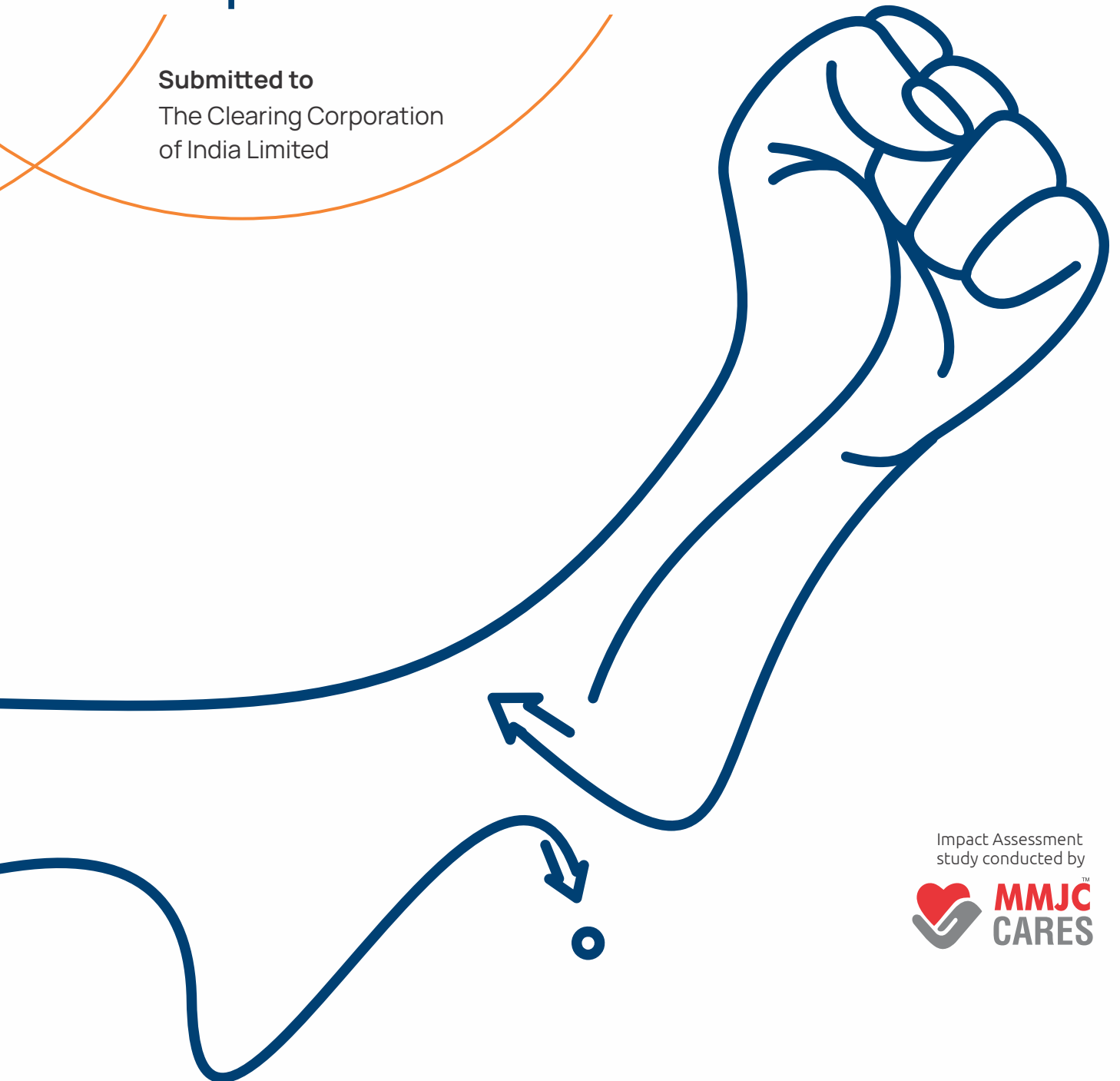


CSR Impact Assessment Report FY 2023-24

Submitted to
The Clearing Corporation
of India Limited



Impact Assessment
study conducted by



CONTENTS

Acknowledgements	01
Executive Summary	02
Introduction	04
Study Methodology	08
Social Impact Created by the CCIL – Study Findings	11
Recommendations for Implementation Agencies	31
Conclusion	32

ACKNOWLEDGEMENTS

This study, conducted by Makarand M. Joshi & Co., explores the impact of the CSR projects of The Clearing Corporation of India Ltd., across India during the Financial Year 2023-24. It represents the culmination of a comprehensive Impact Assessment study.

We would like to extend our deepest gratitude to the CSR team for their continuous support and invaluable assistance throughout this process. We also express our sincere thanks to the primary and secondary stakeholders who generously provided their insights, perspectives, and valuable time, which significantly contributed to our efforts.

We are deeply grateful to the respondents who willingly participated and contributed to a smooth and engaging data collection process. Their courage, openness and readiness to share their experiences, insights, and opinions provided us with a wealth of valuable information, which served as the backbone of this study. We sincerely appreciate their contributions, which have played a pivotal role in achieving the objectives of this impact assessment.

A BRIEF: MMJC - MAKARAND M. JOSHI & CO.

MMJC is a 26 - year-old Corporate Consultancy firm led by Mr. Makarand Joshi, Founder Partner. The firm has 9 Partners catering specialized verticals. The firm has a team size of 170 out of which 70 are multi-face professionals being Company Secretaries and/or Law Graduates rendering unique quality and an array of services under one roof, with a specialized focus on acting as Social Impact Assessors. MMJC's Head office is situated at Mulund and has a reach in all states and major cities across India.



Project team:

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EXECUTIVE SUMMARY

Cancer is a significant global health concern, with India ranking second in Asia and third in the world in terms of cancer incidence. India is projected to have approximately 1.56 million (15.6 lakh) new cancer cases and estimated cancer deaths are approximately 874,000 (8.7 lakh) in 2024.¹ Vision impairment in India is not only a health issue but a major contributor to disability and reduced quality of life, India has one of the largest visually impaired populations globally, with millions affected by avoidable blindness. A significant proportion of blindness in India is preventable or treatable (e.g., cataract, refractive errors). Ocular emergencies alone contribute to ~12.7% of blindness and 15.3% of visual impairment burden in India.² The growing burden of cancer and visual impairment in India, as evidenced by rising incidence rates, late-stage diagnoses, and a high prevalence of avoidable blindness, underscores the urgent need for strengthened healthcare interventions and inclusive access to care. These critical public health challenges are further intensified by socio-economic disparities, limited screening coverage, and gaps in healthcare infrastructure, particularly in underserved and vulnerable communities.

In response to this pressing need, The CCIL demonstrated strong commitment to improved critical healthcare service in India, through its Corporate Social Responsibility (CSR) initiatives by strategically investing in cancer care and critical eye health services. Recognizing the scale and complexity of these issues, the organization has proactively supported interventions focused on key areas / gaps in healthcare service delivery and improved access to health services. The CCIL CSR projects included supporting early detection of cancer, accessible treatment facilities, enhancing healthcare technology and reducing out of

pocket expenses for patients, especially those coming from low-income backgrounds.

Through these projects, CCIL is not only addressing immediate healthcare gaps but also contributing to long-term systems strengthening and enhanced quality of life for vulnerable populations. Its targeted CSR contribution in cancer care reflect a responsible and data-driven approach towards tackling two of India's most pressing healthcare challenges. CCIL has implemented a range of initiatives spanning the continuum of healthcare, including the provision of emergency seed funding and full financial support for children and young adults undergoing cancer treatment at the Tata Memorial Centre (TMC), Mumbai, thereby reducing financial barriers to life-saving care. CCIL has also enhanced institutional capacity through the procurement of advanced technologies such as cryoablation systems for minimally invasive tumour treatment and vacuum-assisted breast biopsy systems at Mahamana Pandit Madan Mohan Malaviya Cancer Centre (MPMMCC), Varanasi (Unit of TMC), improving early diagnosis and treatment outcomes. Further, it has supported cancer care funds, widening access to quality oncology services Pan India through the impanelled hospitals of Indian Cancer Society (ICS). A focused effort has been made to support indigent women suffering from breast, ovarian, and uterine cancers by covering the full spectrum of treatment, including surgery, chemotherapy, and radiotherapy at Cancer Institute (WIA). In addition, CCIL has also contributed to addressing avoidable blindness by funding complex eye surgeries for economically disadvantaged patients identified through outreach camps, ensuring free and equitable access to essential eye care services at Medical Research Foundation (Sankara Nethralaya) in Chennai and Kolkata. Collectively, these

¹National Cancer Registry Programme Investigator Group. Cancer Incidence and Mortality Across 43 Cancer Registries in India. JAMA Netw Open. 2025;8(8):e2527805. doi:10.1001/jamanetworkopen.2025.27805

²Debapriya Mukhopadhyay, Shreyasi Mukherjee, Gijo Francis, Harinath Mukherjee, An Indian epidemiological overview of ocular emergencies of the year 2022, Clinical Epidemiology and Global Health.

initiatives reflect CCIL's commitment to building robust, inclusive, and sustainable healthcare systems that improve health outcomes and quality of life for vulnerable communities.

