

# Head and Neck Oncology Surgery

## Impact Assessment Report

March 2025

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Prepared for : Kotak Securities Limited (KSL)





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***Informed consent:***

The interviews were done after the respondents gave their consent. Even after the interviews were completed, their permission was sought to proceed with their responses.

***Confidentiality:***

The information provided by participants has been kept private. At no point were their data or identities disclosed. The research findings have been quoted in a way that does not expose the respondents' identities.

***Comfort:***

The interviews were performed following the respondents' preferences. In addition, the interview time was chosen in consultation with them. At each level, respondents' convenience and comfort were considered.

***Right to reject or withdraw:***

Respondents were guaranteed safety and allowed to refuse to answer questions or withdraw during the study.



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### CSR Project “Head and Neck Oncology Surgery”

#### Project Overview

The project “Head and Neck Oncology Surgery” was implemented during FY 2022-23 by the Madat Charitable Trust (MCT). It was supported by Kotak Securities Limited (KSL) through its CSR initiative. The project aimed to alleviate financial and systemic barriers for economically disadvantaged cancer patients by providing timely, affordable, and high-quality treatment.

#### Key Achievements of the project:

- Targeted Support: 17 beneficiaries received financial aid for surgeries, chemotherapy, and radiotherapy, covering up to 90% of treatment costs (~ Rs 1.5 lac).
- Inclusion and Equity: Over 50% of beneficiaries in the project were women. Most patients came from underserved regions.
- Timely Treatment: The project ensured the health outcomes in cancer treatment by avoiding delays common in cancer hospitals.
- Holistic Approach: The project included emotional support, counselling sessions, and help desks for patients and caregivers.
- Transparency: Funds were directly transferred to hospitals, ensuring accountability and reducing financial burdens for beneficiaries.
- Impact: The project successfully enhanced access to quality healthcare for cancer treatment by economically disadvantaged patients while reducing financial stress on their families. The hospital administration informed that ~90% of the patients recovered successfully after the treatment. It improved recovery outcomes and empowered beneficiaries to regain economic stability by addressing systemic barriers and fostering resilience. The collaboration between MCT, private hospitals, and corporate donors demonstrated a scalable Public-Private Partnership (PPP) model, aligned with national healthcare policies and UN Sustainable Development Goals (SDGs).



# 1. Introduction

## 1.1 Background

Kotak Securities Limited (KSL) is one of the oldest and trusted equity brokerage firms in India. It was established in 1994 as a subsidiary of Kotak Mahindra Bank Ltd. It offers comprehensive investment services across various asset classes such as equity, debt, mutual funds, commodities, and currencies. KSL serves more than 5 million customer accounts across India with its robust network spanning over ~310 cities, ~155 branches, and ~1000 franchises. KSL stands out for its diverse investment opportunities, accredited research, user-friendly investment platforms, and unique value-added services.

KSL has earned a reputation as a reliable partner for investors through its unwavering commitment to quality, innovation, and excellence. KSL contributes to the betterment of society, mirroring the same excellence it brings to its business endeavors. It has showcased its dedication to societal progress through impactful and meaningful CSR initiatives. The CSR efforts of KSL align with India's social development objectives and the United Nations' SDGs. KSL is making a meaningful and lasting impact by addressing key areas such as education, livelihoods, healthcare, environmental sustainability, sports, etc. It remains committed to driving positive change through collaborative efforts, ensuring long-term societal benefits and sustainable development.

The project "Head and Neck Oncology Surgery" was implemented in FY 2022-23 with the CSR support of KSL. It was launched by the Madat Charitable Trust (MCT) in Mumbai to provide comprehensive support to cancer patients through chemotherapy, surgery, and radiotherapy. MCT is dedicated to ensuring timely access to affordable, high-quality cancer care for economically disadvantaged patients. It works to assist cancer patients and their caregivers by addressing gaps in cancer diagnosis and treatment.

## 1.2 Cancer: A Growing Global Challenge

Cancer is one of the major chronic life-threatening diseases. It is ranked as the second leading cause of death globally, following deaths due to cardiovascular reasons. Its global burden is rising at an alarming rate. Approximately 20 million new cancer cases are diagnosed worldwide in the year 2022, which is projected to reach 35 million (~77% increase) annually by 2050. The major reasons for this surge are aging population, tobacco use, unhealthy diet, lack of physical exercise, obesity, exposure to cancer-causing infections, etc<sup>1</sup>.

There are mostly 10 types of cancers which account for two-thirds of all cases and deaths worldwide. Breast and cervical cancers are the most frequently diagnosed and the leading cause of death among women. Lung cancer is the leading cause of deaths among men, particularly in low-income countries. Head and neck cancers are the sixth most common type of cancer and are particularly prevalent in developing countries, especially in Southeast Asia. These cancers are frequent in males due to the consumption of tobacco, areca nuts, etc. Head and neck include cancers in various organs such as the mouth (lips, tongue, palate, jaw, and gums), throat (pharynx), voice box (larynx), nose (nasal cavity and sinuses), and salivary glands (near the lower jaw). Oral cancer is the most common among head and neck cancers<sup>2</sup>.

The cancer burden is disproportionately affecting developing countries due to growing cancer-causing behaviours such as tobacco intake and smoking. Approximately 56% of global cancer cases occur in developing countries (in the year 2022). The survival rate of cancer patients is significantly lower in developing countries due to delayed diagnosis and limited access to high

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<sup>1</sup> <https://www.who.int/news/item/01-02-2024-global-cancer-burden-growing--amidst-mounting-need-for-services>

<sup>2</sup> <https://pmc.ncbi.nlm.nih.gov/articles/PMC4011474/>



high-quality treatment. In the year 2022, approximately 9.7 million cancer-related deaths were reported globally, out of which ~64% of deaths occurred in developing countries<sup>3</sup>. The developing countries face challenges of limited access to healthcare and inadequate treatment infrastructure which complicates cancer treatment and management. The financial burden of cancer treatment is very high for patients and their families. It highlights the critical need for equitable access to affordable and quality cancer treatment.

### 1.3 Burden of Cancer in India

Approximately 8 lac new cancer cases are reported every year in India (in the year 2020). Tobacco consumption is the most significant contributor to cancer. Oral cancers (a form of head and neck cancers) contribute 40% to 50% of cases in men and ~20% of cases in women. The prevalence of cancer in India highlights significant socio-economic disparities, with approximately 90% of oral cancer cases occurring in rural areas<sup>4</sup>.

Due to a lack of awareness, early symptoms like mouth ulcers etc. are often neglected by patients. Approximately 75-80% of cancer patients in India are diagnosed at an advanced incurable stage, resulting in significantly higher mortality rates. This is primarily due to delayed diagnosis caused by high treatment costs, illiteracy, and limited access to healthcare. On average, rural patients face a delay of around 68 days, while urban patients experience a delay of 54 days in obtaining their first medical appointment<sup>5</sup>.

Managing cancers (especially head and neck cancers) is particularly challenging in India due to the socio-economic vulnerabilities. Various factors such as inadequate healthcare infrastructure, shortage of trained medical personnel, widespread illiteracy, and limited awareness about the harmful effects of tobacco lead to delays in early diagnosis and treatment. It imposes significant financial stress on families, particularly those from economically weaker sections.

### 1.4 Need for the Project

India faces significant challenges in the early diagnosis of cancer. It contributes to high mortality rates. Only 29-30% of the cases are diagnosed at the level of stages 1 and 2<sup>6</sup>. Cancer incidence in India is rising, and it has remained among the top five causes of death over the past decade. An estimated 8-9 lakh deaths were reported in India (in 2020). India's mortality-to-incidence ratio is among the worst globally. The affected families, especially economically disadvantaged families, face significant financial strain due to prolonged treatment cycles and high medical expenses. They often struggle to afford essential cancer treatment<sup>7</sup>.

Cancer treatment in many cases gets delayed due to the limited availability of government-funded healthcare facilities and affordable options. Patients are often forced to seek treatment at private hospitals, where costs are significantly higher. To cover these expenses, they may resort to loans, leading to massive, unmanageable debts that plunge families into financial distress. In some instances, the inability to secure adequate funding results in delays or, tragically, the abandonment of treatment altogether.

The growing cancer burden in India, coupled with delayed detection and inadequate access to timely treatment, underscores the need for financial support programs especially tailored to economically weaker sections of society.

