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In the Name of Allah the Most Gracious, the Most Merciful

"We decreed for Children of Israel that whosoever killeth a human being for other than manslaughter or corruption In the Earth, it shall be as if he had killed all mankind, and whoso saveth the life of one, it shall be as if he had saved the life of all mankind."

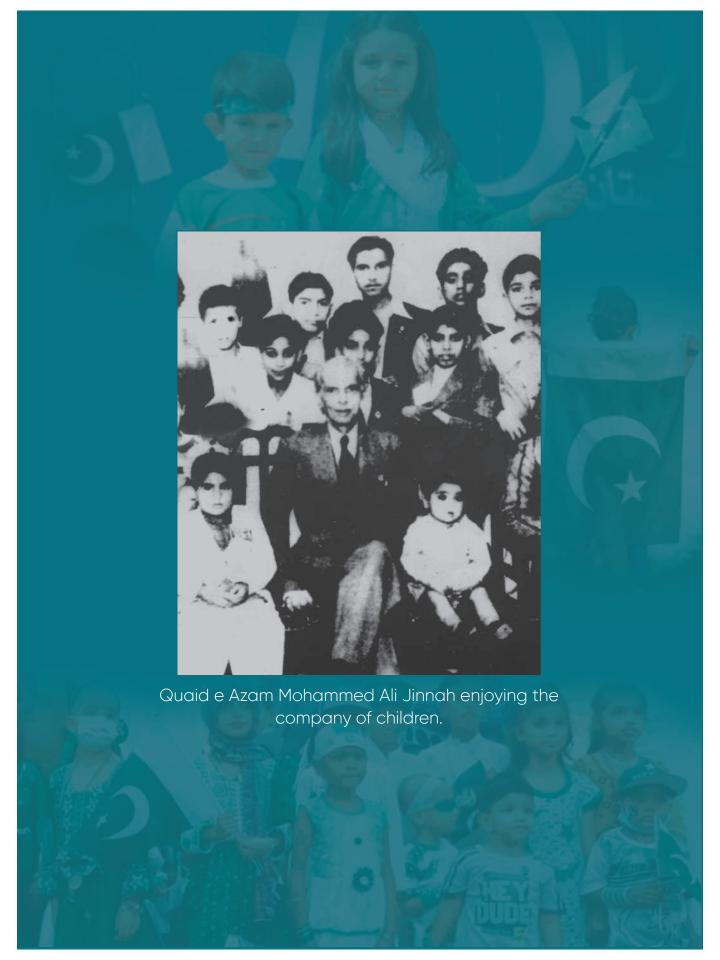
Al-Quran, Surah Al-Maidah 5:32

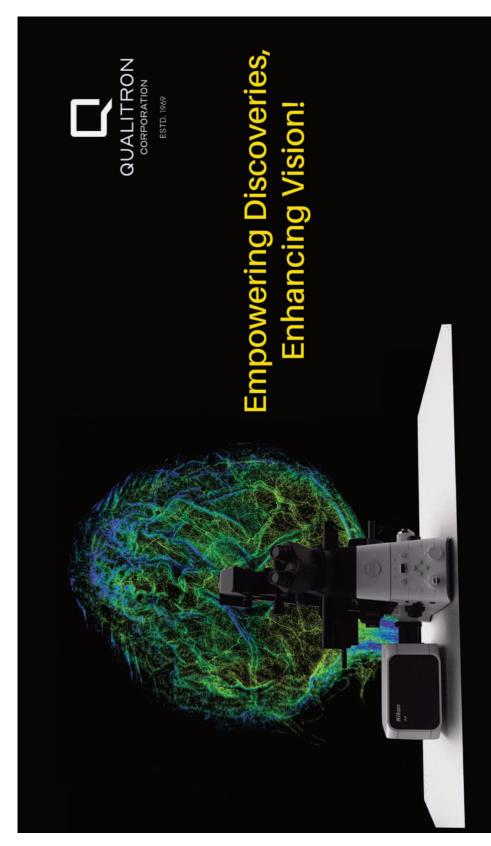
Save a Life and Share the Blessings of Allah











OUR PARTNERS













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# Save for Pakistan Invest in Pakistan



"We ... in general and young men in particular do not know the value of money. A paisa saved today is two paisa tomorrow, four paisa after that and so on and so forth. Because of our addiction to living beyond means and borrowing money we lost our sovereignty over this Sub-continent."

Mohammad Ali Jinnah Founder of Pakistan (Ziarat, 1948)



# Professor Dr. Nizam ul Hasan 7<sup>th</sup> September 1931 – 4<sup>th</sup> November 2020



Founder Child Aid Association

Prof. Dr. Nizam ul Hasan graduated from Dow medical College in Karachi and received training in the field of general surgery in England culminating in Fellowship of the Royal College of Surgeons (Eng.). He returned to Karachi in 1963 to join the Children's Hospital which was then part of JPMC as honorary assistant professor. Having a keen interest in surgical diseases of children he worked throughout his life towards this cause. He became Chief of Pediatric surgery in 1976 and later in 1990 the Director of the National Institute of Child Health, the first dedicated hospital for children in Pakistan. It was during his tenure that the foundation of his brainchild, Child Aid Association, was laid. Initially to help support the underprivileged children in providing medicines, later focusing on treatment of oncology patients at NICH. He retired in 1991 but as president of Child Aid Association continued to work till the end helping to establish and manage the Children's Cancer Center at NICH, Karachi.





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### The Children's Cancer Center

OUR STORY ...the brainchild of Professor Dr. Nizam ul Hasan, the journey of Child Aid Association began in the year 1979 with a handful of members in a small room located within the premises of the National Institute of Child Health (NICH), Karachi. Observing that most patients coming to the institute belonged to underprivileged families, the aim was to provide them with medicines free of cost. However over time noticing the growing number of cancer incidence in children the association decided to expand its services to cover the treatment of cancer in children

The Child Aid Association took on the mammoth task of not only setting up an Oncology ward at NICH but also pledged to provide treatment, free of cost, to all these patients. Hence in 1999 Child Aid Association, with the help of generous donors and support from NICH, established the First Pediatric Cancer Center in Pakistan in the government sector at the National Institute of Child Health, Karachi.

OUR SERVICES ...In 2007 the Child Aid Association set up the Cytogenetic laboratory at the NICH with the assistance of Association of Physicians of Pakistan origin North America (APPNA), Rotary Club Sunset Millennium, Karachi and many other local donors.

A Molecular Laboratory was later commissioned in 2009 with support from the Pakistan Baitul Maal and Rotary Club Sunset Millennium. This lab not only provides services to cancer patients but also patients of endocrinology at NICH and outside.

The Total Parental Nutrition Laboratory (TPN) was set up in 2011 sponsored by Infaq Foundation which caters to the Oncology patients as well as extends its services to other wards of NICH and at times outside to Civil Hospital and Kidney Centre too. The Association till date has helped over a million underprivileged children providing free medicines and special investigations which are not available at the hospital.

Today by the grace of Allah with 25 years of service behind us our organization is running a full-fledged Children's Cancer Center at the NICH, Karachi, where treatment is free of cost. The total number of patients treated till 30<sup>th</sup> June 2024 was 10,485 who came from all over Pakistan with 513 patients registering this year.

The Children's Cancer Centre achieved 70% disease free survival in those who completed treatment as per international protocols. We continue to facilitate NICH by providing life support and other equipment, surgical instruments for intensive care and operating rooms.

OUR SET UP ....The Child Aid Association is a registered voluntary organization with the Department of Social welfare Government of Sindh, presently having over 130 members. The activities of the Association are governed by an elected executive committee and its finances audited by M/s Muniff Ziauddin & Co. Chartered Accountants.