Impact Assessment of the CCIL health care projects were undertaken in compliance with CSR rules by the Makarand M Joshi & Co (MMJC), an independent organization, as a part of CCIL CSR reporting compliance in FY 2025-26. The objective of this assessment was to identify and report the social impact of CSR health

initiatives of CCIL, towards which MMJC employed the primary data collection through field visits and secondary data provided by implementing agencies. The projects were assessed on the parameters formulated by the OECD Development Assistance Committee (DAC) to comprehensively document and report the social impacts created by CCIL's CSR projects.

Key findings from the assessment study:

- CCIL has significantly strengthened the cancer and eye care ecosystem across multiple states in India for FY 23-24 by providing financial support to **1,387 cancer patients** and enabling **critical eye care services for 572 rural beneficiaries**, thereby improving access to essential healthcare services for vulnerable populations.
- CCIL has ensured inclusive healthcare access across gender groups, with a dedicated intervention in Tamil Nadu that supports **256 women cancer patients**, improving access to treatment, fostering independence, and promoting equitable healthcare outcomes.
- CCIL facilitated critical **eye surgeries for 572 beneficiaries**, providing free-of-cost treatment to patients identified through rural outreach camps, primarily addressing complex conditions such as cataract, glaucoma, and retinal disorders to beneficiaries belonging to economically disadvantaged households.
- Beneficiaries supported through the Indian Cancer Society under the Cancer Care Fund and Dr. Arun Kurkure Initiation and Treatment Fund reported a high level of satisfaction, with an average rating of **4.78 out of 5**, reflecting significant improvements across physical, emotional, and social dimensions, and indicating enhanced well-being throughout the treatment journey.
- CCIL's cancer care initiatives for women have demonstrated strong effectiveness, with a majority of beneficiaries completing their full course of treatment and follow-ups. The provision of non-medical support, including food and accommodation, has enabled holistic care and effectively mitigated access barriers, ensuring continuity of treatment for women patients.
- CCIL's interventions have contributed meaningfully to key global development priorities, including **Sustainable Development Goal 1 (No Poverty)**, **Sustainable Development Goal 3 (Good Health and Well-being)**, **Sustainable Development Goal 5 (Gender Equality)**, and **Sustainable Development Goal 10 (Reduced Inequalities)**, by improving healthcare access, reducing financial burden, and addressing disparities among vulnerable populations.



INTRODUCTION

Corporate Social Responsibility (CSR) activities in India refer to projects and activities undertaken by eligible Corporates in compliance with the requirements of Companies Act, 2013 and its subsequent amendments. In accordance with the aforementioned law, following class of companies are mandated to conduct impact assessment:

- Companies with minimum average CSR obligation of Rs. 10 crore or more in the immediately preceding 3 financial years; and
- Companies that have CSR projects with outlays of minimum Rs. 1 crore and which have been completed not less than 1 year before undertaking impact assessment.

The CCIL is a legally registered Indian company incorporated under the provisions of the Companies Act, 1956, and was established in the year 2001 as a key financial market infrastructure institution. Promoted primarily by major banks and financial institutions, at the behest of the Reserve Bank of India, CCIL plays a critical role in ensuring stability and efficiency in India's financial markets. Its core business involves providing clearing and settlement services for transactions in government securities, foreign exchange, money markets, and derivative segments, thereby reducing counterparty risk and enhancing market transparency. Operating at the national level, CCIL's primary areas of work include risk management, trade settlement, and development of robust financial market systems that support liquidity and operational efficiency. **Guided by the objective of strengthening the financial infrastructure of the country, CCIL is driven by a commitment to reliability, systemic risk reduction, and market integrity, while also integrating sustainability and social responsibility into its broader institutional vision.**

As a responsible business entity, CCIL undertakes social and health development initiatives across multiple locations in India under its Corporate Social Responsibility (CSR) framework, in alignment with the provisions of Section 135 of the Companies Act, 2013 and its subsequent amendments. At CCIL, CSR is guided by a strong ethos of ethical responsibility and a deep commitment to systemic risk reduction and meaningful community impact. **The company has consistently advanced health and well-being by reducing out of pocket expenses for patients, strengthening healthcare access and delivery systems in the domain of cancer care and critical eye care.** Its initiatives are designed to foster inclusive social development and creating lasting positive change in the lives of underserved communities.

The CSR cancer care and critical eye care projects funded by CCIL pertain to the item no (i) in the Schedule VII of the Companies Act 2013 and therefore are in alignment with the CSR compliance.

- **Item no (I):** "Eradicating hunger, poverty and malnutrition, **promoting health care including preventive health care** and sanitation and making available safe drinking water.

Under this provision, CSR initiatives of CCIL in cancer care and eye care contribute to improving quality of life, particularly for economically vulnerable populations.

- **Cancer Care:** CSR project include early detection programs funding for cancer treatment, like costs of chemotherapy. Since cancer treatment is often financially burdensome, such initiatives reduce healthcare access inequities and protect families from falling into poverty due to high medical costs.
- **Eye Care:** CSR support activities such as free eye screenings, cataract surgeries, vision correction programs, and awareness campaigns. These interventions help prevent avoidable blindness, restore vision, and enhance productivity, thereby indirectly reducing poverty and social exclusion.

Projects Overview

In the FY 2023–24, CCIL collaborated with reputed non-profit organizations to implement targeted initiatives aimed at improving access to quality healthcare services. It addressed systemic gaps in cancer care and critical eye health by supporting programs that emphasize early detection, affordable treatment, awareness generation, and capacity building of healthcare infrastructure. As a responsible company CCIL's approach aligned its investments with long-term sustainability goals and contributed to strengthening India's health-care ecosystem.

The following section provides an overview of the projects undertaken during FY 2023–24, highlighting their objectives, implementation approach, and contribution towards improving health outcomes and advancing equitable access to cancer care and eye health services in India.

S.No	Project	Project Description	Implementing Agency	Beneficiaries	Project budget approved by CCIL (INR)
1.	Contribution to emergency fund / seed fund to initiate cancer treatment and Complete financial adoption of children / young adult for cancer treatment.	<p>Contribution to Emergency Funding for Initial Diagnosis / Initiating treatment of cancer: To facilitate completion of investigations rapidly for diagnosis of cancer / commencement of treatment in children so that treatment starts without any delay.</p> <p>Complete financial adoption of children / young adult for cancer treatment: This includes complete financial support during the duration of cancer treatment provided to the children/young adults</p>	ImpaCCT Foundation, Tata Memorial Centre,	218	20,000,000
2.	Procurement of i) Cryoablation System, ii) Vacuum Assisted Breast Biopsy and iii)Neurosurgery Cranial Set.	<p>i) Cryoablation System: Cryoablation system is one type of tumor ablation technique that uses extremely cold gas to freeze and destroy abnormal cells or diseased tissue. It is useful for cancers of Breast, Lung, Liver, Kidney, Musculo-skeleton, Bone palliation, Fibroadenoma and cryo-immune therapy and</p> <p>ii) Vacuum Assisted Breast Biopsy System: Vacuum Assisted Breast Biopsy (VABB) System will help to overcome Core biopsy limitations of difficult access, better</p>	Tata Memorial Centre, Varanasi	500	1,47,96,432

S.No	Project	Project Description	Implementing Agency	Beneficiaries	Project budget approved by CCIL (INR)
		<p>representat-ion of sample for pathologic evalua-tion and avoids the need of general anaesthesia and surgical resection which was the norm for targeting such lesions prior to the days of VABB technique.</p> <p>iii) Neurosurgery Cranial Set: The aim of procuring Neurosurgery Cranial Set is to use for neurosurgical procedures.</p>			
3.	Dr. Arun Kurkure Initiation and Treatment Fund	Project for providing financial support to underprivileged patients who are unable to afford the initial costs of diagnostics and / or treatment.	Indian Cancer Society (ICS) (17 empanelled hospitals)	413	25,00,000
	Cancer Cure Fund (CCF)	Project for providing financial aid to the underprivileged and low-income patients diagnosed with any treatable / early detected cancers			75,00,000
4.	Support for complicated major eye surgeries performed on indigent patients	The project provides free treatment to the indigent patients identified through the camps conducted in the rural areas or visiting from across the country who are suffering from complicated eye disorder which requires surgery.	Medical Research Foundation. (Sankara Nethralya)	572	2,00,00,000
5.	Support for Women with Cancer	The project supports CSR contribution shall be utilized by Cancer Institute towards free of cost (including food and stay) treatment (Surgery, Radiotherapy and Chemotherapy) of indigent women patients suffering from breast cancer, ovarian cancer or uterine cancer.	Cancer Institute (WIA)	256	1,50,10,000

Scope of the Study:

This assessment evaluated the social impact of the Corporate Social Responsibility (CSR) initiatives undertaken by The CCIL during FY 2023–2024. Conducted in accordance with Section 135 of the Companies Act, 2013 and the CSR Policy (Amendment) Rules, 2021, the study specifically focuses on CCIL's interventions in cancer and critical eye care (five projects).