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<sup>3</sup> <https://www.cancer.org.au/assets/pdf/understanding-head-and-neck-cancer-booklet>

<sup>4</sup> [https://ncdirindia.org/All\\_Reports/Report\\_2020/default.aspx](https://ncdirindia.org/All_Reports/Report_2020/default.aspx)

<sup>5</sup> IBID

<sup>6</sup> <https://pmc.ncbi.nlm.nih.gov/articles/PMC4011474/>

<sup>7</sup> [https://www.ey.com/en\\_in/insights/health/how-india-can-reduce-its-cancer-burden](https://www.ey.com/en_in/insights/health/how-india-can-reduce-its-cancer-burden)



## 1.5 About the Project

MCT launched a program “Cope with Cancer” in the year 2013 to improve cancer treatment outcomes by providing financial and holistic support to patients and families. It helps in enabling them to access timely and affordable medical care. MCT provides financial assistance to patients to access quality treatment at lower costs through leading hospitals such as Tata Memorial Hospital, ACTREC, etc.

The project “Head and Neck Oncology Surgery” supported by KSL CSR, served as an additional project under the “Cope with Cancer” program. The CSR project aimed to support patients by extending financial assistance, ensuring an additional number of underprivileged individuals can access quality, timely, and affordable treatment. It focused on supporting patients who face long waiting times at Tata Memorial Hospital (TMH) by enabling their treatment in private hospitals at discounted rates.

MCT implemented the project and streamlined the verification process for patients, ensuring they timely receive the necessary funding for treatment. The project included financial support for the treatment by directly transferring funds to hospitals.



## 2. Approach and Methodology

### 2.1 Approach

The study aimed at the Impact Assessment of the “**Paediatric Cancer Support (PCS)**” project, which was supported by the KSL CSR initiative. The project was implemented in Udupi (Karnataka) in FY 2022-23. The Impact Assessment study was conducted for the following broad objectives and outputs:

- 01

**Impact on Beneficiaries**  
To evaluate the level of awareness and impact on the target beneficiaries
- 02

**Best Practices**  
To identify best practices
- 03

**Area of Improvement**  
To suggest areas of improvements and innovative approaches basis market trends.

### 2.2 Methodology

The team adopted a Qualitative Research methodology for impact assessment. The study followed a well-defined methodology, participative and research-based strategy, consisting of a five-stage process for undertaking this study as explained below:

Context Setting	<ul style="list-style-type: none"><li>Building common understanding of project terminology.</li><li>Introduction to key stakeholders / implementation partners</li></ul>
Research Design	<ul style="list-style-type: none"><li>Desk review of project documents</li><li>Primary research tool preparation</li><li>Sharing of inception report with tools for approval of KSL</li></ul>
Primary Research	<ul style="list-style-type: none"><li>Training of field research team</li><li>On-field data collection through quantitative methods to analyse programmatic elements</li></ul>
Analysis	<ul style="list-style-type: none"><li>Data analysis based on OCED-DAC ‘REECIS’ Framework</li><li>Triangulation against qualitative research through KIs</li></ul>
Output Report	<ul style="list-style-type: none"><li>Detailed report on observations, analysis, inferences, and recommendations</li><li>Presentation of Findings</li></ul>

### 2.3 Data Collection Tools

- 2.3.1 Development of assessment framework:** The team developed research objectives, key probe areas, and methodology of interaction with stakeholders. This helped in the effective designing of research instruments.
- 2.3.2 Primary data acquiring tools:** The team prepared an Interview Guide for collecting qualitative data from beneficiaries and KIs (Key Informants Interviews) based on the assessment framework.



## 2.4 Sampling techniques

The study followed the **Convenience Sampling Technique** for the selection of respondents among beneficiaries and KIIs (Key Informant Interviews)

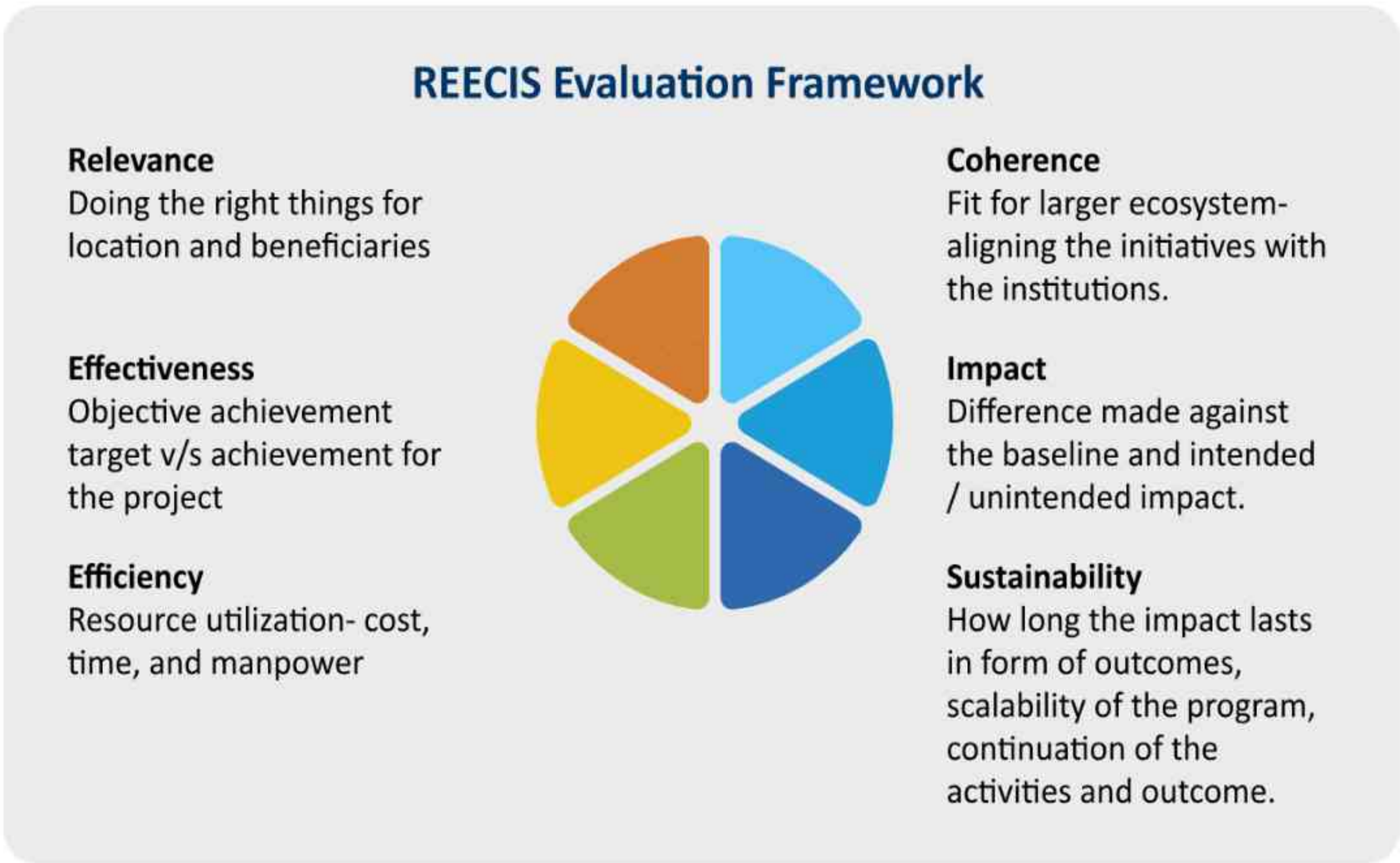
## 2.5. Acquiring Information and Data Collection

Primary and secondary research was conducted to acquire the necessary data for the program. Field-level data were collected through interviews of beneficiaries and Key Informant Interviews (KIIs). The team interviewed 8 beneficiaries, 1 oncologist, 1 Madat Staff, 1 implementation partner, and 1 team member of Hospital administration.

## 2.6. Analyzing the information

After the primary and secondary research, the team compiled and tabulated the acquired data. Tabulated data was sanitized to get insight as per the requirement of the study. The sanitized data was analyzed and triangulated with the findings of KIIs. The data analyzed depicted points identified as the key objective of the study.

The assessment was done through the REECIS evaluation framework, developed by the Organization for Economic Co-operation and Development (OECD) and the Development Assistance Committee (DAC). It includes an analysis of the results based on parameters such as Relevance, Effectiveness, Efficiency, Coherence, Impact, and Sustainability. It is explained below:



## 2.7. Documentation and Report Preparation

The team prepared a detailed report of the Impact Assessment study of the “Paediatric Cancer Support (PCS)” project covering all the necessary aspects in accordance with the findings of the data analysis.



### 3. Findings and Analysis

#### 3.1 Inclusiveness

The CSR project to support “Head and Neck Oncology Surgery” embodied inclusiveness by addressing financial, logistical, and emotional barriers that prevent underprivileged patients from accessing quality cancer treatment. MCT provided cancer care at discounted costs and guided patients throughout the treatment process, fostering the emotional well-being of the patients.