OUR TEAM ...We have a team of dedicated members in our executive committee comprising doctors, business men, engineers and others from various walks of life helping to run the affairs of the Association. The executive committee is elected every two years by the general body of members. The executive committee has all the authority to raise funds, disburse them with due care and take all the decisions with respect to future projects. Child Aid Association has a good working relationship with the administration of NICH which provides surgical support for our patients and in accommodating them at times when we are short of beds.

FUNDS OF ASSOCIATION....We raise funds through direct contacts, fund raisers, zakat appeals and other donations through press and electronic media. To facilitate donors in USA, Child Aid Association was registered as a charity in 2016 under the name 'Child Aid Association, INC.' Donations are received through PayPal. Any queries can be sent to CAAinUSA @gmail.com.

We acknowledge with gratitude the financial support provided by Infaq Foundation, HBL Foundation, Bank Al Habib Limited, Bank Al Falah Ltd., PARCO and PSO.

#### HOW TO SUPPORT US....

Cross cheques, bank draft, debit card and cash are directly received, as well as through post or courier, at the office of the CHILD AID ASSOCIATION, NICH. Rafiquee Shaheed Road, Karachi-75510 or through on-line transfer to our following bank accounts. Please note the foreign currency accounts are only for domestic and national transactions.

Faysal Bank L Pak Rupee		3400 0910 0170 8018
	oolitan Bank Limited IBAN PK53MPBL	0177 0271 4013 0348
Habib Bank L Pak Rupee	imited IBAN PK46HABB	0000 6579 0030 3603
Bank Al-Habi Pak Rupee	b Limited IBAN PK95BAHL	1020 0081 0047 8101
Meezan Bank Pak Rupee		0001 4501 0137 3779
National Ban Pak Rupee	k of Pakistan IBAN PK12NBPA	5053 0033 1303 3535
Bank Al-Habi Pound Sterling	b Limited IBAN PK86BAHL	1020 0407 0058 3001
Bank Al-Habi Euro	b Limited IBAN PK59BAHL	1020 0413 0058 3001
Bank Al-Habi US Dollar	1020 0419 0058 3001	

Donations can also be made in kind as in medicines, disposables, children's toys, milk, diet supplements and any scrap.

All accounts are subject to internal audit as well as annual audit by Muniff Ziauddin & Co.

Acknowledgments: Mrs. Fawzia Hasan Pathan for design

CHILD AID ASSOCIATION, NICH. Rafiquee Shaheed Road, Karachi-75510 Tel: (92-21) 35219218 - 35673052, 35652945 Fax: (92-21) 35673052 Email: childaid79@yahoo.com, Website: www.childaidassociation.pk



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# **Executive Committee**



Mr. Tariq Shafi President



Mr. Tariq Siddiqui Vice President



Dr. Nasir Saleem Saddal General Secretary



Mrs. Fawzia H. Pathan Joint Secretary



Hafiz Muhammad Amir



Dr. Aftab Ahmed Shah Executive Member



Dr. Rajkumar Ochani Executive Member



Dr. Soofia Ahmed Executive Member



Mr. Khaleeq Ur Rehman Executive Member



Mr. Faiyaz Ahmed Executive Member



Mr. Farooq Uz Zaman Khan Executive Member



Mr. Zahid Ali Khan Executive Member



Dr. Anwar Arain Executive Member



Dr. Arith Parkash Executive Member



Mr. Yahya Chawla Executive Member



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- 2. Foreign Currencies' Exchange
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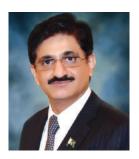


An Ultra

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Message of Chief Minister Sindh Syed Murad Ali Shah

I want to extend my heartfelt appreciation for the incredible work of Child Aid association for children battling cancer. Their dedication, compassion, and tireless efforts to provide support, care, and hope to these young warriors and their families are truly inspiring.

Child Aid Association is a beacon of light in the lives of those affected by this devastating disease. The impact of which goes beyond medical care, bringing joy, comfort, and strength to those who need it most.

The selflessness, expertise, and generosity of staff have changed countless lives. I appreciate their unwavering commitment to this noble cause.

Thank you for providing free access to quality medical treatment and facilities, emotional support and counseling to families. Creating opportunities for these children to smile and experience joy as well as advocating for cancer awareness and research is most commendable.

Child Aid Association making a difference and it's appreciated more than words can express .

Thank you again for all that you do.





# Message of President

Alhamdulilah, this year we are celebrating the silver jubilee of our Children Cancer Center, established in 1999. Since the start of functioning of this Center, we have never looked back and have focused on moving forward, with the introduction of the latest technologies and providing the best of drugs available with the passage of time.

It was all possible due to Allah (SWT)'s help and untiring efforts of our team, staff and volunteers.

Another milestone will be achieved this year In Sha Allah, when we will be completing the renovation of our oncology ward, with the latest technologies, systems and improved patient's care.

Cancer in children is curable if diagnosed in time and treatment is started immediately, there is a good chance that 70% of the children will be cured of this deadly disease.

We have treated more than 10,000 children free of cost who are living a normal life now. Many of our patients off-treatment have become useful citizens and are happy in their normal lives.

Ours is the first proper paediatric care center in Pakistan. Our center became the lead example and we provided manpower to many other centers also.

Treatment of cancer is a very expensive affair, but we are doing it 100% free of cost with the blessings of God and help from our donors, nationally and internationally.

We appeal to all those who have been blessed with means to come forward and donate generously.

Mr.Taria Shafi

President, Child Aid Association

# Annual Report of Activities 2023-2024

Beginning with the name of the Beneficent and Merciful Allah, it is my privilege to present the Annual activity report for the financial year commencing July 2023- June 2024. This year total number of Executive Committee meetings which took place was twelve (12), number of Emergent meetings held was two (2), Administrative Committee met once and the Annual General Body also met once. The Elections were also scheduled this year, hence the AGM and the elections were held on 18th November '23.

During the period between July '23 and June '24 total number of registered cases was 513, Number of patients seen in OPD was 6458, number of patients off treatment was 957 and number of mortality cases was 19. A number of events took place during the duration of this year starting with Independence Day celebrations. As always Independence Day is celebrated with the children who have successfully completed treatment as well as those under treatment at the Cancer Center of Child Aid Association. This year we were pleased to have Mirza Babur Baig, EVP & Divisional Head CSR of National Bank of Pakistan gracing the occasion. The members of the executive committee who were present to welcome the esteemed guest and children were President, Child Aid Association Mr. Tariq Shafi, the General Secretary at the time Dr. Salman Burney (late), Joint Secretary Mrs. Fawzia Pathan, Treasurer Dr. Soofia Ahmed, executive member Dr. Zeba Batool Attar, and Executive Director NICH Dr. Nasir Saleem Saddal who is also member of executive committee.

Before commencement of proceedings Mr. Baig was taken on a visit of the Oncology ward by Mr. Tariq Shafi. Thereafter the President and Chief Guest addressed the children and guests followed by distribution of gifts among the children. The event ended with a cake cutting ceremony, the cake was courtesy "Pie in the Sky" bakers. The month of September is designated globally for Childhood cancer awareness known as Gold September and Child Aid Association also undertook a few initiatives to raise awareness about Childhood cancer. Following activities were held during Gold September; Distribution of 16,000 leaflets on Childhood Cancer awareness, its symptoms and precautions, was undertaken in various schools of Karachi. Banners and standees for Gold September were placed during the Children's festival at Art Council Karachi. Radio slots on Health shows HOT FM 105, Radio Pakistan FM 101 were booked where Dr. Uzma Imam In charge Oncology unit participated, highlighting importance of childhood cancer awareness.

