya, Kolkata.

Raising Awareness to Prevent Eye Health Issues in Marginalized Communities

A key component of these outreach camps was their focus on raising awareness about eye health and preventable eye conditions. Of the 125 respondents, approximately 61% admitted they were previously unaware of the financial assistance provided by Sankara Nethralaya or other eye care programs. To address this, a series of community-based initiatives were organized to educate the public about the importance of regular eye check-ups, the risks of delayed treatment, and the availability of free surgical interventions through the program. These efforts helped tackle common barriers like lack of awareness and neglect, which often contribute to the progression of treatable conditions among marginalized groups. Stakeholders, including hospital staff, were actively involved, frequently conducting informational sessions to explain the procedures, benefits, and importance of follow-up care after surgery.

Telemedicine services also contributed significantly to the program's awareness initiatives. Through remote consultations, patients were educated about their eye conditions, preventive care, and the importance of adhering to prescribed treatments. This approach allowed the program to reach patients in geographically distant areas, ensuring they were well-informed even if they couldn't attend the eye camps in person.





"Due to lack of education, they do not care not only about their eyes but also their health. Rural people are less educated, so their awareness level is next to zero. Their financial condition also creates barriers to availing healthcare services." - Sr. Optometrist, Sankara Nethralaya, Kolkata

Strategic Partnerships and Collaboration Among Stakeholders

Extensive collaboration between partner NGOs, ASHA workers, local administration, and community leaders was prioritized in organizing eye check-up camps in rural and underserved areas. These partnerships were crucial for identifying regions with the greatest need for eye care, mobilizing communities, and ensuring the smooth execution of the camps.

Partner NGOs played a key role in facilitating outreach efforts by leveraging their grassroots presence to connect with local communities and raise awareness about the eye check-up camps. Working closely with Sankara Nethralaya, they helped identify individuals in need of medical attention and referred them to the camps for evaluation and treatment.

The local administration provided vital logistical support, including necessary permissions, access to venues, and coordination of transportation for patients from remote areas. Their involvement added credibility to the initiative, encouraging greater community participation. Local leaders, including village heads and community representatives, were also instrumental in building trust and mobilizing residents. They acted as advocates for the project, promoting the camps and encouraging attendance within their communities.

"Fortunately, our partnerships with numerous CSR initiatives and NGOs have helped us avoid significant challenges. As we move forward in this rapidly evolving world, I'm heartened to see a growing number of organizations engaging in philanthropic efforts." - Surgeon, Sankara Nethralaya, Chennai.

"To expand our community outreach, we are proud to have established strategic partnerships, including Project Agasthya with Agastyar Charitable Trust, IIT Madras through MESU Units, and initiatives like Music for Charity, NRI sponsors, and CSR organizations." - Senior Manager, Sankara Nethralaya, Kolkata.

Overall, the objective of this initiative, to provide free surgical treatment and comprehensive eye care services to indigent patients in remote areas, was successfully achieved at both hospitals. CCIL's financial support enabled the Medical Research Foundation to serve as a model for effective healthcare delivery in underserved regions, laying a foundation for sustainable healthcare practices.

During discussions about potential improvements, respondents highlighted the need to streamline referral processes, enhance technology integration, and increase community awareness. For future initiatives, integrating services into existing healthcare systems, developing sustainable funding models, and leveraging telemedicine could further amplify the impact.

"CCIL has consistently proven to be an exceptional partner, demonstrating a commitment to collaborative excellence. The CCIL-Sankara Nethralaya collaboration has achieved outstanding outcomes through effective communication, mutual respect, and diverse expertise."

- Program Coordinator, Chennai.