##### 3.1.1 Eliminating Barriers to Treatment Access

MCT recognized that cancer treatment often imposes an insurmountable financial burden, particularly on economically disadvantaged families. Although the secondary data of the project did not contain data on the socioeconomic background of patients, interviews with beneficiaries revealed that patients from various socioeconomic classes accessed the treatment. Most of the beneficiaries were from economically weaker sections. It highlights the critical role of the project in supporting underprivileged communities.

A 57-year-old beneficiary said “I used to work as an electrician, but after the lockdown, my work came to a halt. Currently, my elder brother and I manage the household expenses. We are four siblings, and I am the youngest, living with my mother. Facing financial constraints was the biggest challenge in my cancer treatment. The estimated surgery cost was around 8 to 9 lakhs. Unfortunately, government schemes like Ayushman Bharat and Rajiv Gandhi Cancer Relief were not applicable, and they did not provide any financial assistance to me. My sister's son stepped in to help financially and guided me to reach out to MCT for support with my treatment costs.”

##### 3.1.2 Breaking Systemic Barriers

MCT addressed systemic challenges such as long waiting times in government hospitals etc. It bridged the gap in cancer care accessibility by enabling underprivileged patients to receive timely treatment in private hospitals at discounted rates. Its efforts to improve access to timely treatment also improved outcomes.

##### 3.1.3 Geographic Coverage

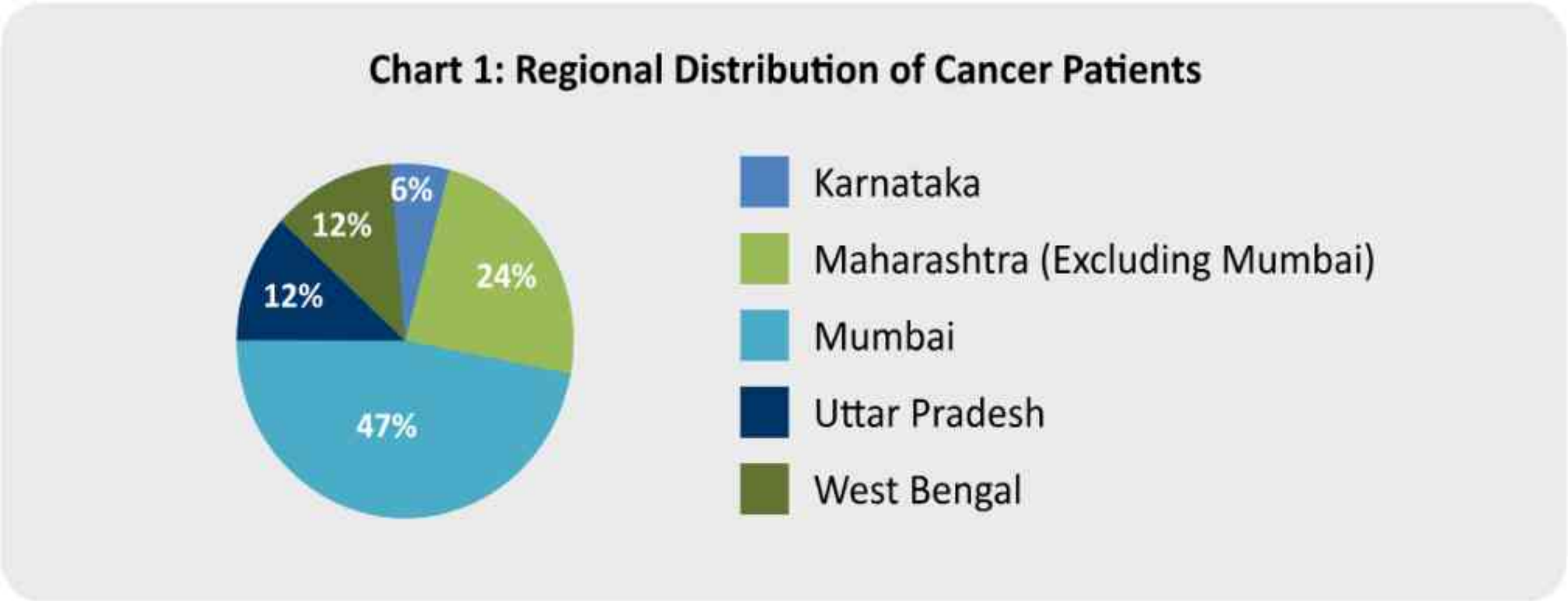
MCT ensured that the cancer care program reached patients across diverse regions of the country. The project provided treatment support to 17 patients during FY 2022-23. The project effectively addressed barriers to life-saving treatment by providing equitable access to cancer care across various regions. It provided discounted treatment options for cancer patients undergoing surgery, radiation therapy, or chemotherapy. Most of the beneficiary patients (53%) were from regions beyond metropolitan areas (mentioned in Chart 1). It highlights the MCT’s efforts to extend support to patients of smaller towns and rural areas in Maharashtra and other states. Approximately 24% of the patients were from West Bengal and Uttar Pradesh. It reflects the program's ability to support patients in regions with limited access to quality healthcare.

It is observed that the project successfully reached underserved regions, however a disproportionate focus was observed in some states over others. Expanding the program's geographic reach and ensuring equitable support across states would further enhance inclusivity. MCT ensured that the cancer care program reached patients across diverse regions of the country.