Well known TV artist Mr. Khalid Anum also visited the Children's Cancer Center and spent time with the patients in the Oncology unit. The Elections and Annual General Body meeting of Child Aid Association were held on 18th November 2023. The election committee was headed by Mr. Muhammad Aslam with members Mr. Pervez labal and Dr. Rubab who scrutinized the papers submitted by applicants. Following members were elected as office bearers; Mr. Tariq Shafi (President), Mr. Tariq Siddiqui (Vice President), Dr. Salman Burney (General Secretary) Mrs. Fawzia Hasan Pathan (Joint Secretary) and Mr. Hafiz Amir (Treasurer).

In the first meeting of the new executive committee it was decided that an Administrator be employed to manage and oversee the running of the Children Cancer Center supported by Child Aid Association at NICH, Karachi. On 1st December,'23, Dr. Zeba Batool Attar, a senior pediatric surgeon with a Masters in Health Professions education, who had stepped down as member of executive committee earlier joined as Administrator. Other than events our ongoing Voluntary Community services program for school and college going students ran during July and December school holidays. Total of 35 students participated which included, Mama Parsi School, Habib Girls school, City School PAF chapter and AMI school.

In late December Child Aid Association faced an unfortunate setback with the sudden demise of its General Secretary, Dr. Salman Burney. He had joined CAA as life member in 2005 and remained its honorary secretary from 2005 -2007. Thereafter he held the post of General Secretary till 2021 and later from November 2023 till December '23 , serving Child Aid Association in this capacity till the end. Dr. Salman Burney's services for Child Aid Association will be remembered for long. Thereafter the executive committee nominated Dr. Nasir Saddal to fill the post of General Secretary.

The International Cancer Day is observed on February 4th and our social workers organized activities for the children. Additionally DAWN newspaper took out a supplement on this occasion in which Dr. Uzma Imam's article on the subject was printed. The International Childhood Cancer Day is observed globally on 15th February 2023. This year the theme for the International Childhood Cancer Day was "Unveiling Challenges". The Children's Cancer Center, Child Aid Association also observed the day. Many activities were planned in the ward by our social workers with the children, their attendants and staff. Cake cutting ceremony was also held on the occasion. To commemorate this day the Avari Towers, Cluster General Manager Hans -Joerg Kreitner hosted an event inviting the Executive committee, also attended by their department heads. The President Child Aid Association, Mr. Tariq Shafi was presented a donation cheque and gifts for the children of the Oncology unit which had been collected by the staff of Avari Towers and its vendors. As in the past this year too the Ramzan campaign was run during the month of March-April, 2024 for raising zakat and donations. The campaign covered appeal in print media, radio channels, distribution of flyers, standees in banks and billboards. This year English Biscuit Manufacturers donated four of their prime billboard sites to Child Aid Association and also facilitated printing of the artwork. We are extremely grateful to them for their kind and generous gesture. Additionally a successful fund raising campaign was run during Ramzan by the Caa USA wing to help raise funds for the HVAC system in the under renovation Oncology unit. The Caa USA team has been instrumental in the recent past with the valuable support of Syed Imran Ali in conducting donation drives not only in Ramzan but throughout the year due to which Caa has been able to purchase costly items like reagents, kits and parts for the flow cytometry machine. On behalf of the executive committee I would like to extend our gratitude and appreciation for their dedication in helping us achieve our targets.

This year too like every Eid gifts were distributed among the children under treatment received through various donors. We are greatly obliged and grateful to the Sind government for the continuation of their annual grant of Rs.100 million. This has given us a huge boost in improving and extending our facilities to a larger number of children suffering from cancer.

This year following workshops were conducted; 'Patients counselling and breaking bad news 'and 'Ethics in medical practice' by Administrator Dr. Zeba Attar; 'Infection control in a pediatric cancer ward' by Head nurse Shama Naila; 'Empathy in nursing care' by Dr. Hana Khan and 'Advancing Strategies in BNHL treatment' by In charge Oncology unit Dr. Uzma Imam.

We extend our thanks to the Director, NICH, Dr. Saddal for donation of antibiotics, general medicines ,disposables and the support of the radiology and surgery department in treatment of oncology patients. Here we would like to mention a special thanks to PWA as well as SADA welfare trust for providing blood products for our patients.

We are grateful to all our honorary consultants namely, Consultant hematologist Dr. Khalid Zafar Hashmi, Dr. Rizwan Naeem, Director Molecular Pathology and fellowship programs at Montefiore Medical Centre Rye, Mr. Arshad Warsi for legal advice, Mr. Pervez labal for his guidance during our Ramzan campaign and our auditors Messrs. Muniff Ziauddin & Co. Chartered Accountants for timely completion of audit.

We extend our appreciation and thanks to our Administrator Dr. Zeba Batool Attar as well as the staff in each department, especially in the Oncology unit who have worked tirelessly with dedication throughout the year and helped in achieving our targets.

We now eagerly await the completion of the Oncology unit renovation In sha Allah by years end which will improve upon the facilities, treatment and care of our patients.

Dr. Nasir Saddal

General Secretary, Child Aid Association

# Shariah Certificate



# CERTIFICATE Zakat and Donation Funds For the Period 2024-2025

#### Introduction:

Child Aid Association (CAA) was founded in 1979 and is a registered voluntary organization with the Department of Social Welfare Government of Sindh. Having established the first pediatric Cancer Center in Pakistan in 1999 at NICH, the Association is providing free treatment to all patients. The Cancer Center has achieved 70% disease-free survival in those who completed treatment as per international protocols.

Today by the Grace of ALLAH with 25 years of service behind us our organization is running a full-fledged Children Cancer Center at the NICH, Karachi, where treatment is free of cost. This can be done through generous donations from philanthropists and charitable organizations. The needy cancer patients are treated through welfare funds to live their lives healthy and become beneficial to society.

Child Aid Association has a good working relationship with the administration of the National Institute of Child Health, Karachi. The Association is run by an executive committee, elected every two years by the general body of the members. The executive committee has all the authority to raise funds, disburse them with due care, and make all the decisions concerning future projects.

#### Zakat and Donation Utilization:

- The financial needs of deserving patients are covered through Zakat and Donations funds according to the shariah rulings. This free of cost treatment and services brings comfort to humanity and achieving great ranks in front of ALLAH SUBHAN WA TAA'LA.
- Zakat and donation funds are being collected, disbursed, and utilized according to Shariah law.

#### Conclusion:

As an external Shariah Consultant, we regularly reviewed and checked the existing patients' treatment and other facilities which are 100% free of cost, and while examining the accounts for the financial year 2023–2024, we conclude that the Association is purely working for the welfare of needy and deserving patients.

In addition to the above statement, we further confirm that The Child Aid Association is entitled to receive Zakat and Donations from all fields of life besides individuals as well as Corporate Sectors.

May Allah S.W.T grant the Management of Child Aid Association blessings for their services and management for this noble cause.