The assessment incorporates perspectives from a diverse stakeholder group, including beneficiaries, healthcare professionals, and implementing partners. Findings are based on data shared during the assessment period and serve as an indicative performance evaluation of the current cycle.



Objective of this assessment:

The objective is to determine how these programs have strengthened healthcare systems for underserved populations particularly women and children—by improving early detection, enhancing treatment outcomes, and mitigating the financial burden of critical illness. Ultimately, the report assesses CCIL's contribution toward national priorities of equitable and inclusive healthcare.

Independent Assessment Agency:

Makarand M Joshi & Co (MMJC)

Makarand M. Joshi & Co. (MMJC) is a peer-reviewed firm of Practising Company Secretaries in India with over 26 years of professional experience in corporate governance, compliance, and advisory services. MMJC is recognized for delivering end-to-end secretarial and compliance services including designing of CSR projects, project monitoring, due diligence, audit and Impact assessment of CSR projects. More information about the firm can be accessed through its website – www.mmjc.in



STUDY METHODOLOGY

MMJC utilized a mixed-methods research framework to evaluate the outcomes of CCIL's cancer and critical eye care initiatives for FY 2023–24. By integrating primary field evidence with secondary institutional data, this approach allows for the triangulation of findings, ensuring a high degree of reliability and contextual depth.

Primary Research: The assessment involved on-ground field visits to observe service delivery and infrastructure firsthand. This was supported by structured, questionnaire-based surveys and telephonic interactions to capture direct feedback on service utilization and satisfaction from beneficiaries in both urban and remote areas.

Onsite visits were conducted:

1. BMC- Balco Medical Centre, Raipur
2. INDO- Basavatarakam Indo American Cancer Hospital & Research Institute, Hyderabad, Telangana
3. KCH-Kailash Cancer Hospital and Research Centre, Goraj, Gujarat
4. PADHAR- Padhar Hospital
5. SKIMS- Sher-I-Kashmir Institute of Medical Sciences, Soura, Jammu and Kashmir
6. CI-Cancer Institute, Adyar, Tamil Nadu
7. CMC- Christian Medical College, Vellore, Tamil Nadu
8. MPMMCC - Mahamana Pandit Madan Mohan Malaviya Cancer Centre, Varanasi, Uttar Pradesh
9. TMH- Tata Memorial Hospital, Mumbai, Maharashtra
10. Medical Research Foundation (Sankara Nethralaya), Chennai and Kolkata
11. Cancer Institute (WIA), Chennai

Secondary Research: Institutional data, including monitoring reports and beneficiary records, were reviewed. This quantitative data was contextualized through a review of national healthcare policy frameworks and relevant literature concerning cancer and eye care in India.

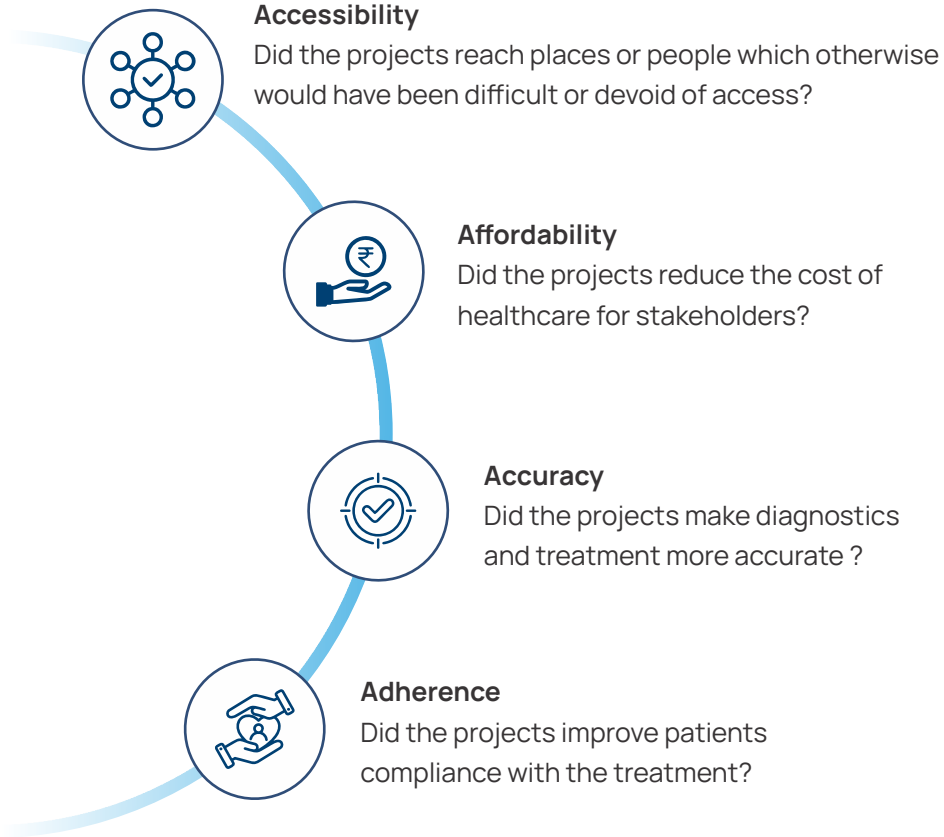


Interview with patients at - Mahamana Pandit Madan Mohan Malaviya Cancer Centre, Varanasi (left) and CMC Vellore (right)

Objectives of the study:

The objective of the study was to assess the effectiveness and impact of CSR-supported cancer care and healthcare initiatives.

Key Questions for the assessment



Assessment Framework

OECD- DAC Evaluation Criteria Framework (Source: OECD, 2021) OECD- DAC Evaluation Criteria Framework: MMJC’s findings from the Impact Assessment of The Clearing Corporation of India Limited (CCIL) CSR projects FY (2023-24) are presented in the following sections using the OECD Evaluation Criteria, developed by the OECD Development Assistance Committee (DAC). This analytical framework, comprising six criteria, enables an inclusive and comprehensive understanding of the social change in terms of policy, strategy, programme, project, or activity promoted and shaped by the CCIL CSR projects in the vulnerable sections of society in India.



UN Sustainable Development Goals (SDGs): is a set of globally recognized 17 goals and 169 targets to address a wide range of social, economic, and environmental challenges. The approach to sustainability adopted and promoted by the goals is giving equal consideration to all three dimensions. The Government of India committed to the UN Summit for the Adoption of Post-2015 Development Agenda. Following the Prime Minister’s statement at the UN, government policies and agendas for development underwent a paradigm shift with the incorporation of the motto, ‘Sabka Saath Sabka Vikaas’.

SUSTAINABLE DEVELOPMENT GOALS



Sustainable Development Goals by United Nations

SOCIAL IMPACT CREATED BY THE CCIL

STUDY FINDINGS

During the 2023–24 financial year, **CCIL** provided essential funding for advanced medical technology and subsidized treatment by partnering with premier institutions—including **Tata Memorial Centre (TMC)**, **Mahamana Pandit Madan Mohan Malaviya Cancer Centre (MPMMCC)**, the **Indian Cancer Society (ICS)**, the **Cancer Institute (WIA)**, and **Medical Research Foundation (Sankara Nethralaya)**.

These interventions targeted economically vulnerable groups—specifically children, young adults, and women—covering the full range of care from early diagnosis to complex surgeries for cancer affected patients. Beyond oncology, CCIL enabled life-changing eye surgeries for indigent patients identified through rural outreach. Through these initiatives, CCIL continues to reduce healthcare inequities and strengthen the sustainability of India's medical ecosystem.