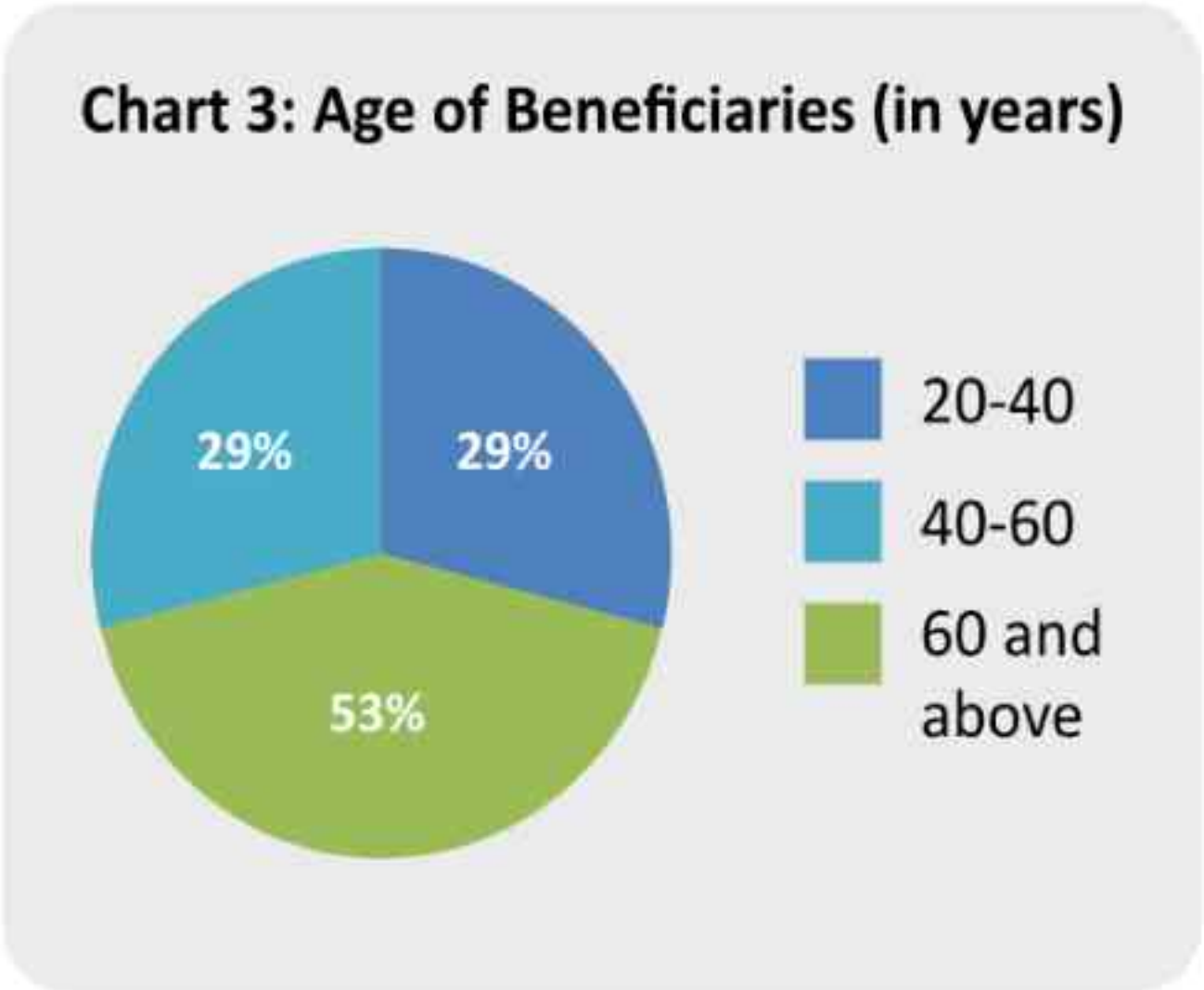
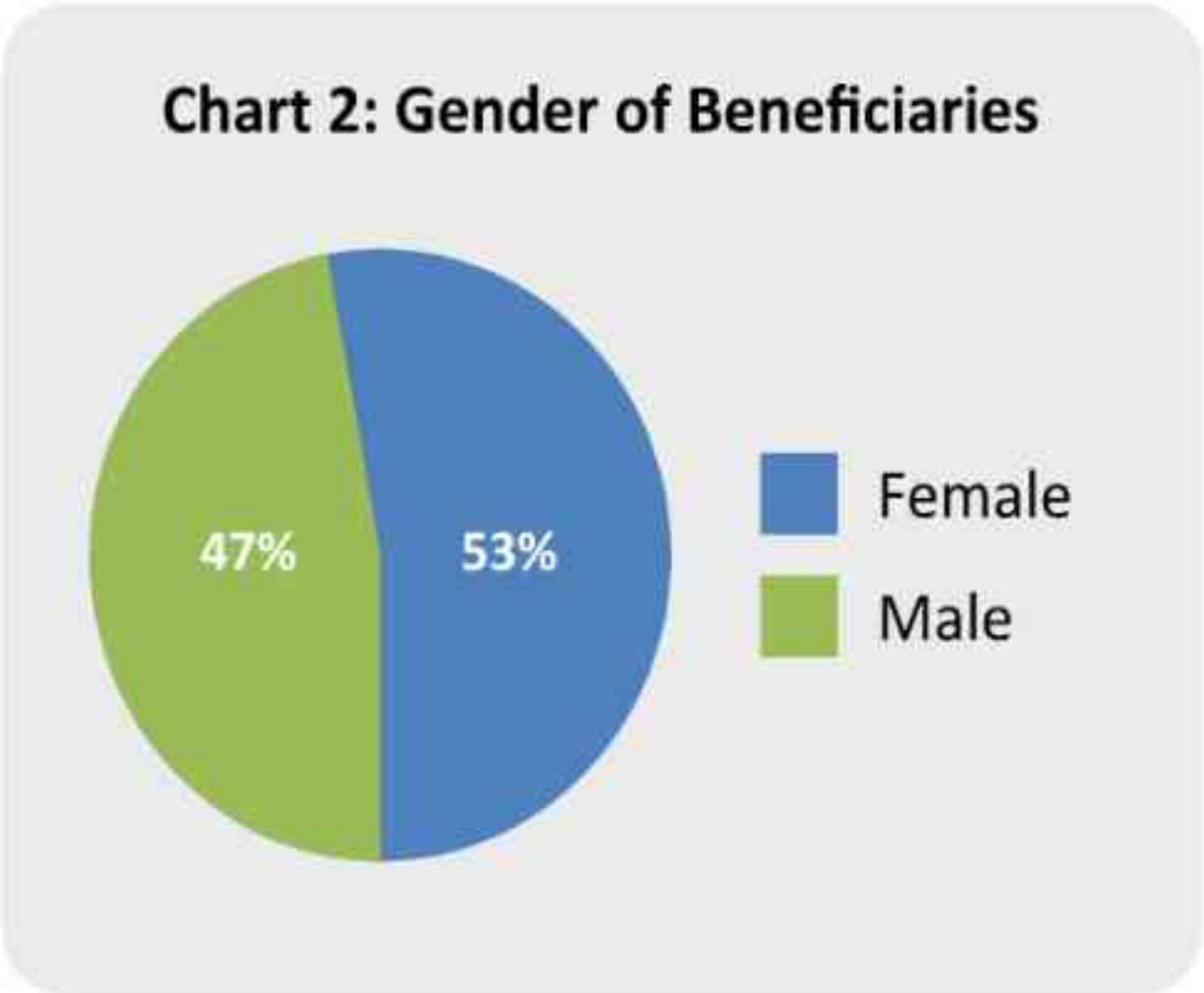
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**3.1.4 Gender and Age Representation**

The cancer care project of MCT ensured equitable support for both men and women. Females accounted for 53% of the total beneficiary patients (Chart 2). It indicates the program's focus on addressing the cancer treatment challenges faced by women. It ensured that critical cancer treatment support was accessible to individuals regardless of gender. Similarly, the project also ensured support across different age groups. The majority of beneficiaries (41%) fall within the 40-to-60-year age group (Chart 3). It also included 29% of beneficiaries aged 60 years and above, supporting older patients, who often have higher healthcare needs and limited access to financial resources. The inclusiveness in age and gender helped in bridging gaps in healthcare access.





### 3.1.5 Holistic Patient Support by MCT

MCT extended its support to patients beyond the financial assistance provided by the KSL CSR fund. Through its "Cope with Cancer" program, MCT operated a dedicated help desk at Tata Memorial Hospital. It offered guidance to patients and their families through the complicated treatment process. It ensured that individuals, particularly those from marginalized backgrounds, were not left to navigate the healthcare system on their own. The help desk served as a resource to provide information, support, and reassurance to families during their challenging journey. It helped in reducing the stress and uncertainty that often accompany cancer treatment.

## 3.2 Relevance

The project is highly relevant in addressing the financial and logistical barriers that prevent patients from accessing timely and quality cancer care.

### 3.2.1 Addressing Financial Barriers

Cancer treatment includes surgeries, chemotherapy, radiation therapy, and diagnostic investigations like CT scans, PET CT, MRI, etc., which are prohibitively expensive for many families in India. Project supported in bridging critical gaps of accessibility and affordability of cancer care, particularly for economically disadvantaged patients.

### 3.2.2 Focus on Underserved Patients

The project supported patients, who would otherwise face long waiting lists at government facilities, to receive treatment at private hospitals at significantly discounted rates. The patients were bearing only 10% of the total cost. The program specifically targets two categories of beneficiaries:

- 1. Patients at Tata Memorial Hospital (TMH):** MCT provided support to Non-Concessional (NC) category patients undergoing treatment at TMH.
- 2. Patients Outside TMH:** MCT supported underprivileged patients receiving treatment at private hospitals other than TMH, based on referrals from the respective hospitals.

### 3.2.3 Timely Access to Treatment

Cancer treatment requires prompt action, as delays can significantly impact patient outcomes. Delays in treatment lead to the spread of disease to other parts of the body. Cancer treatment is often delayed due to limited government-funded facilities. For example, TMH itself faces a high influx of patients. It annually registers ~65,000 new cancer cases and ~4,50,000 follow-ups ( year 2024). More than 60% of the patients travel from other states for treatment.

This increasing patient load, coupled with the complexity of cancer care, creates inevitable delays in treatment. The high demand makes it challenging for TMH to address every patient's needs effectively, leading to prolonged waiting times for consultations and care. The treatment at private hospitals is very costly. It leads to financial distress of patients and their families. In many cases, lack of funding leads to treatment delays or abandonment. The project enabled timely treatment, particularly for economically disadvantaged families by providing discounted treatment options, who might otherwise have faced long waiting periods for surgeries or treatments.

## 3.3 Effectiveness

The effectiveness of the MCT cancer treatment project has been evaluated based on its progress against the input and output activities as detailed in the impact map. The planned input activities and intended outputs of the project are given below:



Planned Activities	Intended Outputs
<ol style="list-style-type: none"> <li>1. Outreach, identification, screening, and verification of beneficiaries.</li> <li>2. Collaboration with hospitals for treatment.</li> <li>3. Financial support to the beneficiaries for diagnosis and cancer treatments.</li> <li>4. Regular monitoring and timely disbursement of funds.</li> </ol>	<ol style="list-style-type: none"> <li>1. Increasing awareness and accessibility of treatment for economically disadvantaged patients.</li> <li>2. Ensuring financial support reaches the most deserving patients.</li> <li>3. Subsidized and comprehensive treatment support to patients.</li> <li>4. Completion of treatment of cancer without interruptions due to financial constraints.</li> <li>5. Transparency and effective utilization of funds.</li> </ol>

The project’s comprehensive approach proved to be effective in addressing the challenges faced by cancer patients from economically disadvantaged backgrounds. The timely and affordable access to quality care improved patient outcomes and significantly reduced the emotional and financial burden on families.