Dr. Mufti Hassan Ashraf Usmani For and behalf of Sharafat Consultancy (Pvt.) Limited

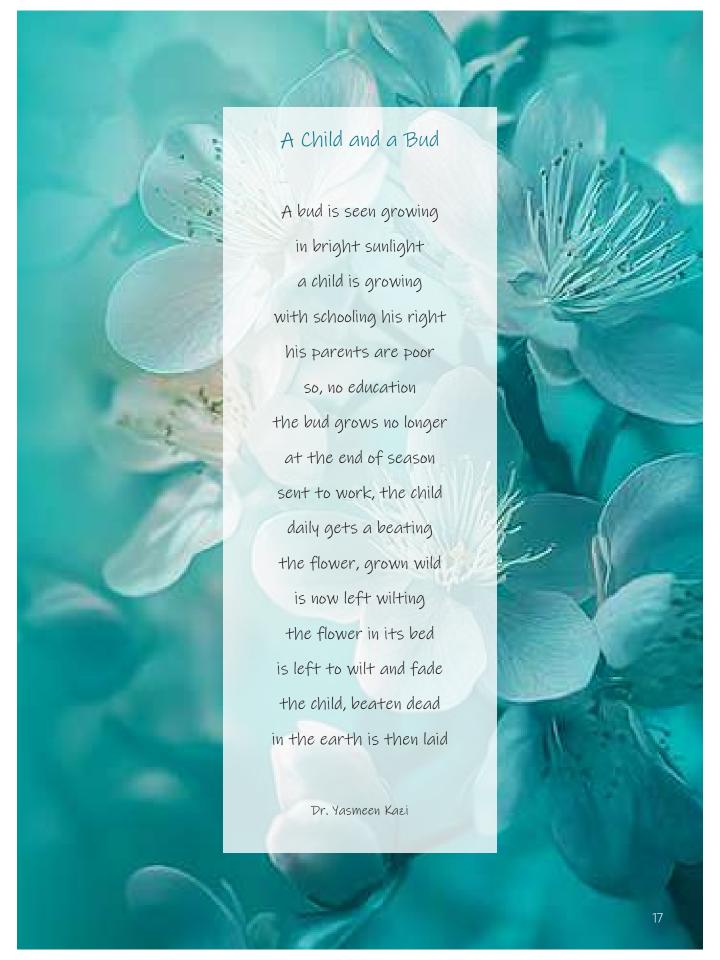
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Dated: July 2024

Muhammad Sohaib

Sharafat Consultancy (Pvt.) Limite

Dated: July 2024



### Commitment to a cause



Dr. Uzma Imam
Department In charge, Pediatric Oncology
Children Cancer Center, Child Aid Association,
NICH, Karachi.

Due to the difficult global socio-economic situation, the governments in most of the LMICs (low and middle-income countries) continue to struggle to provide basic health services to its population. The major emphasis still is on the control of prevalent communicable diseases like tuberculosis, measles, diphtheria, poliomyelitis etc. Therefore, there is a lot more to be done to develop a meaningful NCD (non-communicable diseases) program or cancer awareness and cancer control plans. As a direct consequence to this context, the priority placed childhood cancer care at the national level remains minimal in majority of these states.

However in every challenge we face is an opportunity for finding new solutions. This consequential standard of care vacuum provides an opportunity to develop a unique public-private partnership model that is instrumental in advancing childhood cancer care capacities in some of these countries. Ours is a well-integrated public-private partnership model where patients are supported and financed heavily by philanthropy. At the Pediatric Oncology department in Children Cancer Centre of Child Aid Association, NICH, children with cancer coming from all over the country are provided free cancer treatment and other complimentary support services including diagnostics, blood transfusions, nutrition supplements and rehabilitation, and psychosocial care. With the ever expanding need of space for patient care (Fig-1) in the department, the ward is currently undergoing expansion and renovation by Child Aid Association.



After the successful implementation of clinical nutrition program and psychosocial care of children with cancer and their families, our next focus is on the launch of 'childhood cancer awareness campaign' with the aim of dissemination of knowledge about early warning signs of childhood cancers among communities and healthcare workers. This campaign will help in decreasing the number of advanced stage disease cases that we come across as a result of delays in referrals of these kids to the available Pediatric Oncology facilities in the country. Figures 2. and 3. describe the geographical distribution of our registered patients.

The next task would be to establish Pediatric Oncology satellite clinics of Child Aid Association in the province, later taking them to other provinces to help patients get timely referrals and also provide them with a facility of treatment follow-ups near their homes. The need for travel to a faraway city for treatment of a child adds significantly to the burden on families. At our department, approximately 60% patients come from outside Karachi as shown in figure 2. The need for frequent travel to or stay in the city of primary treatment center is one contributor to the financial hardships of the families. To mitigate this situation, collaboration with other hospitals and establishment of oncology satellite clinics is what is required to assist patients and their families. Arrangements for review and monitoring of patient's progress via periodic and need based virtual meetings or telemedicine between principal treatment center and satellite center can also be arranged to facilitate timely patient management.

The recently introduced 'Cure All' technical package by our international partners including St Jude Global Alliance and World Health Organization aims to reduce the inequalities in childhood cancer outcomes in low- and middle-income countries. This commitment and seriousness of purpose is a source of encouragement for the future of childhood cancer care in Pakistan. The Ministry of Health, Pakistan Society of Pediatric Oncology, Oncology professionals and the non-profit organizations including Child Aid Association are all the national stakeholders of this cause with a common agenda i.e. to improve the lives of pediatric cancer patients in our country.



The Cure All technical package guides multi-stakeholder action to improve care and outcomes for all children and adolescents with cancer in LMICs by strengthening health systems with four pillars, namely (CURE: Centers and networks of excellence, Universal health coverage, Regimens for diagnosis and treatment of childhood cancer, and Evaluation and monitoring) and three enablers (ALL: Advocacy, Leveraged financing, and Linked governance).

I strongly believe that non-profit organizations, governments and international agencies are valuable partners in supporting the implementation of 'Cure All' framework. I also, truly consider this piece of advice by Vincent Thomas Lombardi very valuable where he once said that 'Individual commitment to a group effort - that is what makes a team work, an organization work, a society work, a civilization work.'

Figure 1 - Monthly record of Childhood Cancer patients' visits in Children Cancer Center



Figure 2 - Geographical Distribution of Registered Cases

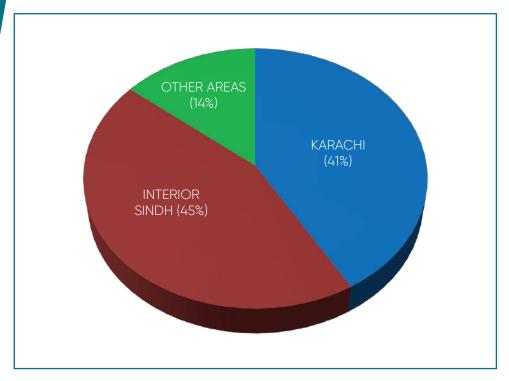
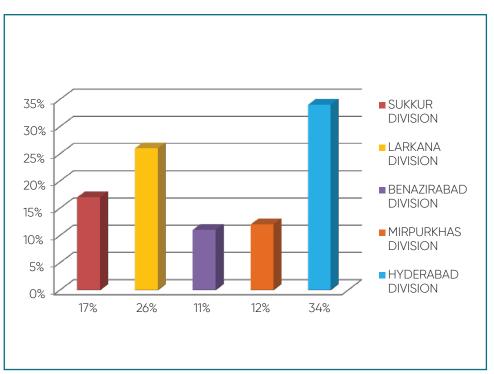
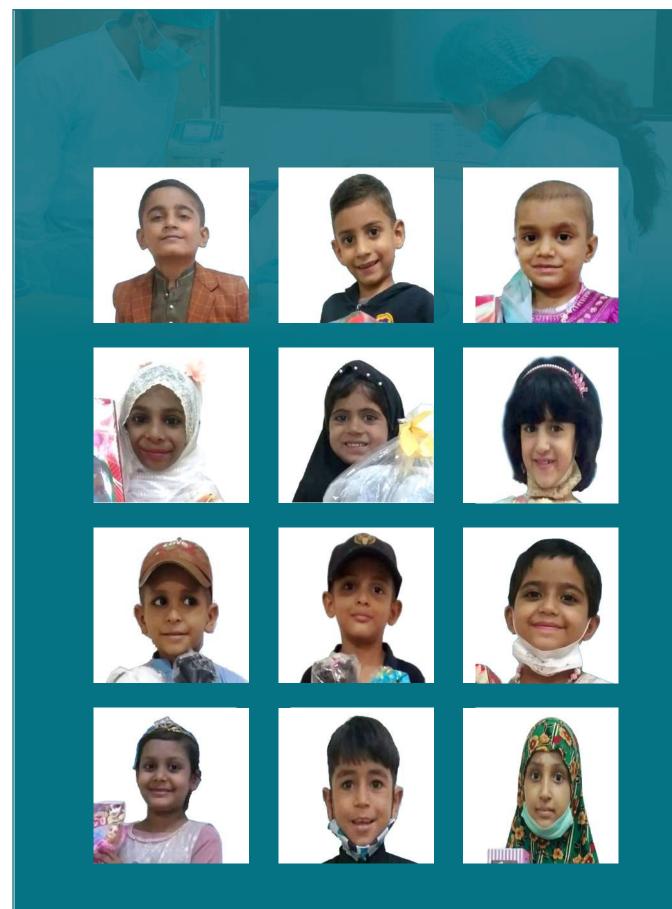