Objectives and Impacts of CCIL CSR Projects identified through review of project

S.No	Objective of the CCIL CSR Projects	Impacts
1.	To provide financial support for under privileged patients requiring cancer diagnosis and treatment.	Patients requiring diagnosis and cancer treatment have less out-of-pocket expenses, thereby reducing the financial burden of healthcare
2.	To enable early initiation of cancer treatment through emergency/seed funding support such as Cancer care fund and Arun Kurkure Initiation and Treatment Fund.	Empower individuals with symptoms or a family history of cancer to secure early diagnoses, significantly improving survival rates and clinical outcomes, through enhanced awareness and proactive screening
3.	To ensure complete financial adoption of children and young adults undergoing cancer treatment.	Children suffering from cancer get timely and quality treatment.
4.	To strengthen healthcare infrastructure by procuring advanced medical equipment, such as Cryoablation Systems and Vacuum Assisted Breast Biopsy (VABB) systems, thereby enabling improved diagnosis and treatment outcomes.	High quality diagnostic and treatment facility leads to accurate and timely diagnosis, improve treatment outcomes.
5.	To enhance access to quality cancer care services across reputed medical institutions in different regions of India.	Enhance access to uniform, high standards of care for cancer prevention, diagnosis, and treatment throughout the nation by mirroring the national cancer care strategy - National Cancer Grid. Act as a force multiplier through a network of 17 reputed hospitals across India.
6.	To support free or subsidized treatment for women suffering from cancers such as breast, ovarian, and uterine cancer, including associated costs like food and accommodation.	Women prioritize medical intervention for high-recovery cancers, demonstrate treatment adherence and a rejection of fatalistic attitudes.

S.No	Objective of the CCIL CSR Projects	Impacts
7.	To improve access to critical eye care surgeries for indigent patients, particularly in rural and underserved areas.	Independence in daily living for people with severe eye care requirements and improved quality of life.
8.	To promote equity in healthcare access by focusing on vulnerable and marginalized populations.	People from low income and marginalized backgrounds are able to access quality healthcare.

The following sections provide detailed analysis of findings from the impact assessment study vis-à-vis the OECD-DAC Assessment parameters.

Relevance:

India faces a significant and growing healthcare crisis, with cancer and visual impairment disproportionately impacting women, children, and rural communities. These challenges are exacerbated by systemic barriers, like low screening rates with only 0.9% of women undergoing breast cancer screening, high treatment costs and a high prevalence of late-stage diagnoses. To address these evidence-based gaps, CCIL's CSR interventions focused on affordability and advanced medical technology. Breast cancer alone accounts for 13.5% of new cases and 10% of cancer-related deaths in the country. Furthermore, India carries a staggering paediatric cancer burden. A nationally representative mortality study (Million Death Study) estimated that approximately 13,700 deaths annually due to childhood cancer in India with a mortality rate of 37 per million children per year³.

Case Study:

Rabia's Fight against Ovarian Cancer at Sher-i-Kashmir Institute of Medical Sciences, Srinagar, Kashmir.

At just 17 years of age, Rabia's life took an unexpected and devastating turn. What began as severe abdominal pain soon led to a diagnosis that shook her and her family to the core, ovarian cancer. For a teenage girl, the news was not only physically overwhelming but also emotionally shattering. The prospect of losing her ovaries at such a young age carried deep psychological implications, affecting her dreams, identity, and sense of future.

Rabia's family had no financial cushion for medical emergencies. The diagnosis felt like their world had collapsed overnight. The cost of treatment, repeated hospital visits, chemotherapy sessions, and medications posed an unbearable financial burden for the family. At this critical juncture, ICS - CCIL CSR contribution stepped in as a lifeline. Recognizing the urgency and gravity of her situation, ICS extended comprehensive support by funding her chemotherapy, medications, and essential treatment costs.

This timely intervention not only eased the financial strain on Rabia's family but also restored their hope. Freed from the fear of unaffordable medical expenses, Rabia was able to focus entirely on her recovery. With consistent treatment, emotional strength, and unwavering support, she continued her battle against cancer with resilience and hope. Despite these overwhelming challenges, Rabia emerged as a true fighter. With remarkable courage and determination, she chose to confront the disease head-on.



The Dr. Arun Kurkure Initiation and Treatment Fund and the Cancer Cure Fund at the Indian Cancer Society and treatment while that of screening uptake is much lower in rural women, the proportion of women who had undergone breast and cervical cancer screening all over India was 0.9% and 1.9%, respectively. In females breast cancer is the leading cause of cancer incidence and mortality in India and accounted for 13.5% of new cancer cases and 10% of cancer-related deaths in 2020. CCIL's CSR support of the Tata Memorial Centre (TMC), Dr. Arun Kurkure Initiation and Treatment Fund and the

³ Gupta S, Morris SK, Suraweera W, Aleksandrowicz L, Dikshit R, Jha P. Childhood Cancer Mortality in India: Direct Estimates From a Nationally Representative Survey of Childhood Deaths.

Cancer Cure Fund (CCF) implemented by the Indian Cancer Society (ICS), ensures that children, young adults, women and other marginalized people receive immediate financial assistance, mitigating the economic catastrophe often associated with long-term cancer care.

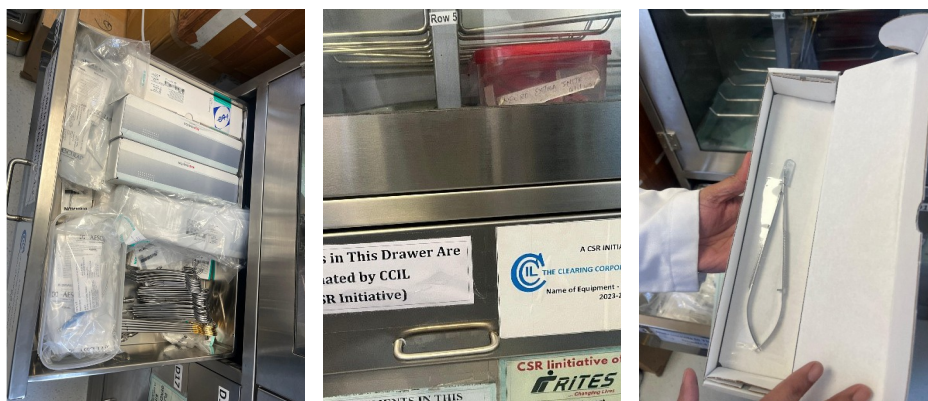
CCIL CSR contribution to support cancer patients at Tata Memorial Hospital, Mumbai supports treatment of children and reduces financial burden of treatment. India carries one of the largest global burdens of critical eye care challenges, with approximately 4.95 million blind individuals and 70 million people with visual impairment⁴.

Beyond oncology, CCIL's commitment extends to expanding access to specialized eye care for indigent patients across multiple rural locations. By prioritizing economically weaker sections and collaborating with reputed national healthcare institutions, CCIL ensures its CSR interventions are directly aligned with national priorities. These multi-dimensional projects not only provide immediate clinical relief but also strengthen the long-term accessibility and equity of India's healthcare ecosystem.

Through partnership with Mahamana Pandit Madan Mohan Malaviya Cancer Centre in Varanasi, CCIL CSR funded acquisition of Neuro Craniotomy Instruments and two medical devices for diagnosis of cancer - Cryoablation System and Vacuum-Assisted Breast Biopsy Systems. Both systems play complementary roles in comprehensive cancer care, covering diagnosis to treatment in a minimally invasive way and reducing hospitalization days.

- A **Vacuum-Assisted Breast Biopsy System** is a minimally invasive device used to collect breast tissue samples for diagnosis. It uses a hollow probe and gentle suction (vacuum) to remove multiple tissue samples through a single small incision. Guided by imaging like ultrasound or mammography, it is considered to improve accuracy of diagnostics, cause minimal scarring and quicker recovery than surgical biopsy.
- A **Cryoablation System** is a medical device that destroys abnormal tissues using extreme cold. The treatment is known as Thermal ablation, also called "cold coagulation" or thermocoagulation. Commonly used in cancer treatment and cardiac procedures, for localized treatment. It is a portable device, lightweight and considered a good option for treatment in low- and middle-income countries (LMIC) and field clinics.

Neuro Craniotomy Instruments funded by CCIL



Neuro Craniotomy Instruments are surgical tools used by neurosurgeons. 61 individual instruments were purchased using CCIL funding.



Vacuum-Assisted Breast Biopsy Systems and Cryoablation System



Coherence



CCIL CSR projects mirrors Government of India’s public health programmes and acts as a force multiplier for national healthcare priorities. They also promote and make possible the achieving of SDG targets. The design and implementation of these projects closely align with existing policy directions aimed at reducing the burden of non-communicable diseases, improving access to affordable healthcare, and addressing inequities in service delivery.

At the national level, CCIL’s cancer care interventions are well aligned with the National Programme for Prevention and Control of Non-Communicable Diseases (NP-NCD), which focuses on prevention, early diagnosis, and management of cancers and other chronic diseases. By supporting early-stage diagnostics, treatment funding, and advanced medical equipment, CCIL contributes to strengthening the continuum of cancer care envisaged under this programme. Additionally, financial assistance to economically weaker patients complement the objectives of Ayushman Bharat Pradhan Mantri Jan Arogya Yojana, which aims to reduce out-of-pocket healthcare expenditure and enhance financial protection for vulnerable populations.