ANALYSIS

Parameters	Description
Relevance	The project addresses a critical healthcare need in rural and semi-urban areas of India, which accounts for one-quarter of the world's blind population. Eye disorders, if untreated, can lead to irreversible vision loss, with retinal detachment, diabetic retinopathy, cataracts, and glaucoma commonly impacting the community. By focusing on economically disadvantaged groups, the initiative responds directly to the lack of infrastructure, medical resources, and awareness, particularly in these underserved regions. This initiative is therefore highly relevant, as it tackles both medical and socio-economic barriers that prevent individuals from accessing essential eye care.
Effectiveness	The project has effectively met its objectives by providing free surgical treatment to 500 patients, successfully reducing cases of preventable blindness, and improving the overall quality of life for economically marginalized individuals. By focusing on conditions like cataracts, glaucoma, and diabetic retinopathy, the initiative has prevented irreversible vision loss in high-risk groups, including seniors and children. Additionally, the outreach efforts have been effective in identifying those in need, facilitating early diagnosis, and ensuring that patients who require surgical interventions receive them. The provision of post-operative care and follow-up services further enhanced the project's effectiveness, ensuring sustained positive outcomes for patients.
Efficiency	From the Rs. 175 lakhs allocated to the Medical Research Foundation by CCIL, 500 patients were treated at approximately Rs. 35,000 per beneficiary. The project demonstrated efficient use of resources through strategic collaborations with NGOs, local leaders, and the local administration. The use of telemedicine reduced costs and logistical complications associated with follow-up care, especially for patients from remote areas. By conducting regular eye camps in rural regions, the project ensured optimal utilization of time and effort in screening large groups of patients, identifying those in need of surgical intervention, and referring them for further treatment. These efforts minimized unnecessary hospital visits and streamlined the care process, ensuring that resources were allocated to the patients who needed them most.
Coherence	The project's coherence is reflected in its alignment with both national health initiatives and local needs. It complements other healthcare programs aimed at improving access to medical services in rural and underserved regions, particularly in the context of eye care. Collaborating with local NGOs, community leaders, and administrative bodies ensured that the project harmonized with existing structures and initiatives, enhancing the outreach and effectiveness of the intervention. The integration of technology, such as telemedicine, also aligns with modern healthcare strategies, providing continuity of care while leveraging digital health services to overcome geographical barriers.





The impact of the project extends beyond the direct beneficiaries, influencing the **Impact** broader community through increased awareness of eye health and the importance of early intervention. The free surgical treatments had immediate, lifealtering benefits for 500 individuals, restoring their vision and improving their economic and social well-being. Additionally, the project raised awareness in underserved regions, which is likely to reduce the prevalence of untreated eye conditions in the future. The project's long-term effects include a better-informed population that is more likely to seek medical attention early, reducing the overall burden of eye diseases in these communities. The project demonstrates a strong potential for long-term sustainability as Sustainability collaborative partnerships were formed with local NGOs, ASHA workers, community health workers and leaders, and healthcare providers to create a foundation for continued outreach and service delivery. The use of telemedicine also enhances sustainability by providing a cost-effective way to ensure ongoing care for patients after surgery. Furthermore, the focus on raising awareness about eye health and the availability of services ensures that future demand for eye care will be more proactive, potentially reducing the burden on healthcare providers in the long term. The financial support from CSR initiatives and the involvement of

3.4. Impact of Free of Cost Cancer Treatment for Women

Founded in 1954 by Dr. Muthulakshmi Reddy, the Cancer Institute (WIA) has been a leader in cancer care in India. It provides a comprehensive range of services, including diagnosis, treatment, rehabilitation, and research, with a focus on various types of cancers. The institute is known for its commitment to offering affordable cancer care, particularly for underserved populations. By leveraging advanced medical technology and a multidisciplinary approach, it is dedicated to improving women's health outcomes and enhancing the quality of life for cancer patients.

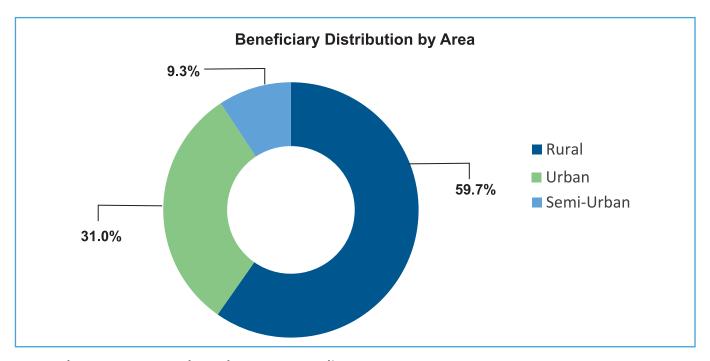
capacity to sustain its operations and impact over time.