Figure 3 - Distribution of Patients from Interior Sindh



# Smiling Faces who became Cancer Free





# Anaesthesia For Childhood Cancer Patients



Dr. Rajkumar Ochani Consultant Anaesthetist

Anaesthesia techniques for children are much different from anaesthesia techniques for adults. Furthermore anaesthesia for children suffering from cancer is again quite different from those with other diseases, with consideration of very much disturbed anatomy, physiology, and pathology of affected children and also grading with severity of cancer stage in pediatric patients. It is common for children with cancer to require anaesthesia at different stages, from the beginning of their cancer diagnosis, during their treatment and follow up. The delivery of anaesthesia in children with cancer can be conducted in operating theatres and non-operating theatre settings.

Children with different types of cancer require anaesthetic input throughout their disease process. This will include anaesthesia for short procedures for central venous insertion, bone marrow aspiration, anaesthesia to facilitate radiotherapy, anaesthesia for radiological / imaging processes and anaesthesia for minor and major surgical procedures. Anaesthesia for short procedures will often take place in remote sites such as Radiology / Imaging suites and daycare oncology units.

Knowledge of the physiological effects of the malignant process and its treatment are vital for any anaesthetist involved in the care of such patients. A detailed anaesthetic assessment and appropriate ordering for investigations, paying particular attention to the anatomical and physiological effects of the cancer is vital for all pediatric oncology patients and with a vision of possible complications of anaesthesia in general and specific with different types of cancer in children.

The choice of anaesthesia for diagnosis, treatment and follow-up for patients of cancer in children varies with local anaesthesia, regional anaesthesia, general anaesthesia and pain management for different patients at different stages.

- Local anaesthesia stops pain in specific area while patients are still awake and alert.
- 2. **Regional anaesthesia** numbs a much large area like the abdomen or an entire limb.
- 3. **General anaesthesia** puts patients to sleep during their treatment to make sure they are not in pain and to disable movement. This is used for certain surgeries and other procedures of pediatric oncology patients that require these patients to be completely still for long period.

### Common pediatric malignancies are:

- 1. Leukemias e.g. Acute Lymphoblastic Leukemia
- 2. Lymphomas e.g. Non-Hodgkin's Lymphoma
- 3. Brain and CNS tumors e.g. Astrocytoma
- 4. Embryological tumors e.g. Wilms's tumor

In children Acute Lymphoblastic Leukemia (ALL) is the most common malignancy and accounts for approximately 50% of all children cancers ,with Down's syndrome children having a 10-20 fold increase risk of ALL.

Current treatment protocols for treatment of common pediatric malignancies have led to a reduction in the requirement for short painful procedures.



# Volunteer Community Services Program 2023-2024

# **AMI School**



Fatima Hussain



M. Sami Bhatti



Yousha Ghori



Ishrat Hussain



Zainab Ovais



Haroon Raza



Arsh Mobeen



Hasan Ahmed



Hasan Akhtar



Sara Tahir

# Habib Girl's School



Hawra Ali Asghar



Ruqaiya Mandvi



Khadija Irfan



Fatima-tu-Zahra

# The City School (PAF Chapter)



Usaid Naveed



Raiees Khan



Muhammad Abubakr

# Mama Parsi School



Malaima Junaid



Inaya Imam



Fatima Shariq



Benazir Asif



Amna Umair



Eshaal Nazim

# The City School (Gulshan A Level)



Rayyan Faisal



Fatima Hood



Anousha Khan



Sidrah Nafis



Anum Kashit



Nabeeha Zubair

# Visitors 2023-2024









Khalid Anum visited 9th September 2023

DATE	NAME & ADDRESS	COMMENTS
09-Seplemb 2023	erNAME: Khale) Ancum ADDRESS: Flat GFI Baldis 18-A Surview DHSext Karachi.	Wat a marvellors job you all are druy. May Allah give you more strength, Ameer.









Shermila Farooqi visited on 17th July 2023

DATE	NAME & ADDRESS	COMMENTS
19-July 2023	NAME: Shannila Faruga ADDRESS:	Overwhelmed but pleased to witness great secure + treatment don the children The Team at
		NICH delaves accolades.



The HR Manager Avari Towers Renaissance Hotel, Ms. Lynn D'Souza visited the Oncology Unit with her team in February '24.

## Events and Activities in 2023-2024





Commemorating the International Childhood Cancer Day on 15th Febuary 2024





Observing GOLD SEPTEMBER activites during Childood Cancer Awareness month



Celebrating Independence Day with Mirza Babur Baig, EVP & Divisional Head CSR, National.Bank of Pakistan on 14th August 2023.

## Donor's List (Cash) 2023-2024

S.#	Donor	S.#	Donor
1.	Aamir Jawaid	46.	Dr. Erum Iqbal
2.	Abbas Mooraj	47.	Dr. Farhat Agha
3.	Abdul Majid	48.	Dr. Khalid Ahmed Khalil
4.	Abdul Razak	49.	Dr. Mrs. Naz Siddiqui
<del>-</del> . 5.	Abdul Rehman Verani	50.	Dr. Naveed Ahmed
5. 6.	Abdul Wahab	50. 51.	Dr. Farhana
0. 7.	Abu Bakar	51. 52.	
7. 8.	AG IG Arif Hanif	52. 53.	Dr. Syed Aftab Ahmed Shah Fadieleh Adnan Sohail
o. 9.	Ahmad Pathan	55. 54.	
9. 10.		55.	Faiqa Faisal Mehmood
10. 11.	Aisha Aisas ur Dahman	55. 56.	
	Aizaz ur Rehman		Faiza Ahmed
12.	Akbar Ali Hashim	57.	Fardan Laiq-Saba
13.	Aleem Shahid	58.	Farheen Salman
14.	Amir Mir	59.	Farida Ali Asghar
15.	Ambreen Ghaus	60.	Farjad Ahmed
16.	Anwar	61.	Farzana Javed
17.	Aqueel E Merchant	62.	Farzana Zahid
18.	Arham	63.	Ghaus Bin Ikram
19.	Arif	64.	Ghazala Ahmed
20.	Arif Bilwani	65.	Gul Nar Begum
21.	Arif Imam Usmani	66.	Habib Ahmed
22.	Asha	67.	Habiba Tasneem
23.	Attiya Nawazish Ali	68.	Hafiz Mohammad Irfan
24.	Aurangzaib Alam	69.	Hafiz Muhammad Aamir
25.	Ayan Khan	70.	Haji Muhammad Nadeem
26.	Ayesha	71.	Haji Zameer Ahmed
27.	Ayub	72.	Hamid Hussain
28.	Bheem Sain	73.	Hasan Qureshi
29.	Dilawar Khan	74.	Imran Ali
30.	Dr. Razia Hasan	75.	Ismat Zuberi
31.	Dr. Roshia Parveen	76.	Jahan Ara/Mr Ainuddin
32.	Dr. Rukhsana Anjuman	77.	Jamal Nasim
33.	Dr. Rukhsana Patel	78.	Jameel Ahmad
34.	Dr. Saatiah Jaffry	79.	Jaweed Zakria
35.	Dr. Shaista Khan	80.	Junaid Tahir
36.	Dr. Shazia Soomro	81.	Khaleeq-Ur-Rehman
37.	Dr. Shireen Masood	82.	Khalid Aziz
38.	Dr. Siddiga Ibrahim	83.	Khawar Masud Butt
39.	Dr. Tahira Naqvi	84.	Khurram
40.	Dr. Waseem	85.	M. Amin Dosani
41.	Dr. Zeba Batool Attar	86.	M. Anwar
42.	Dr. Zubair Khoso	87.	M. Hammad Manzoor
43.	Dr. Anwar	88.	M. Hussain Mala
44.	Dr. Anwar Ali	89.	M. Shahab Siddique
45.	Dr. Bilquis Hashim	90.	M. Zahoor Islam
	-1		