The support extended to women-specific cancer treatment aligns with national efforts under reproductive and women’s health programmes, while the focus on paediatric and young adult cancer patients complements broader child health and survival strategies. Further, CCIL’s investment in critical eye care, particularly in rural areas, is coherent with the objectives of the National Programme for Control of Blindness and Visual Impairment (NPCBVI), which seeks to reduce avoidable blindness through early detection and accessible surgical interventions.

CCIL’s CSR initiatives in cancer care and eye care contribute to multiple Sustainable Development Goals through a comprehensive and inclusive approach.

SDG Goal	CCIL Contribution to the SDGs
	<ul style="list-style-type: none"> • Strengthened access to affordable and quality healthcare services by providing seed funding to cancer and eye care in 17 highly reputed hospitals across India. • Supported early detection, diagnosis, and treatment of cancer. • Reduced number of people at risk of avoidable blindness through critical eye surgeries. • Contributed to lowering premature mortality from non-communicable diseases (NCDs). • Enhanced healthcare infrastructure through advanced medical equipment such as Cryoablation and Vacuum Assisted Breast Biopsy systems at Mahamana Pandit Madan Mohan Malaviya Cancer Centre (MPMMCC), Varanasi (Unit of TMC)
	<ul style="list-style-type: none"> • Reduced financial toxicity of healthcare and catastrophic out-of-pocket expenditure on cancer and critical eye care treatment. • Provided financial protection to economically vulnerable patients whose family income comes under the EWS (Economically Weaker Section) as recognised by the Government of India. • Prevents households from falling into poverty due to healthcare costs.

SDG Goal	CCIL Contribution to the SDGs
	<ul style="list-style-type: none"> • Addressed rising incidence of cancer among women (breast, ovarian, uterine cancers). • Provides free and accessible treatment for women patients. • Reduces gender disparities in healthcare access and outcomes. • Promotes inclusive healthcare for women from low-income backgrounds.
	<ul style="list-style-type: none"> • Bridged healthcare access gaps for low-income and marginalised populations through funding in cancer, such as the Cancer Care fund and Dr Arun Kurkure Initiation and Treatment Fund. • Targeted rural and underserved regions with limited healthcare access through various eye care camps and provides them with free treatment. • Focused on provided equitable service delivery across socio-economic groups. • Supports vulnerable populations including women, children, and young adults.

Overall, CCIL's CSR initiatives exhibit strong coherence by complementing government efforts and contributing to global development goals. Rather than duplicating existing systems, these interventions act as catalytic support mechanisms that enhance reach, improve accessibility, and strengthen the effectiveness of India's healthcare ecosystem.



Patients at Padhar Hospital, Madhya Pradesh

Effectiveness

CCIL- Cancer Care Initiatives

1. Equitable access to cancer care for low-income households

The initiative has significantly enhanced access to cancer care for economically vulnerable populations, with 67% of respondents belonging to low-income households earning less than ₹10,000 per month and almost 27% earning less than 20,000 per month. By targeting financially constrained patients, the program has contributed to reducing inequities in access to life-saving cancer treatment.

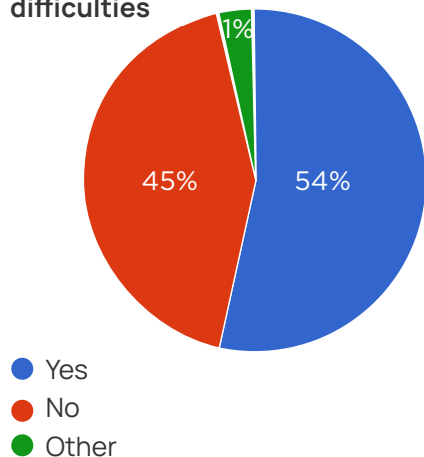
2. Timely Treatment for Cancer patients

The provision of financial support has played a decisive role in enabling timely treatment, with over 50% of respondents indicating that they had delayed or foregone treatment due to financial constraints. The initiative has effectively minimized delays in treatment initiation, thereby improving the likelihood of better clinical outcomes.

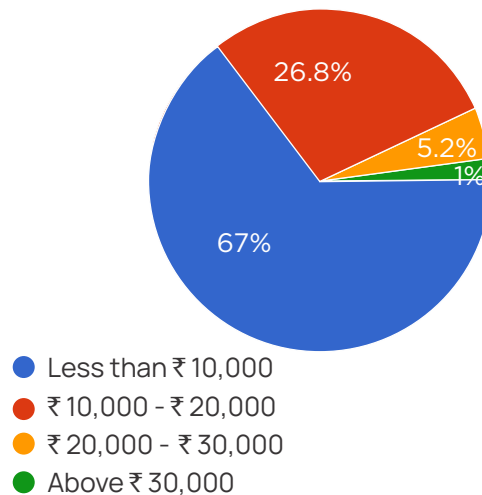
3. Enhanced Treatment Adherence (Low Dropouts)

With a treatment completion rate of approximately 91.8% among the respondents, the program effectively ensured treatment completion and survival. The high completion rate reflects the program's effectiveness in supporting patients through the treatment cycle, a critical determinant of improved survival outcomes.

Deferred diagnosis/treatment due to financial difficulties



Monthly household income



Doctors' perspective:

Doctors highlighted that there is increased treatment adherence, but clinical funding alone is insufficient due to insurmountable logistical burden. They highlighted poverty as the most challenging aspect of treatment. Outstation patients frequently lack funds for repeated travel (even basic bus fare) and essential nutrition. Overcrowded urban centres (e.g., Bangalore) create a persistent crisis for safe accommodation for patients and their caregivers. Treatment-induced physical weakness leads to an immediate loss of daily wages, causing total household economic collapse for primary breadwinners. Additionally, physical changes trigger social stigma and isolation, financial vacuum post-treatment leaves survivors unable to maintain remission protocols.

Case Study:

Azijul (age 10), was supported through the CCIL Adoption Support Program from 2023 for treatment of Burkitt's Lymphoma. Resident of West Bengal, his father is a farm worker earning approximately 6000/- per month. The family sold their land to bear costs of initial treatment and travel to Mumbai for further treatment. Based on the conversation and complete psycho-social-economic assessment at Tata Memorial Hospital, the family received financial support. The support was holistic including accommodation, food, blood products, education, and counselling. Azijul and his parents have become motivated and very confident about being at the hospital and as informed by TMH, have been adhering to all the instructions given by the medical team. Azijul's health is improving well, and currently he is undergoing chemotherapy treatment.

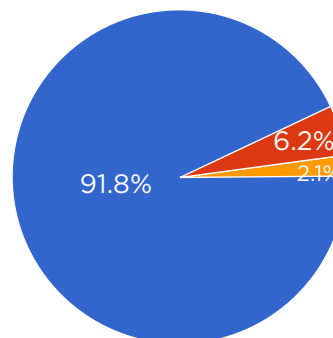


4. Increase in positive clinical outcomes

A significant proportion of respondents were diagnosed at early stages, indicating improved linkage between diagnosis and treatment and enhancing the probability of successful outcomes. The initiative has enabled access to comprehensive cancer care, including chemotherapy, surgery, and radiation therapy, ensuring holistic treatment coverage.

After receiving financial support, were you able to adhere to the full course of treatment as advised (chemotherapy / radiation / follow-ups)?

- Yes - Fully
- Yes - but with occasional delays
- No - had to discontinue or skip

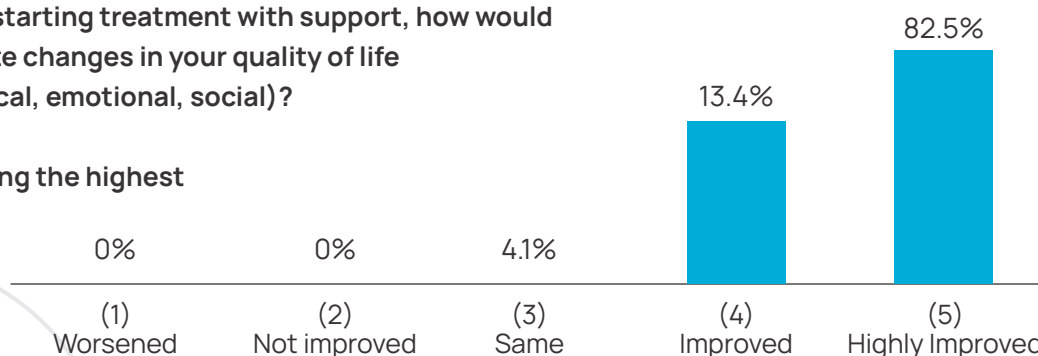


5. Quality of Living

The program has had a substantial positive impact on beneficiaries' quality of life, with an average satisfaction rating of 4.78 out of 5 across physical, emotional, and social dimensions. High beneficiary satisfaction levels reflect improved well-being, reduced stress, and enhanced confidence during the treatment journey.