### 3.3.1 Effectiveness in Implementing the Planned Activities

- Outreach, Identification, Screening, and Verification of Beneficiaries**  
 The project prioritized outreach to economically disadvantaged patients who required financial support for cancer treatment. The beneficiaries were identified based on referrals from hospitals. The verification process was meticulously conducted to confirm the economic backgrounds of patients, ensuring that financial aid reached only the most deserving individuals. The project adopted a straightforward and smooth application process. Beneficiaries highlighted that the MCT team was cooperative and ensured clarity at every step, making it easier to complete the necessary formalities. Key documents required for the application included an income certificate, an Aadhaar card, a medical report, a hospital discharge summary, etc.  
 Most of the patients did not face major issues in providing these documents, however, some of the beneficiaries mentioned challenges in arranging income certificates.  
 The project adopted a verification process based on two main categories of patients:
  - Patients at TMH: MCT conducted a thorough verification process to confirm the economic background of patients referred by TMH. It opened trust accounts specifically for non-concessional category patients at TMH, enabling them to receive funds directly and begin treatment without unnecessary delays.
  - Patients Outside TMH: The patients who were referred by private hospitals for support from MCT. Its team conducted due diligence to assess their financial condition and confirm their eligibility for support. They obtained the treatment cost estimates from the hospital. Funds are directly transferred to the hospital to cover the discounted treatment after the approval of funds.
- Collaboration with Hospitals for Treatment**  
 The program successfully collaborated with hospitals namely TMH, SRV, and Nanavati Super Speciality Hospital to provide patients with access to timely and affordable treatment. It allowed patients on long waiting lists at government hospitals to receive treatment at private facilities at significantly discounted rates.



- **Collaboration with Hospitals for Treatment**

The program successfully collaborated with hospitals namely TMH, SRV, and Nanavati Super Speciality Hospital to provide patients with access to timely and affordable treatment. It allowed patients on long waiting lists at government hospitals to receive treatment at private facilities at significantly discounted rates.

A 45-year-old patient from Panvel said, “Due to a long queue at TMH, I was referred to a private hospital where the surgery could be performed sooner. The discounted rates and financial aid from the MCT made this possible.”

- **Financial Support to Beneficiaries for Diagnosis and Cancer Treatments**

The program provided comprehensive financial aid for diagnostic investigations such as CT scans, PET CTs, and MRIs, as well as treatments like chemotherapy, radiotherapy, and surgeries. It ensured that beneficiaries received cancer care without having to bear the financial burden.

A 50-year-old patient from Navi Mumbai revealed, “The total cost of my treatment was around Rs 2.4 lakh out of which Rs 1.75 lakh was covered by the Trust. Without this support, I would have been forced to take a loan or delay the treatment.”

- **Regular Monitoring and Timely Disbursement of Funds**

MCT established a system for continuous monitoring of patients throughout their treatment journey. The team conducted regular check-ins at hospitals and direct coordination with healthcare providers to ensure treatments progressed as planned. The Project adopted a holistic approach that included regular oversight of patient progress along with financial support. Counselling sessions were conducted for the patients which provided emotional support to the patients.

A 55-year-old widowed patient from Mumbai stated, “Madat Trust not only provided financial support but also ensured that the funds were disbursed on time and that my treatment remained uninterrupted.”

It was observed that, in some cases, the process from application submission to receiving financial support took approximately 2 months, which is relatively longer particularly for urgent medical needs.

### **3.3.2 Effectiveness in Achieving the Intended Outputs**

- **Increasing Awareness and Accessibility of Treatment for Economically Disadvantaged Patients**

The program effectively raised awareness among underprivileged communities with the help of network hospitals, about the availability of affordable cancer treatment options. Many patients reported learning about the MCT’s support through referrals at TMH or from local hospitals. It was observed that patients from underserved regions, such as rural areas or smaller towns have a lack of awareness about the program. It limited their participation in the project.



A 40-year-old patient from Mumbai said, “I got the awareness of MCT’s financial support program through my doctor, who referred me to Madat Trust. It gave me hope and made treatment possible.”

- **Ensuring Financial Support Reaches the Most Deserving Patients**

The project ensured through the verification process that financial aid was directed to those who needed it the most. This targeted approach optimized resource utilization and built trust among beneficiaries.

MCT ensured that patients were not burdened with navigating complex financial systems or bearing excessive costs. Patients contributed only a nominal amount (~10% of the total cost), making high-quality cancer treatment accessible even to those from severely disadvantaged backgrounds.

A 50-year-old patient from Mumbai shared, “The verification process was smooth and fair. MCT team understood my financial struggles and approved the funds quickly, allowing me to focus on my treatment”

- **Subsidized and Comprehensive Treatment Support to Patients**

The program effectively supported the patients by enabling them to access high-quality care with private hospitals at discounted rates. The project covered treatment costs up to Rs 1.75 lac per patient.

MCT adopted a systematic and transparent approach to financial support. It eliminated the complexities of financial navigation for patients. This streamlined process minimized delays and ensured the efficient utilization of funds for their intended purpose. It was observed during the interaction with hospital administrators that MCT initially covered up to Rs 1.75 lakhs per surgery but later it decreased to Rs 40,000 to 90,000 per patient. Some of the patients raised the concern that the travel and accommodation expenses also posed significant financial burdens on them, which is not included in the project support.

A 45-year-old patient from Panvel said, “Without the subsidy, I would not have been able to afford the surgery. The support covered almost the entire cost, making treatment possible for me.”

- **Completion of Cancer Treatment Without Interruptions Due to Financial Constraints**

The project’s timely financial support played a crucial role in ensuring that treatments were not interrupted due to monetary challenges. MCT’s team guided patients and their families through the treatment process, ensuring smooth coordination and adherence to the doctors’ instructions. It alleviated both financial and procedural burdens.

A 57-year-old patient from Maharashtra said, “Without the financial support of MCT, my treatment would have been delayed indefinitely. MCT ensured I received timely care without any interruptions.”



- **Transparency and Effective Utilization of Funds**

The project upheld transparency by directly transferring funds to hospitals, ensuring that financial support was utilized exclusively for its intended purposes. Regular monitoring allowed the project to track the effective use of funds throughout the treatment process. Patients stated that every step of the process was clear and transparent. MCT ensured that the funds were used for treatment and followed up regularly to check on progress. It fostered trust and confidence among beneficiaries.

### **3.4 Efficiency**

The efficiency of the project has been measured based on the intended outcome of the program. The “Head and Neck Oncology Surgery” project had intended to support 57 patients (from April 2022 to March 2023) for:

1. Surgeries in Head and Neck Oncology Category
2. Early dental implant to the patient who would be operated on in the Head and Neck category to ensure a good quality of life.

The project ensured efficiency in the implementation process to serve economically disadvantaged cancer patients. The transparent and inclusive model addressed immediate medical needs and fostered long-term well-being.

#### **3.4.1 Timely and Targeted Support for Surgeries**

The project strategically focused on the Head and Neck Oncology category, a critical area where timely surgeries significantly impact patient outcomes. The Project supported 17 patients in the(Q4 of FY 2022-23) out of the target of 57 patients, however, it supported the 50 beneficiaries from April 2022 to March 2023.

The project ensured that resources were allocated where they were most needed. It was observed that most of the patients covered under the project were in debilitating conditions involving cases such as severe ulcers, cysts, and oral cancers.

It enabled patients to access high-quality surgeries at significantly reduced costs. The direct transfer of funds to hospitals streamlined the process, eliminating delays caused by intermediaries and ensuring funds were used solely for surgeries.

#### **3.4.2 Monitoring Systems**

The project employed a dynamic monitoring mechanism to ensure that beneficiaries receive uninterrupted and effective treatment.

MCT tracked the journey of each of the patients to address specific needs and challenges. This personalized approach ensured that no case is overlooked, and potential delays or issues were mitigated promptly. The MCT team actively engaged with beneficiaries through onsite visits to monitor the patients’ treatment progress and interactions with hospitals. The Team also conducted regular Tele-calling and video interactions with the patients to ensure patients’ needs are met and addressed quickly. Regular tracking of the patients ensured that no patient dropped out due to logistical or financial challenges.

The Project team logged regular treatment protocols and conducted periodic reviews to assess outcomes and identify areas for improvement. This enhanced accountability and project impact. It enhanced transparency and accountability in the process.

It is observed that some of the patients experienced inconsistencies in follow-up processes. Ensuring uniform and consistent monitoring mechanisms across all beneficiaries would enhance trust and transparency in the project.



### 3.4.3 Experienced Leadership and Team Expertise

The project is driven by highly skilled and experienced doctors and a leadership team whose strategic insights ensured smooth execution and efficiency:



**Managing Trustee:** Dr. Anand Parihar has extensive experience in medical service delivery. He supported strategic guidance for the execution of the project through his in-depth knowledge of cost structures, best practices, etc. It ensured better outcomes for beneficiaries.