NRI sponsors provide a stable funding model, further ensuring the project's

In collaboration with CCIL, WIA launched an initiative to provide free cancer treatments for women, follow-up care, counseling, screenings, and awareness programs to underprivileged women in Chennai, Tamil Nadu, who are battling breast, ovarian, and uterine cancers. This project has positively impacted both beneficiaries and stakeholders, demonstrating meaningful results across multiple dimensions. The program reached 841 women from marginalized backgrounds in rural and urban areas, where annual family incomes typically range between Rs. 12,000 and Rs. 3,60,000. To capture the initiative's impact, primary data was collected through detailed interviews and surveys with doctors, social workers, hospital staff, and the implementation partner. These discussions highlighted various themes, reflecting the intervention's depth and the broad scope of its outcomes. This holistic approach not only ensured access to critical treatment but also addressed psychological, social, and preventive aspects, underscoring the project's value within the target communities.







Women's Empowerment Through Access to Quality Cancer Care

One of the most impactful aspects of this project has been its role in empowering underprivileged women by providing access to essential cancer treatments that would otherwise be unaffordable. Of the 216 respondents, 74% identified financial limitations as their primary challenge. Beneficiaries were selected through a thorough registration and financial evaluation process, which required the submission of income certificates, personal identification, and medical records. Recognizing that many women in rural areas lacked immediate access to these documents, a rapid assessment process was implemented to allow treatment to begin without delay. Of the total respondents, more than 87% of women reported receiving financial assistance within 15-30 days of completing the application process, easing their economic burden and ensuring timely care.







Funding from CCIL was directed exclusively toward patient care and treatment, focusing on alleviating the financial burden of cancer treatment for female patients, particularly those from low-income backgrounds. This initiative provided free access to surgeries, radiotherapy, and chemotherapy, significantly reducing financial strain and improving health outcomes for women. By ensuring access to essential treatments, the project played a crucial role in facilitating recovery and promoting well-being among the beneficiaries.

"Our foundation's motto is to ensure that anyone who comes to us seeking cancer treatment is treated, regardless of cost, religion, or financial status. We don't turn anyone away due to a lack of funds."

- WIA Representative.

"We don't insist on documents on the first day because patients are already under immense stress from their cancer diagnosis. Asking them for such paperwork immediately could discourage them from returning for treatment. Instead, our team conducts a quick assessment to categorize patients as paying or non-paying, with most falling into the non-paying category."

- Program Coordinator at WIA.

Holistic Care: Addressing More Than Just Medical Needs

The WIA's approach, which combines affordable medical treatment with a structured follow-up mechanism, reflects a holistic understanding of cancer patients' needs. Given that cancer requires prolonged care, it can disrupt every aspect of a person's life, including their ability to earn a living and care for their families. Recognizing this complexity, hospital staff conducted timely follow-up discussions to ensure comprehensive care for patients throughout their treatment journey.

In addition to addressing physical health, the project also focused on the emotional and psychological well-being of the beneficiaries. Cancer is not merely a physical illness; it imposes significant emotional and mental health challenges. Before receiving treatment, around 87% of beneficiaries reported feelings of isolation, fear, and despair, often exacerbated by unsupportive and discriminatory behavior from peers and family members.

The initiative fostered a nurturing environment where women found strength in seeing their struggles reflected in others, significantly bolstering their emotional resilience. This psychological support extended to their families as well, offering them a sense of relief and shared strength. For many of these women, being surrounded by others facing similar health challenges alleviated feelings of isolation, making their journeys more manageable and empowering.

"In the past, we sent postcards to remind patients about their follow-up appointments. Today, we use phone calls. We also have a psycho-oncology department that provides counseling for cancer patients,"

- Social Worker at WIA.