Since starting treatment with support, how would you rate changes in your quality of life (physical, emotional, social)?

(5) being the highest



Nazani Begum, 60+ Breast Cancer survivor from CMC Vellore

'I am lucky with my family. People here till today discriminate against cancer patients. They do not understand that it is not spread by touch. My children are good. I sold gold for my treatment. Now we are retired but my children support us. This support from ICS and CMC reduced costs for us. We are aged now so this was very essential for us. Although medicines are not included in the support, I am very grateful for this help. So we come for any meeting, even if it is not a doctor visit day. We live nearby, so it is easy for us.'

She is undergoing follow up sessions at CMC, Vellore.



6. Cancer Care Network Strengthening

Hospitals have emerged as critical enablers in the delivery of CSR benefits, with over half of the beneficiaries accessing support through hospital networks, highlighting strong institutional integration. The initiative has strengthened the healthcare delivery ecosystem by enabling linkage between patients and financial support mechanisms.

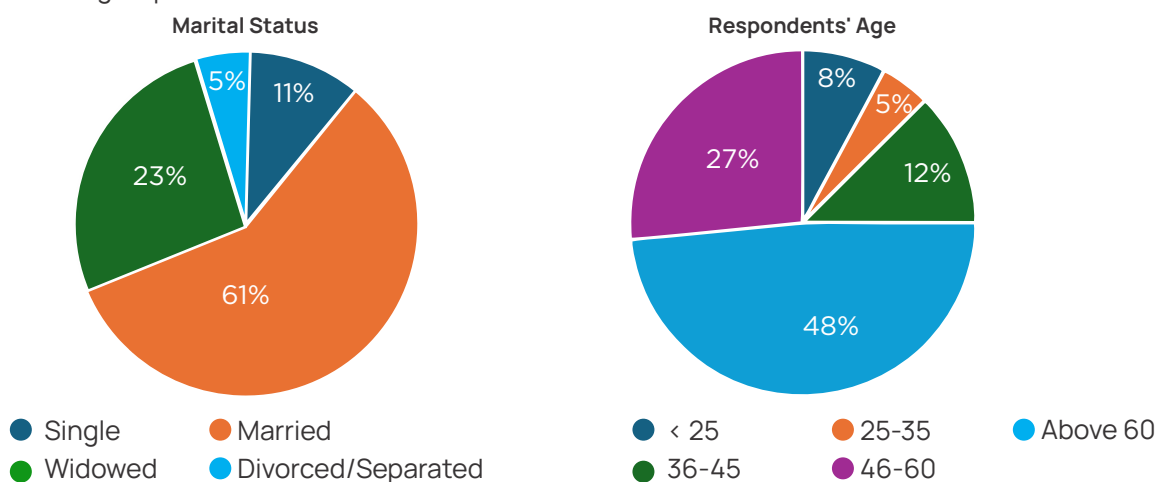
How did you come to know about the scheme (CCF or AIKTF) providing financial support for treatment/diagnosis?



Women specific cancer care by CCIL

1. Effective outreach and targeting of needy women

The initiative demonstrates strong outreach with highly vulnerable women, with 100% of respondents belonging to low-income households (below ₹10,000/ month), with 23% of the respondents being widowed women indicating effective outreach to socially and economically marginalised groups.



- A significant proportion of beneficiaries are daily wage labourers (29.7%) and homemakers (40.6%), reflecting the program's effectiveness in reaching financially dependent and informal workforce populations.



2. Access to Comprehensive Care

The provision of completely free treatment including surgery, chemotherapy, radiotherapy, medicines, food, and accommodation has ensured holistic access to cancer care for women who would otherwise face substantial financial and logistical barriers. The initiative has effectively addressed both medical and non-medical needs, thereby enabling uninterrupted access to treatment services.

Case Study:

Mallika (in the age group 46-60 years), Uterine Cancer survivor at Cancer Institute

"I felt lost when I heard the diagnosis, especially being a widow with no income and coming from a place where so many are getting sick. Today, I feel much better—not just because the surgery and chemo are done, but because I know I wasn't left to face this alone. I only hope this help reaches more people in my village who are still suffering."

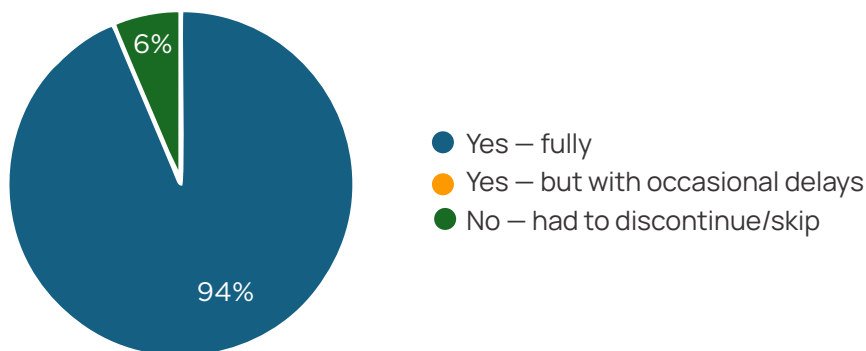
Mallika's case highlights the barriers of gender, widowhood and geographic distance from treatment centers. Residing in the Kovilur area of Karaikudi, she belongs to a community where cancer incidence is reportedly high due to proximity to local chemical factories. As a widow with no independent income and a monthly household budget of less than ₹10,000, the cost of tertiary cancer care in a city like Chennai was an insurmountable obstacle.

Through the CCIL-supported oncology fund, Mallika was able to access a full spectrum of multi-modal treatment, including Surgery, Radiotherapy, and Chemotherapy. Despite an initial delay due to administrative processing on the first day, the support system ensured she could navigate the complex clinical pathway. The recommendation of a relative in Chennai acted as a vital bridge, allowing her to transition from her rural hometown to specialized urban facilities. She is faring better now.

3. Treatment Uptake & Continuity

With approximately 94% of respondents completing their full course of treatment and follow-ups, the program demonstrates high effectiveness in ensuring treatment adherence and continuity of care. The high completion rate is particularly significant given the socio-economic vulnerability of beneficiaries, indicating strong program support mechanisms.

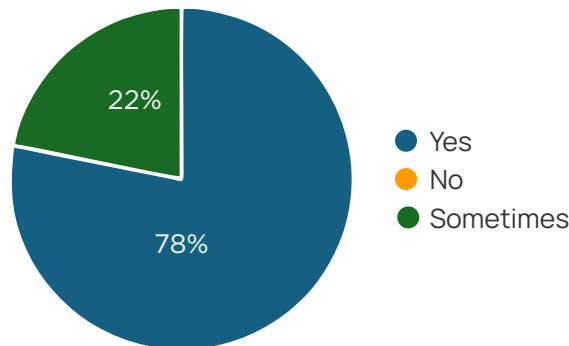
Have you completed treatment?



4. Reduction of Access Barriers

By covering essential support services such as hospital stay, food, and travel, the initiative has effectively mitigated non-medical barriers that often lead to treatment discontinuation among women patients at WIA. The fact that over 78% of beneficiaries required residential treatment support highlights the critical role of such provisions in enabling access to tertiary care facilities.

Did you have to stay at hospital for treatment?



5. High Clinical Effectiveness

The initiative has enabled access to multi-modal cancer treatment, with beneficiaries receiving surgery, chemotherapy, and radiotherapy, ensuring comprehensive clinical care. The high prevalence of breast cancer cases among beneficiaries reflects alignment with the major cancer burden among women in India.

6. High focus on Well-being enhanced treatment adherence and completion

The integration of counselling, nutritional support, and accommodation has strengthened the overall effectiveness of the intervention by addressing psychosocial care needs. Such holistic care provision enhances treatment adherence and improves the overall patient experience during prolonged treatment cycles.