S.# 91.	Donor Maha Ali	S.# 135.	Donor Saud Memon
92.	Maham Fahad	136.	Sayeeda Leghari
93.	Malik Muhammad Ashfaq	137.	Seemin Shafi
94.	Mansoor Ali Khan	138.	
95.	Mansoor Qureshi	139.	
96.	Mehreen Noman	140.	
97.	Moazzam-Ur-Rehman	141.	
97. 98.	Mohammad Siddiq	141.	
99.	Mohammad Sohail Ansari	143.	
100.	Mohsin Ahmed	144.	
100.	Muhammad Ali	144.	Shehnaz Rehman
101.	Muhammad Asad Fecto	146.	Sheikh Ejaz Ahmed
102.	Muhammad Aslam	140.	Sheikh Muhammad Saleem
103.	MuhammadHussain Adenwala	147.	Shireen Qasim Bham
104.	Muhammad Ismail	140.	
106.		150.	S.M Tariq Rafi Sohail Chohan
100.	Muhammad Sahab Siddique	150.	Sohail Osman Ali
107.	Muhammad Salman Burney Muhammad Shabbir Vohra	151. 152.	
			Syed Ehtisham Ul Hasan
109.	Muhammad Siddique Sheikh	153.	Syed Moshin Abbas
110.	Muhammad Sohail Ansari	154.	Syed Nayyar Yousuf / Huma Shaireen
111.	Muhammad Tanveer Yousuf	1ГГ	
112.	Muhammad Umar	155.	Syeda Anila Shahab
113.	Nadeem Akhtar Burney	156.	Syeda Rukhsana Bukari
114.	Nighat Hasnain	157.	Tahera Chagla
115.	Nisar Ahmed Soomro	158.	Tahira
116.	Omar Farooq Azim	159.	Talat Kanwal Aizaz
117.	Omar Moeed	160.	Tariq Shafi
118.	Qamar Husain Khan	161.	Tehmina
119.	Rafea Anis	162.	Umair Fahim-Ud-Din
120.	Ramzan Shafiq	163.	Usama Fahim-Ud-Din
121.	Rana Nighat	164.	Wahab Akthar
122.	Rasheeda Siddique	165.	Yahya Aftab
123.	Rashid T.Shaikh Ali	166.	Yaqoob
124.	Rehan Rehman	167.	Yasmin Machintosh
125.	Rehana Fasih	168.	Zaeem Aziz Qureshi
126.	Saba Quadir	169.	Zahida Zahir-Ud-Din
127.	Saba Shafi	170.	Zakir
128.	Sadaf Aamir	171.	Zara Ali
129.	Safdar Khan	172.	Zarina Khalid
130.	Sajid	173.	Zohair Ashir
131.	Salman Ahmed	174.	Zubaida Osman (Late)
132.	Salman Liaqat	175.	Zubin-Dinshaw Cooper
133.	Salman Rehman	176.	Zulfiqar Hasan
134.	Sara Sayeed Khan		

## Corporate

- 1. Abasscyit Benefit
- 2. Aftab corporation
- 3. Avari Towers Renaissance Hotel
- 4. Baber Tyre Corporation
- 5. Dalal Security
- 6. Eternal Group of Industries
- 7. Good Luck Corporation
- 8. Grandeur A Fashion Adventure
- 9. Jaffer & Co.
- 10. Kohinoor Chemical Company
- 11. Matrix (Pvt.) Ltd.
- 12. Mitsubishi Corporation

- 13. Muller & Phipps Pakistan (Pvt.) Ltd.
- 14. Murree Brewery Co. Ltd.
- 15. OLP Financial Services Pakistan Ltd.
- 16. PAK-ARAB Pipeline Company Ltd.
- 17. PAK-ARAB Refinery Ltd.
- 18. Paradise Network (Pvt.) Ltd.
- 19. Progressive Traders (Pvt.) Ltd.
- 21. Saad Sales Services
- 20. Sukkur Beverages
- 22. UDL Disribution (Pvt.) Ltd.
- 23. Zarsh

### NPO

- 1. AMN Trust
- 2. HBL Foundation
- 3. Infaq Foundation
- 4. Jubilee General Insurance
- 5. PSO CSR Trust Organisation
- 6. The Rabia Azim Trust
- 7. Cowasjee Foundation

### Banks

- 1. Bank Al Habib
- 2. Dubai Islamic Bank
- 3. Habib Metropolitan Bank Ltd.

## Donation In Kind

## s.# Individuals

5.#	Individuals	
1.	Anonymous	Chicken Burgers (Qty 70)
2.	Mrs. Asma Pathan	(250 ml Nestle milk pack) (Qty 1620)
3.	Dr. Javeria	Table set with 2 Chairs
4.	Dr. Shireen Masood / Mrs. Afshan Tanveer	Anda Partha (Qty 1152, Jelly (Qty 768) Yogurt (Qty 576), Eggs (Qty 6910), Butter (Qty 1152), Bananas (Qty 480 KG), Apples (Qty 288 kg), Active Milk (Qty 576), Lunch Box (Qty 576), Food Pack (Qty 576), Cup Cake Box (Qty 144)
5.	Master Ayaz	Microwave Oven
6.	Mr. Ghulam Haider/ Mr. Inayat Lala Ms. Parveen Lalani /Mr. Anwer Ms. Farhanaz/ Mr. Rayah Yaswati/ Ms. Sameen Lekha / Ms. Sammen	ni Six Wheel Chairs
7.	Mr. Vijay Kumar Banker	Biscuits Gluco (36 Ticky Pack ) Sooper (20 Ticky Packs), Milk pack (27 pcs) Egg (30) Blue Band (32 Ticky Packs)
8.	Ms. Zahra Rahim	Electric Heater (Qty 2)
	Institutions	
9.	Haris Traders	Ice Box with handle
10.	Lab Diagnostic	Deluxe Kettle
11.	Onco One	Ice -Pack Box (13 Litres)
12.	S. Ejazuddin & Company	ZPPCT 661628 Sys Cells Pack Dcl-20l (Dcl-300A) 9 Pcs
13.	Scientific Technical Cc Pvt Ltd	Dapi Chemical -Cyto Lab
	NPO	
14.	Child Aid Association (USA)	Parts of Flow Cytometry Machine from bo \$12547 X Rs.278.60 & bd flow Cytometry Reagents Chemical
	Corporate	
15.	Avari Towers Renaissance Hotel	Stuffed toys (60 pcs) & 50 bedsheets with pillow cases
16.	English Biscuit Manufacturers Pvt Ltd	Ticky Pack Biscuit cartons (Qty 12)