Transformative Impact on Families and Communities

The ripple effect of this project's impact extends far beyond the individual patients to their families and communities. By providing treatment to women—who are often the primary caregivers in their households—the initiative has indirectly enhanced the well-being of entire families. In communities with limited healthcare access, the successful treatment of these women has emerged as a beacon of hope, inspiring others to seek medical help and challenging the stigmas surrounding cancer.





The data reveals that 58% of the women beneficiaries (125 out of 216) were unaware of the available cancer treatment options or the financial aid provided by the Cancer Institute. In response, the project has made concerted efforts to raise awareness about the importance of early detection and timely intervention. These initiatives not only inform the community about available resources but also amplify the project's long-term societal impact, ultimately fostering a culture of proactive health-seeking behavior.

While talking about the impact on families and communities, CCIL CSR Department emphasized that...

"From an impact perspective, we believe that our organization places a strong emphasis on the quality of project implementation. While the impact is undoubtedly important, we have personally observed firsthand the positive influence our funding has had on beneficiaries. By providing financial support, we have been able to assist individuals and communities in overcoming various challenges. While it may be difficult to quantify the extent of change we have brought about in the lives of our beneficiaries, We are confident that our efforts have had a positive impact. Even small improvements can make a significant difference, and we believe that our support has brought happiness and a sense of hope to those we serve"

While recalling the interaction with the families of the patients, CCIL CSR Department further shared that...

"We had the opportunity to speak with two parents who were battling cancer. They expressed their deep gratitude for the support, facilities, and financial assistance they received from our organization. They shared that, without our help, they would have struggled to survive over the past 10 years. Due to their illness, they were unable to work and provide for their family. However, with our support, they have been able to ensure their children continue their education and that their family's basic needs are met. They spoke of a sense of relief and gratitude, knowing their family is financially secure and their children have a bright future ahead. The father was visibly emotional as he shared his story. He expressed his confidence in his family's ability to overcome challenges and his belief that his children will be successful. He emphasized the importance of education and his determination to provide his children with the opportunities they need to thrive."

While the project has achieved notable success, it also faced challenges, as highlighted by both beneficiaries and stakeholders. A common issue raised was the Cancer Institute's capacity to handle the increasing volume of patients.

"We have seen an increase in demand, and while the funding helps, we still face infrastructural constraints. The waiting times for surgeries or radiotherapy sessions can be long." - Oncologist at WIA.

These reflections indicate the need for enhanced post-treatment care plans and strategies to address infrastructural bottlenecks. Ensuring that beneficiaries continue to receive comprehensive support beyond the acute phase of their illness is crucial for the patient's progress along the recovery path, the project's sustainability, and ongoing impact.

Stakeholder Engagement and Sustainability

To maximize the impact of the project in combating cancer, various entities—including NGOs, village leaders, ASHA and community health workers, and local and state government representatives—were brought together to raise awareness about these critical health issues. The CCIL-funded cancer treatment initiative, in partnership with the Cancer Institute, has profoundly affected the lives of women receiving care, their families, and the broader community. This collaboration has been recognized as a model for





corporate social responsibility initiatives that can create tangible, long-term improvements in public health by addressing both medical and non-medical needs, thereby establishing a holistic support system for some of society's most vulnerable women.

However, as the initiative expands, challenges related to capacity and long-term care must be addressed. Sustained support and ongoing refinement of the program will be essential to maintain its transformative impact and ensure that more women can benefit from this life-saving initiative. A total of 73% of women beneficiaries emphasized the importance of ongoing financial support for these initiatives, along with increased efforts toward awareness generation. This recognition of the need for long-term sustainability underscores the critical role of continuous investment in ensuring the project's lasting impact.

"Yes, we work with various NGOs and the government on awareness and screening programs. We conduct door-to-door screenings for breast, cervical, and oral cancers in various districts of Tamil Nadu. Our goal is to expand this initiative to every district in the state."

- WIA Representative.

"The coordination has been straightforward and effective. There have never been any major issues. Whenever we needed support, CCIL provided it without hesitation."

- Social Worker, WIA.