Case Study:

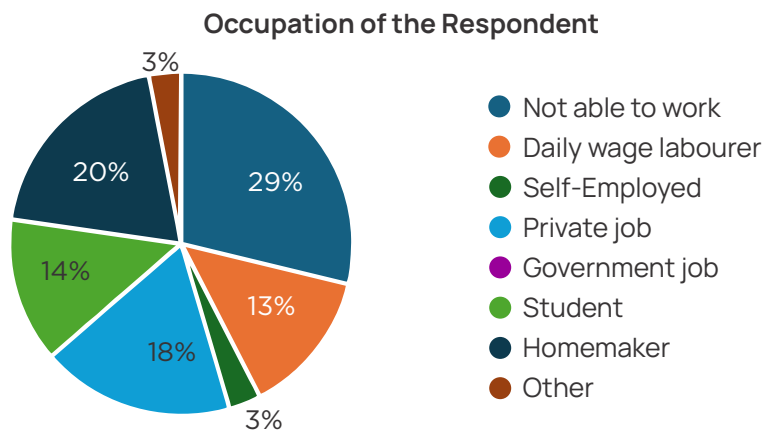
Shifabi, a 12-year-old girl, suffering from Ewing's Sarcoma. She is undergoing treatment at Tata Memorial Hospital since 2023 (April). They are from Mumbai, Maharashtra. Her father is working as a laborer and earns Rs. 6,000/- per month, approximately. Her mother is a housewife. Shifabi has two siblings. Shifabi's grandmother is her constant caregiver as her mother needs to care for her siblings as well. Her story highlights the need for involvement of extended family and the variety of non-medical impacts of cancer. Being a girl child the parent were stressed about hair loss and required counselling support. They were assured by the social worker that after completion of the treatment, her hair would grow as normal as before. They also receive holistic support from the hospital for food, blood products, education, and counselling. As updated by the hospital, she is adhering to the treatment plan.



CCIL-EyeCare Initiatives

1. Targeting and Inclusion

- The initiative effectively targets elderly and economically vulnerable populations, with the majority of beneficiaries aged above 50 years and nearly half belonging to households earning less than ₹10,000 per month.
- A significant proportion of respondents were homemakers (20%) and daily wage labourers (13%) and people who are unable to work (29%), indicating strong outreach to economically dependent and informal workforce groups.

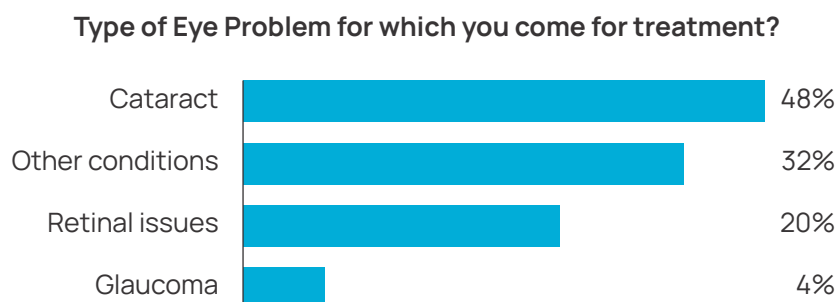


2. Access to Essential Eye Care Surgery / Curative Services

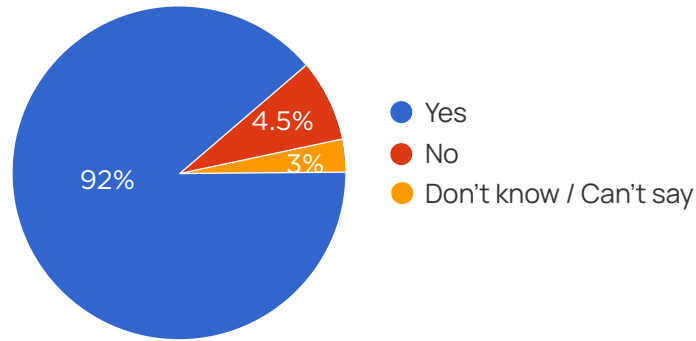
Provision of free-of-cost eye treatment, including surgeries and spectacles, has ensured access to essential vision care for underserved populations who would otherwise face affordability barriers. The initiative has successfully addressed a range of critical eye conditions, including cataract, retinal disorders, and glaucoma, reflecting comprehensive service delivery.

3. Quality of Care & Clinical Effectiveness

High levels of procedural comfort were reported, with 92% of respondents experiencing smooth and complication-free surgeries, indicating strong clinical quality and service delivery standards. The provision of post-operative support, including free spectacles, further enhances the effectiveness of treatment outcomes.



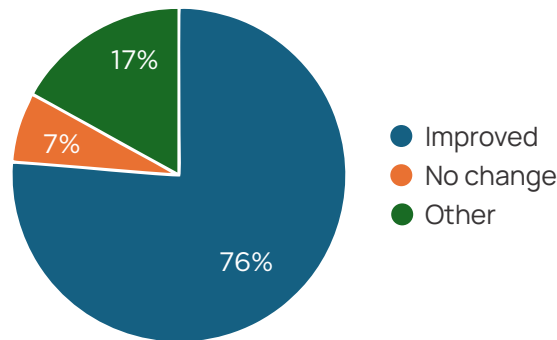
Did you feel safe and comfortable during the surgery?



4. High rate of positive clinical outcomes

More than half of the respondents (76%) reported significant improvement in vision post-surgery, demonstrating high effectiveness in achieving clinical outcomes. Beneficiaries consistently reported enhanced visual clarity and functional vision compared to pre-treatment conditions.

How has your vision improved after the surgery?



5. Improved quality of life and living

Improved vision has translated into tangible functional outcomes, with beneficiaries reporting the ability to return to work, perform daily activities independently, and reduce reliance on caregivers. The initiative has contributed to restoring livelihood opportunities, particularly for daily wage workers and elderly individuals engaged in informal work.

In 2023-24, 1146 major surgeries were done in Chennai and Kolkata, CCIL CSR contribution grant included INR 17,500/patient. Outreach is done in slum areas within Chennai, nearby cities like Kanchipuram, Chittoor and Vellore, and in Andhra Pradesh. It is the only hospital authorized by the central government to run Mobile Eye Surgical Unit. The patient support services provide transport facilities between its campuses and if required out station travel as well.

CCIL- Provision of Medical Devices

Feedback from doctors at MPMCC

Prior to purchase of neuro cranial set, the neurosurgery department was forced to share instruments across multiple specialties, leading to logistical conflicts. Surgeons often relied on incomplete or improvised instrument combinations, which is not optimal for high-stakes cranial procedures. Frequent re-sterilization cycles were required between cases causing critical delays in surgical schedules. Procurement of the instruments has streamlined the OT workflow, ensuring specialized instrument availability, reducing surgical wait times, and enabling the facility to manage complex neurosurgical cases in-house without external dependency. The cryoablation system is minimally invasive, precision - image guided, repeatable, enables quicker recovery. It is precise and reduces risk to organs.



Overall, the CSR initiatives of CCIL demonstrate a high degree of effectiveness in addressing critical healthcare needs across cancer care and eye health. The interventions have successfully translated financial and institutional support into tangible health outcomes, particularly by enabling timely access to treatment, ensuring high rates of treatment completion, and improving clinical and functional outcomes among beneficiaries.

Efficiency

- **Integration of service:** CCIL's project strategy successfully merges financial disbursements with direct clinical delivery. The timely and need-based allocation of funds, enable critical interventions at decisive stages of treatment and minimizing delays in care delivery. The initiatives exhibit high conversion efficiency, where financial inputs are consistently translated into measurable clinical, functional, and socio-economic outcomes. By addressing both direct and indirect cost barriers, the program enhances the overall efficiency of healthcare utilization and reduces the risk of treatment discontinuation.
- **Streamlined Processes:** The hospital social workers act as a specific point of contact for patients and provide bridge services between patients and clinicians. This provides a necessary 'human touch', who can translate the complicated treatment plans and hospital procedures, ensuring a positive experience of patients and care givers. A lean 2 step administrative protocol ensure agility and timely disbursement of benefits to high-risk patients.

Respondent parents at the Tata Memorial Hospital highlighted the easy access and information availability, made it easy for them to navigate the hospital. They appreciated the staff approach and behaviour being equal to all people and that medical information is given in a sensitive and caring way. Information is given in both written and oral formats.

- **Targeted and evidence Based Program Design:** The prioritization of highly treatable cancers and patients with higher recovery potential, adjudged by a panel of experts, ensures high treatment outcomes and reduce early mortality from the disease.
- **Leveraging expert institutions:** CCIL optimizes its CSR investment by leveraging a network of India's premier oncology and eye care centres. The institutions include Tata Memorial Centre, Medical Research Foundation (Shankar Netralaya), expert implementation agency like Indian Cancer Society and 17 empanelled hospitals like Christian Medical College, Vellore.

Impact

Cancer Care Initiatives

CCIL's cancer care interventions have created substantial life-saving impact by addressing one of the most critical barriers in cancer treatment i.e. financial accessibility.

Survival Outcomes:
 By mitigating the economic strain on families, the project has virtually eliminated treatment dropouts, ensuring the continuity of care essential for long term remission and recovery. A significant proportion of beneficiaries indicating that they would have otherwise delayed care due to financial constraints. Early-stage diagnosis among a substantial share of beneficiaries has further strengthened the impact by increasing the likelihood of successful treatment outcomes. A treatment completion rate of more than 90% serves as a critical indicator of program success, survival of patients.

Shift towards multi-modal care:
 The support for multi-modal treatment (chemotherapy, surgery, and radiation therapy) has ensured comprehensive cancer care, thereby improving the overall effectiveness of clinical interventions. The initiative has reduced financial distress among low-income households, preventing catastrophic health expenditure and supporting economic stability during prolonged illness.