## Life Members of Child Aid Association

1					N. II. ID.
1.	Dr.	Abdul Aziz		Dr.	Nand Lal Daryani
2.	Dr.	Abdul Majid	49.	Ms.	Hina Qureshi
3.	Dr.	Afroze Ramzan	50.	Dr.	Zeba Batool Attar
4.	Dr.	Aftab Ahmed Shah	51.	Ms.	Marina Khan
5.	Dr.	Arifa Akram	52.	Dr.	Zaeema Alvi Ahmed
6.	Dr.	Farhat Mirza	53.	Ms.	Fawzia Siddiqui
7.	Dr.	Khadija Mala	54.	Dr.	Syed Jamal Raza
8.	Mr.	M. Zahid Ali Khan	55.	Dr.	S. Hasan Zaidi
9.	Ms.	Nusrat Azim	56.	Mr.	E. A. Nomani
10.	Dr.	Najma Sayeed	57.	Mr.	Syed Ajaz Ali
11.	Mr.	Syed Muhammad Naeem Uddin	58.	Dr.	M. Azhar Shaikh
12.	Dr.	Razia Hasan	59.	Dr.	Khemchand N. Moorani
13.	Dr.		60.	Ms.	Parveen Shaikh
13. 14.		Rajkumar Ochani	61.		
		Farhat Huma Babar		Ms.	Sara Sayeed Khan
15.	Dr.	Siddiqua Ibrahim	62.	Dr.	Banoo Noshir Mama
16.	Mr.	Tariq Shafi	63.		Najma Hasan
17.	Dr.	Zeenat Isani	64.		Shamima Khatoon
18.	Dr.	Jamshed Akhter	65.	Mr.	Shakil Ahmed Chandna
19.	Ms.	Seema Haleem	66.	Mr.	Nadeem Ahmed Chandna
20.	Ms.	Kulsum Rawjee	67.	Mr.	Nayyar Alam Siddiqui
21.	Mr.	Laeeq S. Tariq	68.	Mr.	A. Razzak Adam
22.	Ms.	Shaista Ali	69.	Mr.	lqbal Ahmed
23.	Ms.	Sayeeda Leghari	70.	Mr.	Tauqir Haider
24.	Prof.	Zakiuddin G. Oonwala	71.	Dr.	Humaira Majid
25.	Ms.	Zoha Imam	72.	Dr.	Shariq Hasan
26.	Ms.	Alaifya Matcheswalla	73.	Dr.	Yasmeen Salman
27.	Dr.	Safia Zafar	74.	Mr.	Nadeem Hashmi
28.	Ms.	Aiysha Munaf	75.	Mr.	Syed Farhat Jamal
29.	Dr.	Soofia Ahmed	76	Mr.	Abdul Saleem
30.	Mr.	Siddig Ahmed Mehar Elahi	77.	Dr.	Bilquees Lakhani
31.	Mr.	Akber Mehmood	78.	Mr.	Saleem Merchant
32.	Mr.	Basit Alavi	70. 79.	Dr.	Mumtaz Hashmi
33.		Asad Shamshad Hasan	7 <del>9</del> . 80.		
	Dr.			Mr.	Shamim A. Alavi
34.	Ms.	Marium Shakil	81.	Mr.	Hussein Akhter Ansari
35.	Dr.	Furqan Hasan	82.	Dr.	Muzaffer Ali Uqaili
36.	Dr.	Yasmeen Kazi	83.	Mr.	M. Aamer Jamali
37.	Dr.	Ifra Sameen	84.	Dr.	Salim Ahmed
	Mr.	Sarwar Ali		Mr.	Akhtar M. Bilgrami
39.	Dr.	Ghulam Ali	86.	Prof.	Kazi Abdul Shakoor
40.	Mr.	Muhammad Abdullah Feroze	87.	Dr.	Sahibzada Fareeduddin
41.	Dr.	Khalid Zafar Hashmi	88.	Mrs.	Fawzia Hasan Pathan
42.	Mr.	Khalid Rafique	89.	Mr.	Arshad Qaiser Warsi
43.	Mr.	Ashraf Bawani	90.	Mr.	Waseem Ahmed
44.	Dr.	Hina Mumtaz Hashim	91.	Ms.	Surriya Barkat
45.	Mr.	Sonoo Sunjnani	92.	Mr.	Mohammad Fareeduddin
46.	Dr.	Lubna Samad	93.		Gulnaz Burney
47.	Mr.	Muhammad Aslam	94.	Dr.	M. Anwar Arain

95. Dr.	Nasir Saleem Saddal	104. Mr.	Hafiz Muhammad Aamir
96. Ms.	Bilquis Jehan	105. Mr.	Khaleeq Ur Rahman
97. Dr.	Aqil Somroo	106. Mr.	Faiyaz Ahmed
98. Mr.	Ghazi Sultan	107. Mr.	Farooq Uz Zaman Khan
99. Mr.	Syed Zaheerullah Rizvi	108. Dr.	Mohsina Ibrahim
100. Mrs.	Rehana Ahmed	109. Dr.	Shireen Masood
101. Dr.	Yasmeen Sheikh	110. Mrs.	Afshan Tanveer
102. Dr.	Ainuddin Qureshi	111. Dr.	Saatiyah Jaffery
103. Mr.	Tariq Naz Siddiqui	112. Mr.	Saad Burney
		113. Dr.	Yahya Chawla

### Patrons of Child Aid Association

- Mr. Hasnain Dharamsey 1.
- 2. Mr. Khawar Butt
- 3. Mr. Asghar Mohammad
- 4. Mr. Muhammad Aman
- 5. Mr. Kalim Farooqui
- 6. Ms. Munira Taufiq Jangda
- 7. Ms. Zahida Zahir

- 8. Mrs. Perin A. Mooraj
- 9. Mr. Pervez Iqbal
- 10. Mr. Syed Masood Hasa 11. Mr. Razi Ahmed Hanafi 12. Dr. Naima Patel 10. Mr. Syed Masood Hasan

  - 12. Dr. Najma Patel
  - 13. Mr. Mohd. Ashraf Bandhani
  - 14. Dr. Najma Sayed

## Associate Members of Child Aid Association

- 1. Ms. Saadia Naveed
- 3. Mrs. Sughra Kazmi
- 4. Mr. Ahmad Pathan
- 2. Ms. Seema Tahir Khan 5. Mr. Ateeg ur Rehman

## Honorary Consultants of Child Aid Association

- 1. Dr. Khalid Zafar Hashmi
- 2. Prof. Kazi Abdul Shakoor
- 3. Dr. Rizwan Naeem

- 4. Dr. Muhammad Nadeem
- 5. Mr. Arshad Qaiser Warsi

## MUNIFF ZIAUDDIN & CO. Chartered Accountants

## Independent Auditor's Report To The Members Of The Association

Independent Member Firm

BKR

Business Executive Centre F/17/3, Block 8, Clifton Karachi - 75600 - Pakistan Ph: +92(21)35375127-29 E-mail: info@mzco.com.pk Web: mzco.com.pk

#### **OPINION**

We have audited the financial statements of Child Aid Association (the Association), which comprise the balance sheet as at 30th June, 2024, and the statement of income and expenditure account, and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of Child Aid Association as at 30th June, 2024 and of its financial performance for the year then ended in accordance with the approved accounting and reporting standards as applicable in Pakistan.

#### BASIS FOR OPINION

We conducted our audit in accordance with the International Standards on Auditing (ISAs) as applicable in Pakistan. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Association in accordance with the International Ethics Standards Board for Accountants' Code of Ethics for Professional Accountants as adopted by the Institute of Chartered Accountants of Pakistan (the Code), and we have fulfilled our other ethical responsibilities in accordance with the Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

## RESPONSIBILITIES OF MANAGEMENT AND THOSE CHARGED WITH GOVERNANCE FOR THE FINANCIAL STATEMENTS

The Executive Committee is responsible for the preparation and fair presentation of the financial statements in accordance with the approved accounting and reporting standards as applicable in Pakistan and for such internal control as the Executive Committee determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, Executive Committee is responsible for assessing the Association's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Association or to cease operations, or has no realistic alternative but to do so. Those charged with governance are responsible for overseeing the Association financial reporting process.