ANALYSIS

Parameters	Description
Relevance	The project addresses a critical healthcare gap by providing free cancer treatments to underprivileged women in Chennai, Tamil Nadu, who are suffering from breast, ovarian, or uterine cancer. The rising cancer rates among women in India, combined with the financial barriers that prevent access to treatment, highlight the project's relevance. Women from economically marginalized backgrounds are often unable to afford comprehensive cancer care, which includes surgery, chemotherapy, and radiotherapy, as well as the necessary accommodation and food during treatment. The project directly tackles these barriers, fulfilling a crucial need in public health. Furthermore, by partnering with the Cancer Institute (WIA), an institution with a long history of providing affordable cancer care, the project demonstrates its alignment with broader healthcare priorities in India, particularly in offering equitable healthcare access to underserved populations.
Effectiveness	The project has successfully achieved its objectives of providing free cancer treatments to 841 underprivileged women. By eliminating financial barriers and ensuring timely access to care, the initiative has had a transformative effect on patients' health outcomes. The absence of upfront documentation requirements allowed the project to quickly respond to the needs of patients, further enhancing its effectiveness. Additionally, the holistic approach—covering cancer treatment





	along with providing emotional support through counseling services, food and accomodation—demonstrates a comprehensive fulfillment of the project's goals. The initiative's emphasis on follow-up care and counseling has been crucial in ensuring long-term health improvements.
Efficiency	With Rs.227.25 lakhs provided by CCIL, 841 underprivileged women were provided quality cancer treatment at approximately Rs. 27,021.40 per beneficiary cost. The project's efficient use of resources is evident in its ability to treat a large number of patients despite infrastructural constraints. Funds from CCIL were allocated primarily toward patient care, ensuring that essential treatments were accessible to those in need. However, challenges such as increased patient demand and extended waiting times for surgeries or radiotherapy sessions highlight the need for further improvements in operational efficiency to enhance service delivery and patient outcomes.
	While the project delivered critical care to patients, the strain on infrastructure highlights the need for expanded capacity to reduce wait times and improve service delivery. The partnership model with NGOs and local governments for awareness and screening programs further optimized resource use, increasing outreach and early detection without additional costs.
Coherence	The CCIL-funded initiative aligns well with broader national and state health priorities, particularly concerning cancer care. In Tamil Nadu, efforts to enhance cancer screening and treatment are supported by various government programs, and this initiative complements these efforts by focusing on marginalized women who would otherwise not receive adequate care. The collaboration with local NGOs and village leaders for cancer screening and awareness programs reinforces this coherence by ensuring that the project is integrated within the local healthcare ecosystem. This integration ensures consistency across different health programs, reducing redundancy and maximizing outreach. Moreover, WIA's work in coordinating door-to-door screenings complements the national agenda of early cancer detection and intervention.
Impact	The project had a profound impact on both the direct beneficiaries and their families. By treating women who are often primary caregivers in their households, the project has indirectly improved the well-being of entire families. This not only enhanced the health outcomes of individual patients but also contributed to community-level awareness and destignatization of cancer. The project also fostered emotional resilience among patients by creating a support system where women could connect with others facing similar challenges, thus improving psychological well-being.
Sustainability	The sustainability of the project depends on continuous funding and infrastructure improvements to meet increasing demand. Stakeholders have





emphasized the importance of ongoing financial support to maintain the momentum of the initiative. The involvement of local NGOs, government entities, and the Cancer Institute (WIA) in awareness and screening efforts provides a strong foundation for the project's long-term success.



4 Best Practices

One of the critical aspects of the success observed in these CCIL-funded CSR healthcare initiatives, focused on cancer and eye care, is the integration of best practices that ensure effective delivery and sustainable impact in terms of patients' progress on the recovery path. These practices are deeply rooted in the programs' understanding of community needs, hospital management, and stakeholder involvement, allowing for an adaptive, patient-centric approach.