**Operations Professional:** Ms. Urvija Sanghvi had operational expertise which guaranteed the seamless implementation of patient services. She actively managed staff coordination and patient screening processes.



**Volunteer Manager:** Ms. Shobha Iyer defined the roles and responsibilities of volunteers. It enhanced efficiency in patient screening, documentation, and compliance audits. It minimized errors and optimized workflow.



**Documentation and Verification:** Ms. Somavathy manages the documentation and verification of patient documents alongside Mr. Prasanna. He works as staff handling verification and patient management.



**IT Systems and Process Automation:** Mr Ish Chowdhary ensured contributions to automating processes to reduce manual intervention, ensuring faster and error-free implementation.

### 3.4.4 Streamlined Resource Management

The project efficiency is enhanced through its resource management strategies:

- 1. Direct Fund Transfers:** It adopted the transferring financial support directly to healthcare facilities. It eliminated intermediaries and reduced the risk of fund misuse. It ensured that resources were utilized exclusively for their intended purposes. Patients were relieved from the complexities of navigating financial systems, making the process more accessible for economically disadvantaged families.
- 2. Transparent Processes:** The MCT team regularly tracked the patients and their treatment protocols. It ensured accountability and transparency at every stage. Regular follow-ups ensured that treatment plans were on track and patients felt supported throughout their journey. It fostered trust among beneficiaries and stakeholders.

### 3.4.5 Comprehensive Support Beyond Financial Assistance

The project adopted a holistic approach to cancer care by addressing various dimensions of patient well-being.

- **Emotional and Psychological Support:** The project also involved initiatives such as hair donation programs for wig creation. Which helped patients maintain a positive body image and boost their self-esteem during challenging times.  
Emotional support was appreciated by patients however some of the patients raised the point that that the program could further strengthen its focus on psychological well-being. They suggested increasing the number of counseling sessions for patients and their families. It would address stress, anxiety, and fear associated with cancer.
- **Collaborations for Cost Reduction:** The project partnered with diagnostic centres and hospitals for discounted rates for chemotherapy, radiation therapy, and surgeries. It significantly reduced the financial burden on patients.



- **Community Engagement:** The Project also included activities such as festival celebrations, cancer awareness events, etc which fostered a sense of community. It provided emotional relief to patients and their families. It extended the impact of the project beyond medical care to overall well-being.

#### 3.4.6 Operational Efficiency

The project employed full-time staff which ensured efficient operations and cost-effectiveness of the overhead costs.

#### 3.4.7 Inclusive and Impact-Oriented Approach

MCT provided dental implants to the head and neck cancer patients. It improved post-treatment quality of life, as dental implants are crucial for restoring essential functions such as chewing, speaking, and maintaining facial aesthetics. It highlights the project's understanding that cancer care extends beyond survival to include recovery and rehabilitation. Dental implants were integrated into the post-surgical care plans, ensuring that patients could begin their recovery process without delays.

### 3.5 Coherence

The project is coherent with the objectives of India's national healthcare programs and the UN SDGs. It addressed critical gaps in access, affordability, and quality of cancer care.

#### 3.5.1 Alignment with Schemes of Government of India

- **Ayushman Bharat Scheme**  
The Ayushman Bharat Scheme aims to provide financial protection to vulnerable populations for catastrophic health expenditures. The financial support provided through the project for the diagnosis and treatment of cancer aligns with the broader goal of Ayushman Bharat to improve access to quality healthcare.
- **Rashtriya Arogya Nidhi (RAN)**  
RAN provides financial assistance for patients living below the poverty line who are suffering from life-threatening diseases. The project ensured timely financial support and direct fund transfers to healthcare providers. It supported the economically disadvantaged patients to receive the necessary support without administrative delays. It complements the objectives of RAN.
- **National Program for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases, and Stroke (NPCDCS)**  
NPCDCS focuses on strengthening healthcare infrastructure for cancer care and early detection. However, access to timely cancer treatment remains a challenge due to limited facilities. MCT's collaboration with private hospitals to provide affordable cancer care directly supports the NPCDCS objective of expanding access to treatment. It aligns with the NPCDCS by adopting a comprehensive approach that includes diagnosis, treatment, and rehabilitation.
- **National Health Policy 2017**  
The National Health Policy advocates for reducing the financial burden of healthcare on families and ensuring universal health coverage. MCT's model of subsidized care and transparent fund transfers supports the policy's goal of financial risk protection for patients. The project aligns with the policy's focus on equity and inclusion in healthcare delivery.



3.5.2 Coherence with SDGs



The project provided timely and affordable cancer care which reduced mortality and improved the quality of life for Head and Neck Oncology patients. Its psychological and emotional support enhanced the mental health and well-being of patients during their treatment journey



The project supported 53% of female beneficiaries. It demonstrated a commitment to addressing gender disparities in cancer treatment access. It ensured that women, who often face additional societal and financial challenges, receive critical healthcare services



The project reduces the inequalities by focussing on economically disadvantaged families. It promoted greater inclusion in cancer care by addressing financial barriers and extending support to underserved regions



The Project exemplifies effective collaboration between CSO (MCT), private & Govt hospitals, diagnostic centres, etc. It optimized resource allocation, reduced treatment costs, and ensured that more patients receive the care they need.

3.6 Impact

The project has been evaluated based on its intended impact. The project “Head and Neck Oncology Surgery” had the following intended impact:

- 1. Enhanced access to quality healthcare for cancer treatment
- 2. Financial resilience and economic support for families
- 3. Equitable and inclusive healthcare access

The project had a measurable impact on economically disadvantaged cancer patients and their families.