Financial Protection for families: The initiative provides a vital social safety net for low-income households. By preventing catastrophic health expenditures, the program preserves the economic stability of families, preventing them from falling into a cycle of poverty due to prolonged illness.

Case Study:
 Fatima – A Fight against Acute Lymphoblastic Leukaemia

Fatima's illness has not dimmed her artistic spirit. With support from CCIL-ICS, she is courageously battling Acute Lymphoblastic Leukaemia at Sher-i-Kashmir Institute of Medical Sciences, Sri Nagar. The prolonged treatment costs was insurmountable for her parents. Through this funding, her family has a safety net to ensure treatment adherence and provide Fatima a renewed chance at life and a healthier future.



Women-Specific Cancer Care Initiative

The women-focused cancer care initiative has generated deep and transformative impact, particularly among socially and economically vulnerable women.

- Reduced Intersectional vulnerabilities in healthcare access:** The program successfully reached highly marginalized groups, including widows, divorced women, and those with no independent income, thereby addressing intersectional vulnerabilities in healthcare access.
- Promoted multi-modal care:** By providing completely free and comprehensive treatment including surgery, chemotherapy, radio-therapy, medicines, food, and accommodation, the initiative has eliminated both financial and logistical barriers to care. The initiative has also delivered strong non-clinical impact, including improved emotional well-being, dignity, and social security, particularly important for women undergoing long-term treatment.
- Equity through Residential Care:** With over 78% of beneficiaries requiring residential support, the program's provision of accommodation has bridged the urban-rural divide. This intervention has transformed tertiary healthcare from a distant luxury into an accessible reality for women in remote and underserved regions.
- High Treatment Outcomes:** A treatment completion rate of 93.7% among women beneficiaries highlight sustained engagement and improved health outcomes in a group that is often at risk of treatment discontinuation.

Impact of Eye Care Initiatives

CCIL's eye care interventions have created immediate, visible, and high-impact outcomes, particularly in restoring vision and improving quality of life.

High success rate conversion of critical surgeries:

The initiative has successfully addressed critical eye conditions such as cataract, retinal disorders, and glaucoma through free-of-cost surgical interventions and follow-up care. A majority of beneficiaries reported significant improvement in vision post-surgery, demonstrating strong clinical effectiveness. The provision of free spectacles and high-quality surgical care has further strengthened outcomes and ensured sustained visual improvement.

Functional and Livelihood Resilience:

Restoration of vision has led to substantial functional impact, including improved mobility, ability to perform daily activities independently, and reduced reliance on caregivers. The intervention has enabled beneficiaries, particularly daily wage workers, to return to work and regain livelihood opportunities, thereby contributing to long-term economic resilience.

Catalyst for social inclusion for elderly:

Among elderly beneficiaries, free surgery and eye care reduced social isolation and dependency. Improved vision enhanced confidence encouraged social participation, and overall well-being.

Overall, CCIL's CSR initiatives have generated strong and sustained impact by not only improving clinical outcomes but also transforming the socio-economic conditions of beneficiaries. By enabling timely treatment, ensuring continuity of care, and restoring functional ability, the programs have significantly enhanced quality of life and reduced vulnerability among underserved populations.

Sustainability

- **Strategic Funding and Handholding:** Sustainability of the CCIL CSR projects is anchored in a robust governance framework moderated and overseen by a panel of esteemed medical professionals and executed by premier healthcare institutions. This partnership model ensures that resource allocation is technically sound and aligned with the requirements of longitudinal care. By providing consistent, multi-year support, CCIL addresses handholding necessary for completion of prolonged cancer treatment protocols. brief note on the institutions
- **Targeted and Evidence-Based Program Design for high treatment outcome:** To optimize clinical success, the initiative utilizes a targeted program design moderated by an expert medical panel. By prioritizing high-recovery cancers and patients with a strong prognosis for recovery, the project ensures superior treatment outcomes and a measurable reduction in early mortality rates.
- **Enhanced Financial Resilience:** The program empowers families to withstand the profound financial pressures associated with prolonged medical care. By mitigating catastrophic health expenditure, CCIL fosters household resilience, preventing the downward spiral into debt and allowing families to maintain their long-term economic stability. This increases probability of treatment completion.
- **Intergenerational and Community Multiplier Effects:** By prioritizing women from low-income contexts, children, and youth, the initiative triggers powerful multiplier effects. Positive treatment outcomes not only revitalize the entire family unit but also generates significant environmental impact by shifting community mindsets. Success stories in vulnerable and resource poor communities promotes mindset shift from traditional stigmas, treatment hesitancy and fatalism to early diagnosis and professional treatment.
- **Government and CSR Synergy SDG success:** The success of the National Health Mission is dependent on proactive treatment-seeking behaviour. The CCIL projects act as bridge by including poor families in the medical ecosystem, it prepares them to better utilize existing government programs (such as Ayushman Bharat) and ensure that CSR funding yield a higher social return.



RECOMMENDATIONS FOR IMPLEMENTATION AGENCIES

A comprehensive programmatic review of CCIL's FY 23-24 CSR portfolio confirms that all projects are strategically aligned with Schedule VII mandate. Field assessments yielded no adverse findings for CCIL, reflecting a high standard of implementation across partner agencies. To further enhance health outcomes and establish long-term multiplier effects, the following strategic enhancements are proposed for the implementation agencies:

Levers of Change	Actionable Items	Objective
Technology	Deploy MIS/Digital Dashboards (WIA)	Enable real-time data capture to track beneficiary profiles (gender, income, geography) and monitor treatment progress and outcomes.
Access	Formalize Non-Medical Assistance (ICS)	A significant proportion of beneficiaries funded through the Cancer Care fund and Dr Arun Kurkure Initiation and Treatment Fund at the Indian Cancer Society (ICS) incur substantial non-medical expenses related to travel, food, and accommodation while accessing treatment. A robust system for Non-Medical Assistance can reduce financial barriers related to travel and housing for outstation patients.
Education	Scale Health Literacy & Early Psychosocial Care	The implementation agencies may consider strengthening Health Literacy sessions for cancer patients, as a significant proportion of beneficiaries, especially women, demonstrated limited awareness regarding disease staging and treatment pathways. Programs like Indian Cancer Society's PICASSO program for post-treatment counselling support to paediatric survivors after two years of therapy can be extended to early-stage and during-treatment psychosocial care for all patients. Strengthening this component would enable a more holistic approach to cancer care, improving treatment adherence, patient dignity.

CONCLUSION

Cancer care is characterized by its prolonged treatment duration and the significant psychological distress it imposes on both patients and caregivers. With projected incidences reaching 1.56 million new cases and approximately 8.7 lakh deaths in 2024, the disease remains a critical national health concern. Simultaneously, India faces a massive burden of avoidable blindness, where preventable conditions like cataracts and refractive errors drastically reduce the quality of life for millions.

Assessment Framework

In compliance with Section 135 of the Companies Act, 2013, MMJC conducted an independent impact assessment of CCIL's CSR interventions in oncology and critical eye care. This study employed a robust mixed-methods approach, integrating primary evidence from beneficiaries and healthcare professionals with institutional data to evaluate the program's effectiveness, reliability, and contextual depth.

Strategic Impact & Key Findings

The assessment confirms that CCIL has played a catalytic role in **advancing healthcare equity, mitigating financial toxicity for 1,387 cancer patients and 572 eye care beneficiaries**. By targeting the most vulnerable, the program prevented catastrophic medical expenses from pushing at-risk households into poverty.

- **Clinical Excellence:** The procurement of advanced medical technologies such as Cryoablation and Vacuum Assisted Breast Biopsy (VABB) at MPMCC Varanasi has shifted the focus from basic aid to high-precision, minimally invasive treatment.
- **Targeted Outreach:** The initiative successfully reached the most marginalized, with 67% of beneficiaries hailing from households earning less than ₹10,000 per month.
- **Treatment Adherence:** By bridging financial gaps that previously caused more than 50% of patients to delay care, CCIL achieved a remarkable 93.7% treatment completion rate, among women patients at WIA and 91.8% treatment completion rate among ICS patients significantly improving survival prospects.
- **Network Synergy:** Operating through 17 reputed hospitals, CCIL acted as a force multiplier, integrating its support within established medical networks and maintaining a high beneficiary satisfaction rating of 4.78/5.

Overall, the assessment revealed that clinical funding remains the bedrock of cancer care. CCIL's CSR initiatives exhibit strong coherence by complementing government efforts and contributing to global development goals. Rather than duplicating existing systems, these interventions act as catalytic support mechanisms that enhance reach, improve accessibility, and strengthen the effectiveness of India's healthcare ecosystem.



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