Enabling Swift Decision-Making for Critical Patient Needs

A notable practice across all four CSR projects has been the autonomy given to hospitals and medical professionals in determining deserving patients who require immediate support. This approach enables the medical professionals on the ground—those who interact with patients on a day-to-day basis—to identify the most deserving cases that require urgent attention. This autonomy cuts down bureaucratic delays, ensuring that support is provided swiftly to patients who need it the most, especially in critical cases where timing is of utmost importance. Streamlining this decision-making process has been key to the program's effectiveness, particularly in fast-paced hospital environments where immediate care can significantly impact patient outcomes

Implementing a Robust Follow-Up System

A strong follow-up mechanism has been implemented, ensuring that patients remain within the care ecosystem even after their initial treatment. Before leaving the hospital, each patient was given a follow-up date, creating an organized system for tracking their progress and recovery. A dedicated team is responsible for ensuring that patients come for these follow-up appointments, utilizing phone calls and, when necessary, facilitating home visits to bring back patients who might otherwise miss their check-ups. This practice is particularly valuable in cancer care, where long-term monitoring is essential to ensure remission and prevent recurrence. Moreover, the personalized nature of this follow-up system fosters trust between patients and healthcare providers, improving overall patient engagement and, in turn, their recovery.

Strengthening Community Outreach and Awareness

Collaborating with Accredited Social Health Activists (ASHA) workers and community health workers, known locally as "Sakhis," has been a game-changer in spreading awareness about cancer and eye care in rural areas. These workers are deeply connected to the communities they serve and understand the cultural barriers and misconceptions that often prevent people from seeking timely care.

For cancer, Sakhis educate their communities about symptoms, prevention, and the availability of free treatment, while also referring patients to hospitals for diagnosis and care. On the eye care side, they highlight the importance of regular check-ups to catch treatable conditions like cataracts and glaucoma early. By organizing eye screening camps in partnership with local groups, they make it easier for people in underserved areas to access critical services.

To further enhance outreach efforts, mobile vans are deployed in rural areas, enabling healthcare providers to conduct eye screening camps. These mobile units help identify critical eye disorders,





such as cataracts and glaucoma, ensuring timely intervention for patients who might otherwise lack access to specialized care.

These efforts have helped more people in remote areas get screened and diagnosed on time. By building trust and raising awareness within their communities, ASHAs and Sakhis have reduced the challenges patients face in accessing care, whether for cancer or eye health. Their work ensures that more cases are caught early, giving patients a better chance at treatment and recovery.

Providing Comprehensive Psychosocial Support

Cancer not only affects the physical health of patients but also takes a significant toll on their mental and emotional well-being. Recognizing this, the programs introduced social support structures that provide psychological counseling to patients and their families. These sessions aim to rebuild confidence, offer emotional resilience, and combat the societal taboos often associated with cancer. This psychosocial approach has played an essential role in reducing the isolation experienced by many patients, helping them navigate the emotional complexities of a cancer diagnosis and coping with life, and ultimately leading to better treatment outcomes by fostering a positive mental attitude.

Integrated Cancer Data Registry for Improved Patient Tracking

The establishment of a hospital-based cancer registry allows for systematic data collation and its use as well as long-term tracking of cancer patients. This registry facilitates the follow-up process and enables healthcare providers to analyze treatment patterns, outcomes, recovery patterns, and recurrence rates. Additionally, there are plans to extend this registry into a population-based model, supported by the Indian Council of Medical Research (ICMR). Such a comprehensive database would allow for a better understanding of cancer epidemiology in India, helping to guide future health policies and improve the targeting of cancer prevention and treatment programs.



Conclusion

The Clearing Corporation of India Limited (CCIL) has made a transformative impact on healthcare accessibility for underprivileged populations across India. Partnering with renowned medical institutions and non-profits, CCIL has provided free cancer and eye care through initiatives such as Contribution through Emergency fund/Seed fund and complete financial adoption of children/young adults with cancer, Dr. Arun Kurkure Initiation and Treatment Fund (AKITF), Cancer Cure Fund (CCF) and Free cancer treatment for women. Key collaborations includes with the Tata Memorial Centre (ImpaCCT Foundation), Indian Cancer Society (ICS), Cancer Institute (WIA) and Sankara Nethralaya (a unit of Medical Research Foundation). These efforts have brought essential, life-saving treatments to communities in need, enabling free cancer diagnosis, surgery, and ophthalmic care for indigent patients from regions with limited healthcare infrastructure and access.