3.6.1 Financial Resilience

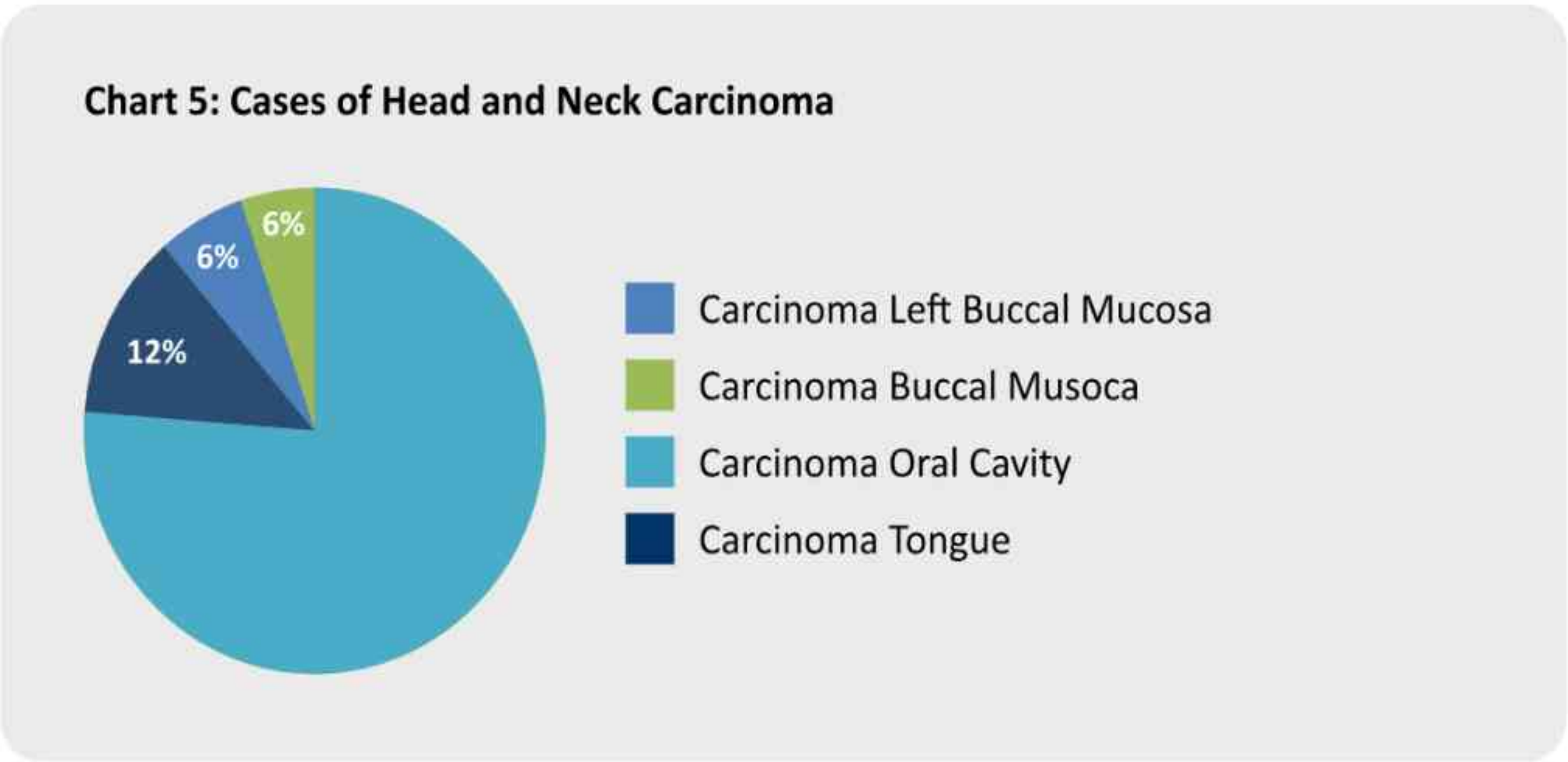
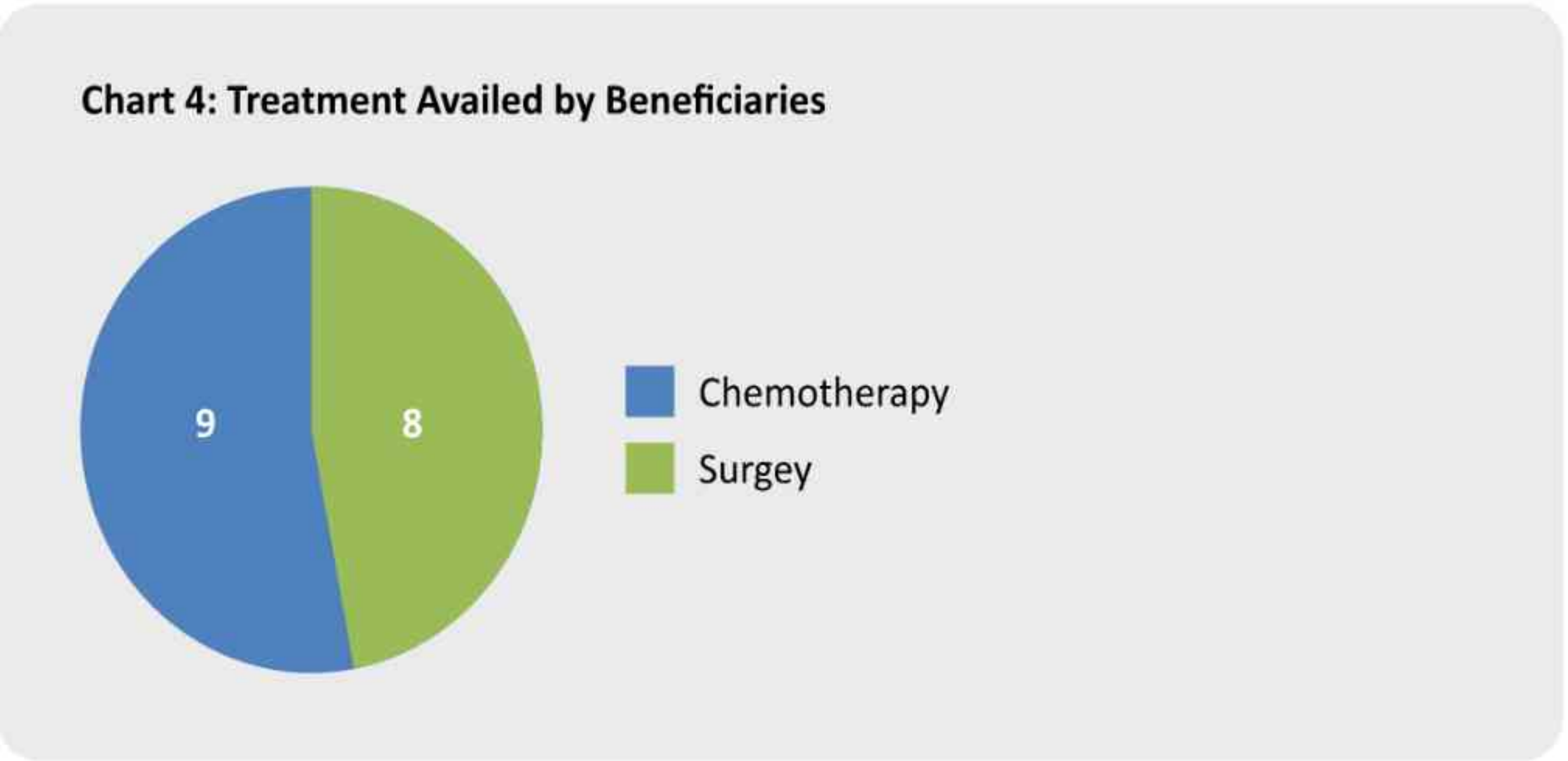
The project addressed the financial barriers to cancer treatment. It enabled patients from marginalized sections to access expensive and quality medical care. It directly mitigated the financial strain on families. The project successfully addressed systemic inefficiencies in cancer care by bridging gaps between high patient demand in public hospitals and the high costs in private institutions. It provided a scalable model for addressing systemic healthcare inequities through public-private partnerships.

3.6.2 Enhanced Access to Quality Healthcare

The project has played a critical role in facilitating life-saving treatment for patients diagnosed with various forms of carcinoma. The financial support and timely medical intervention through the project helped in specialized surgical care and improved health



outcomes. A total of 17 patients availed chemotherapy and surgical treatment for various Head and Neck cancers such as Carcinoma Oral Cavity, Carcinoma Tongue, Carcinoma Buccal Mucosa, Carcinoma Left Buccal Mucosa etc.(Chart 5). A maximum of 75% of patients treated under the program had Carcinoma Oral Cavity, who received critical healthcare to prevent disease progression and improve recovery outcomes



**3.6.3 Perceived Impact on Economic Empowerment of Underprivileged Families**

The project eliminated the financial barriers to critical healthcare interventions. It was found through the interaction with hospital administration that ~90% of the patients recovered successfully. It would prevent loss of income due to prolonged illness and enable patients to resume daily activities and regain financial stability. Families would have relieved of the emotional and economic burden that cancer often imposes, allowing them to focus on rebuilding their lives. The project would have positively impacted the livelihoods and empowerment of economically disadvantaged patients and their families.

The project has fostered a sense of empowerment and resilience among beneficiaries, particularly in underprivileged communities. It has protected families from debt cycles. This integrated approach to financial and medical support has improved the survival rate. It would enhance social and economic stability, ensuring that vulnerable communities are not left behind in the fight against cancer.



### 3.6.4 Enhanced Community Awareness

The project created greater awareness of the available support mechanisms for cancer care through collaborations with hospitals and outreach efforts. This empowerment of communities would encourage more patients to seek timely medical help.

#### **A Single Mother's Journey of Strength and Support**

A 40-year-old single mother from Wadala, Mumbai, faced a life-altering challenge when she was diagnosed with cancer. She had been the primary breadwinner for her family, working as a domestic helper. She lives with her elderly mother and young daughter. The diagnosis of cancer impacted her health and left her unemployed due to the societal stigma surrounding cancer. A small vegetable cart run by her mother was becoming the family's only source of her family income, and her situation became increasingly dire.

The first sign of trouble was a visible cyst on her neck, which led her to consult a local doctor. She was referred to Tata Memorial Hospital (TMH) for further evaluation, where a biopsy confirmed she had neck cancer. The news brought immense fear and uncertainty, as the family was emotionally unprepared and financially constrained. She was introduced to MCT through a referral from TMH, initially, she was unaware of the program. The organization offered her a ray of hope, providing much-needed financial assistance for her treatment.

She found the application process smooth and well-supported. The team at MCT guided her through every step, ensuring that all necessary documentation was completed without stress. Their cooperative and compassionate approach made a difficult situation more manageable for her and her family. MCT provided financial assistance and closely monitored her treatment progress. It collaborated with surgeons to develop comprehensive treatment plans. It was crucial in covering the entire cost of her cancer surgery and medications. It allowed her to bypass TMH's lengthy waiting lists and receive timely treatment.

MCT's intervention proved to be life-saving, allowing her to focus on her recovery without worrying about the financial burden. She expressed her gratitude for the seamless disbursement process and the professionalism of the staff, whose kindness and support left a lasting impact. The financial aid provided her access to excellent treatment and gave her a renewed sense of hope and strength to fight cancer. She credits this support for giving her a second chance at life and ensuring that her treatment was not delayed due to financial constraints.