Through its programs, CCIL reached over 2,200 patients, significantly improving cancer treatment outcomes by reducing dropout rates, especially among women and children. The Emergency fund/Seed fund and Complete Financial Adoption programs for pediatric cancer cases and the financial aid provided by AKITF and CCF for adult patients exemplify CCIL's commitment to addressing economic and geographical barriers to healthcare access. Similarly, its contributions to eye care have allowed Sankara Nethralaya to conduct critical eye surgeries, preventing avoidable blindness and restoring sight to individuals in rural and underserved communities.

The assessment underscores an opportunity for CCIL to expand the reach and effectiveness of these initiatives by focusing on community outreach, strengthening follow-up support, and enhancing accommodation options for patients & caregivers/families undergoing long-term care. By addressing these needs, CCIL can further solidify its role in creating sustainable, equitable healthcare access across India, making a lasting impact on the lives of vulnerable populations through compassionate and strategic CSR investments.



Recommendations

The initiatives supported by CCIL have achieved notable progress in enhancing access to cancer and eye care services. To further expand the reach, improve efficiency, and ensure the long-term sustainability of these programs, the following recommendations are proposed to amplify their impact across stakeholders.

Budget Allocation for Awareness Programs

Awareness programs are a continuous process to educate patients about cancer and eye-related diseases. These programs must have a focused and dedicated approach by the implementation partners to ensure maximum impact. Allocating specific budgets for these programs will enable implementation partners to effectively allocate their resources and work exclusively on this initiative. CCIL can play a pivotal role in supporting implementation partners by providing financial assistance to sustain and enhance the awareness programs, ensuring their long-term success and outreach.

Standardized Report or Data Formats for Implementation Partners

It has been observed that implementation partners currently submit beneficiary lists and details to CCIL using different formats and reporting styles, including varied MIS reports. To address this, it would be advantageous for The Clearing Corporation of India (CCIL) to provide standardized report formats for all implementation partners. This initiative would promote uniformity and consistency in data submissions, streamlining processes and enhancing overall data management efficiency. Ensure the digital dashboard system is properly aligned with the Excel sheet format for accurate data punching and quality data collection.

Meeting with the Doctors/Surgeons

To enhance the effectiveness of the support provided by CCIL, it is essential to involve doctors and surgeons in addition to the implementation partners. Engaging with medical professionals will help identify critical needs and areas requiring the most support in cancer care treatment. While CCIL maintains ongoing communication with hospital coordinators for project implementation, direct meetings with doctors and surgeons will offer deeper insights and enable CCIL to better align its support with the needs of patients and healthcare providers.

Strengthening Monitoring with Data Digitization and Automation

Effective monitoring and evaluation (M&E) are critical to tracking project outcomes, ensuring transparency, and making data-driven adjustments. Adopting automation will streamline processes for the implementation partner, reducing delays and enhancing operational efficiency. This includes digitizing patient records, fund disbursement tracking, and treatment plans to ensure real-time updates and better coordination among stakeholders.

Digitization would streamline patient care, support real-time decision-making, and improve coordination among healthcare providers. Digital records would also make it easier for patients, particularly in rural areas, to access their health information and adhere to treatment plans accurately. Moreover, centralized data integration across providers would facilitate smoother referrals, allowing for specialized care when necessary and making the M&E process more efficient.





This approach would strengthen the overall quality of patient care and provide actionable insights for continuous improvement.

Feedback Mechanism for Implementation Partners

As highlighted by the CCIL team, to enhance project management and accountability, CCIL introduced a quarterly review process this year. This involves regular meetings with each implementation partner to track project progress, discuss challenges, and monitor resource utilization. This approach helps in identifying the challenges faced by implementation partners and ensuring effective resource allocation. In addition to the review process, a feedback mechanism should be established for implementation partners to provide their insights and suggestions for continuous improvement.









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