### 3.7 Sustainability

The sustainability of the project lies in its strategic planning, inclusive approach, and operational efficiency. Key elements that ensure the project's long-term impact and viability are given below:

#### **3.7.1 Sustainability of the Financial Assistance**

The project "Head and Neck Oncology Surgery" is not a standalone initiative but an integral part of a larger effort of MCT to combat cancer and support economically disadvantaged patients. It aligns with the broader "Cope with Cancer" program of MCT, which has been operational since 2018, providing comprehensive financial aid for diagnostics, chemotherapy, radiation therapy, surgery, and ICU support across multiple hospitals in India



such as Tata Memorial Hospital (in Mumbai), and other charitable healthcare facilities in Navi Mumbai, Panvel, Nashik, Pune, Kanpur, Varanasi, Kolkata and Coimbatore. The “Cope with Cancer” program has supported an average of 100 patients per month at Tata Memorial Hospital alone<sup>9</sup>.

The sustainability of this initiative is ensured through the continued support of multiple donors and corporate partners such as Kotak Securities Ltd, General Insurance Corporation of India, Astra Industries & Trading Company Ltd, Everest Foods Charitable Trust, Mr. Janak Dwarkadas Trust etc. The contribution from these donors enables the project to function efficiently to provide timely financial aid to patients.

This diverse financial backing reflects strong stakeholder confidence in the initiative, which ensures the sustainability of the project.

### **3.7.2 Public-Private Partnerships (PPP) a Replicable Model**

The collaboration between MCT, private hospitals, TMH, and diagnostic centres highlights a sustainable approach to bridge healthcare gaps. This PPP model forms a replicable framework for other underserved areas.

### **3.7.3 Holistic Patient Care Approach**

The project’s emphasis on psychological and emotional support such as counselling and community engagement etc. fosters resilience among patients and their families. This focus on comprehensive care ensures that beneficiaries recover and reintegrate into society, creating a lasting social impact.

### **3.7.4 Awareness and Community Engagement**

The project has raised awareness about cancer care support through outreach programs. It encourages early diagnosis and timely treatment, reducing the overall healthcare burden and contributing to the project’s sustainability.

### **3.7.5 Volunteer Engagement**

MCT’s structured operations, including the involvement of skilled professionals and volunteers, ensure the program's smooth functioning. The integration of volunteers enhances the program’s reach and effectiveness, making it less dependent on external resources.

### **3.7.6 Focus on Long-Term Recovery**

The project prioritizes long-term recovery and quality of life by including dental implants and post-surgical rehabilitation in the treatment process. This holistic approach ensures sustained well-being for beneficiaries, which serves as a benchmark for similar initiatives.

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<sup>9</sup> <https://www.copewithcancer.org/financial-aid-at-tata-memorial>



## 4. Best Practices, Suggestions and Conclusion

### 4.1 Best Practices of the Program

The best practices of the “Head and Neck Oncology Surgery” project are given below:

#### 4.1.1 Holistic Patient Support

The project extended beyond financial aid to include emotional and psychosocial support. Activities such as counselling sessions and dedicated help desks ensured that patients and families were guided through the complex treatment journey. It reduced stress and uncertainty.

The Project also included community engagement activities like cancer awareness events, festival celebrations, etc. which provided emotional support and fostered a sense of belonging for the patients and their families.

#### 4.1.2 Timely Financial Assistance

The project ensured the prompt disbursement of funds, enabling patients to access timely cancer surgeries and treatment. This significantly minimized delays, which are often detrimental to cancer outcomes.

#### 4.1.3 Direct Fund Transfers to Healthcare Providers

A transparent mechanism of directly transferring funds to hospitals ensured that the resources were utilized solely for intended medical purposes. This eliminated delays caused by intermediaries and reduced the risk of fund misuse. Regular tracking and reporting ensured transparency in fund utilization. Patients reported confidence and trust in the system due to the clarity at every step of the process.

#### 4.1.4 Subsidized Treatment Costs

Collaborations with private hospitals and diagnostic centres provided discounted treatment for surgeries, chemotherapy, radiation, and diagnostic tests. Patients were only required to bear ~10% of the total costs, making high-quality cancer care accessible to economically disadvantaged families.

#### 4.1.5 Comprehensive Monitoring and Follow-Up

The project employed a robust monitoring system such as onsite visits, telephonic follow-ups, video consultations, etc. It ensured that patients received uninterrupted care. This helped in identifying potential issues early and mitigating them effectively.

#### 4.1.6 Collaboration with Hospitals and Stakeholders

Strategic partnerships with hospitals like Tata Memorial Hospital, SRV, and Nanavati Super Speciality Hospital facilitated timely treatment for patients who faced long waiting periods at government hospitals.

#### 4.1.7 Community Awareness and Outreach

Awareness campaigns and hospital referrals played a significant role in informing patients about the financial support program and encouraging more individuals to seek timely help.



#### **4.1.8 Streamlined Application Process**

A straightforward application process with clear eligibility criteria ensured that patients from underprivileged backgrounds could easily access financial support.

#### **4.1.9 Inclusive and Impact-Oriented Approach**

The project supported the improvement of post-treatment quality of life through the integration of dental implants in the treatment plan of head and neck cancer patients. This highlights the project's focus on long-term recovery and rehabilitation, ensuring that cancer care extended beyond survival to quality living.

### **4.2 Suggestions for Improvement of the Program**

#### **4.2.1 Expand Post Treatment Coverage**

While the program focused on immediate treatment, many patients have emphasized the need to extend financial support to post-surgical follow-up care, rehabilitation, and complication management. It is essential to ensure long-term recovery and prevent recurrence.

#### **4.2.2 Enhance Documentation Support**

Some of the patients faced challenges in obtaining the required documentation, such as income certificates to qualify for financial assistance. It is suggested to establish dedicated support teams to assist patients in obtaining necessary documents, especially income certificates.

#### **4.2.3 Increase Awareness Campaigns**

Many economically disadvantaged cancer patients remain unaware of the project. It is suggested to conduct targeted awareness drives in rural and underserved regions to reach a broader audience.

#### **4.2.4 Integrate Non-Medical Support**

Cancer treatment extends beyond medical procedures. Patients and their families often face significant financial burdens related to travel, accommodation, and nutrition. The Project may consider including this expense for selected patients.

#### **4.2.5 Strengthen Psychological Services**

The program provided counselling and emotional support throughout the treatment journey. However, some of the patients suggested further strengthening it by adopting structured counselling and emotional support sessions.

### **4.3 Conclusion**

The “Head and Neck Oncology Surgery” project has addressed critical gaps in cancer care for underprivileged communities. It significantly improved survival rates, recovery outcomes, and the overall quality of life for beneficiaries by ensuring timely and affordable treatment.

The project successfully demonstrated the scalability of a Public Private Partnership model through collaboration between MCT, donors, private hospitals, and diagnostic centres. It created a sustainable and inclusive healthcare framework that aligns with India's national health policies and UN's SDGs. The project provided medical support and holistic patient support by including counselling and community engagement programs.



The project's success lies in its strategic, transparent, and inclusive approach, offering a replicable model for similar healthcare initiatives to ensure that no economically disadvantaged family is left behind in the fight against cancer.



## 5. List of Abbreviations

- KSL - Kotak Securities Limited
- SDGs - Sustainable Development Goals
- CSR - Corporate Social Responsibility
- OECD - Organization for Economic Co-operation and Development
- DAC - Development Assistance Committee
- REECIS - Relevance, Effectiveness, Efficiency, Coherence, Impact, Sustainability
- KII - Key Informant Interview
- MCT - Madat Charitable Trust
- TMH - Tata Memorial Hospital
- PPP - Public-Private Partnership
- RAN - Rashtriya Arogya Nidhi
- NPCDCS - National Program for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases, and Stroke
- MRI - Magnetic Resonance Imaging
- CT - Computed Tomography
- PET CT - Positron Emission Tomography–Computed Tomography
- ACTREC - Advanced Centre for Treatment, Research and Education in Cancer
- FY - Financial Year
- NC - Non-Concessional
- ICU - Intensive Care Unit
- NGO - Non-Governmental Organization
- BPL - Below Poverty Line



## About NuSocia

NuSocia is an impact advisory firm, headquartered at Pune and having its consultants working across Delhi, Mumbai, Bangalore, Kolkata and Pune and at locations outside India at Dubai, Toronto and Muscat.

Established in 2017 and incubated at IIM Bangalore NSCRCEL, NuSocia is working with the mission to enable the Social ecosystem with impact that is evident. The team comprise of consultants, researchers, social sector professionals and data scientists with a common passion to generate ideas that matter for the people and the planet. It work with Corporates, Governments, Foundations, and Non-profits to help them maximize, manage, measure, and communicate their social impact.

Clients select us for our expertise to bring the best of the global framework and marry it with the ability to connect at the grassroots level and thus creating and delivering practical solutions to the unique client requirements. As a knowledge driven organization, NuSocia focus on research and collaboration to design innovative solutions and work across the entire social impact lifecycle offering services in CSR strategy, needs assessment, program design, implementation, monitoring & evaluation, impact assessments, communication, and more.



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