#### AUDITOR'S RESPONSIBILITIES FOR THE AUDIT OF THE FINANCIAL STATEMENTS

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs as applicable in Pakistan will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with ISAs as applicable in Pakistan, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Association's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Association to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Association to cease to continue as a going concern.

• Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

The engagement partner on the audit resulting in this independent auditor's report is Sohail Saleem.

Chartered Accountants

Karachi.

Date: 01st October, 2024

UDIN: AR202410130RXFT4B1jY

### CHILD AID ASSOCIATION BALANCE SHEET AS AT JUNE 30, 2024

ASSETS	Note	2024 Rupees	2023 Rupees
Non-current assets			
Tangible fixed assets	3	34,419,304	25,370,947
Intangible assets	4	783,907	519,868
Total non-current assets		35,203,211	25,890,815
Current assets Stocks Advances, deposits, prepayments and other receivable Short term investment Cash and bank balances Total current assets	5 6 7 8	4,099,212 10,584,229 246,405,501 6,896,456 <b>267,985,398</b>	3,805,786 4,804,758 203,535,449 12,351,327 224,497,320
Total assets		303,188,609	250,388,134
EQUITY AND LIABILITIES  General Fund-Unrestricted	9	103,798,239	77,699,872
deneral runa om estrictea	,	103,7 70,237	77,077,072
<b>Endowment fund-Restricted</b>	10	7,007,599	6,082,963
Infrastructure for patient fund-Restricted	11	190,126,402	165,039,687
Current Liabilities			
Creditors, accrued and other liabilities	12	2,256,369	1,565,612
CONTINGENCIES AND COMMITMENTS		200,400,600	250 200 40 1
		303,188,609	250,388,134

The annexed notes form an integral part of these financial statements

<u>86.</u> Hz

President

**General Secretary** 

Trancurar

# CHILD AID ASSOCIATION STATEMENT OF INCOME AND EXPENDITURE AS AT JUNE 30, 2024

INCOME	Note	2024 Rupees	2023 Rupees
Donations and Zakat	14	183,405,884	141,764,406
Other income	15	12,891,832	10,626,631
		196,297,716	152,391,037
EXPENDITURE			
Operating expenses	16	156,762,901	120,048,345
Administrative expenses	17	13,436,448	11,180,413
		170,199,350	131,228,758
Net surplus / (deficit) transferred to	general fund account	26,098,367	21,162,279

The annexed notes form an integral part of these financial statements

My

President

General Secretary

Treasurer

#### CHILD AID ASSOCIATION STATEMENT OF CASH FLOW AS AT JUNE 30, 2024

Note	2024 Rupees	<b>2023</b> Rupees
CASH FLOW FROM OPERATING ACTIVITIES		
Net (deficit) / surplus for the year	26,098,367	21,162,279
Adjustments for non-cash items:		
Depreciation	3,731,766	4,328,854
Amortization	335,960	222,801
Interest on investments and savings bank account	(12,420,750)	(7,471,597)
Bad Debts written-Off	-	854,666
Gain on foreign currency	-	(1,272,187)
Gain on Disposable of Fixed Assets	-	(525,000)
Assets received as donation	(5,202,102)	(1,340,221)
MY-uling assital sharper	12,543,241	15,959,594
Working capital changes:		
-(Increase) / Decrease in current assets: - Stocks	(293,426)	3,161,538
- Advances, deposits, prepayments and other receivables- net	(5,779,471)	7,947,914
- Advances, deposits, prepayments and other receivables- net	(6,072,898)	11,109,452
- Increase / (Decrease) in current liabilities:	(0,072,070)	11,107,132
- Creditors, accrued and other liabilities	690,757	(754,233)
or currently accessed and current numbers	(5,382,141)	10,355,219
Net cash generated from operating activities	7,161,100	26,314,813
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchase of fixed assets	(8,178,020)	(5,260,703)
Cash received from fixed asset disposal	-	525,000
Interest received on investments and savings bank account	12,420,750	7,889,119
Investment	(186,820,052)	(157,685,449)
Encashment of investments	143,950,000	92,150,000
Net cash utilized in investing activities	(38,627,322)	(62,382,033)
CASH FLOWS FROM FINANCING ACTIVITIES		
Net-interest on investments of endowment fund	924,636	549,601
Amount kept/utilized from Infrastructure for patient fund	25,086,715	40,055,662
Net cash generated from financing activities	26,011,351	40,605,263
Source and a summitted and a summitted		10,000,200
Net (decrease) / increase in cash and cash equivalents		
during the year	(5,454,871)	4,538,042
Cash and cash equivalents at beginning of the year	12,351,327	7,813,285
Cash and cash equivalents at end of the year	6,896,456	12,351,327

The annexed notes form an integral part of these financial statements

esident General Secretary

Treasurer

## CHILD AID ASSOCIATION NOTES TO THE FINANCIAL STATEMENTS AS AT JUNE 30, 2024

#### 1 LEGAL STATUS AND OPERATIONS

- 1.1 Child Aid Association (the Association) is an agency registered under the Voluntary Social Welfare Agencies (Registration and Control) Ordinance, 1961. The registered office of the Association is situated at National Institute of Child Health, Rafiquee Shaheed Road. Karachi.
- 1.2 The objective of the Association, as per its constitution, is to provide healthcare related services and carryout various activities for the welfare of the children. The Association also runs an Oncology Unit and Total Parentral Nutrition (TPN) facility, built within the premises of National Institute of Child Health (N.I.C.H.) and supporting facilities of Cytogenetic and Molecular laboratory from donations/funds generated specially for the purpose of Paediatric Oncology.
- 1.3 The Association has been granted approval by the Federal Board of Revenue under Section 61 of the Income Tax Ordinance, 2001, whereby, the donor shall be entitled to an allowance for donations made to the Association.

#### 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The principal accounting policies applied in the preparation of these financial statements are set out below. These policies have been consistently applied to all the years presented, unless otherwise stated.

#### 2.1 BASIS OF PREPARATION

- 2.1.1 These financial statements have been prepared under the historical cost convention. These financial statements have been prepared in accordance with the approved accounting standards, as applicable in Pakistan. Approved accounting standards comprise of Revised Accounting and Financial Reporting Standards for Small Sized Entities (AFRSs for SSEs) issued by the Institute of Chartered Accountants of Pakistan (ICAP).
- 2.1.2 These financial statements have also been prepared in accordance with "Guideline for accounting and reporting for Non-Government (NGOs) and Non-Profit Organisations (NPOs)" issued by ICAP and in case requirements differ, AFRSs for SSEs shall prevail.
- 2.1.3 The preparation of financial statements in conformity with the above requirements requires the use of certain critical accounting estimates. It also requires management to exercise its judgment in the process of applying the Association's accounting policies. The Association makes estimates and assumptions concerning the future, based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances. The resulting accounting estimates will, by definition, seldom equal the related actual results. The matters involving higher degree of judgements or complexity or areas where estimates, assumptions and judgements are significant to the financial statements are set out below:
  - Residual values and useful lives of tangible fixed assets (note 2.2)
  - Residual values and useful lives of intangible fixed assets (note 2.3)
  - Provision for impairment of non-financial assets (note 2.4)

#### 2.2 Tangible fixed assets, capital work in progress and depreciation

Tangible fixed assets are stated at cost less accumulated depreciation and accumulated impairment losses, if any.

Capital work in progress is stated at historical cost less impairment losses, if any.

Depreciation is charged to income using the straight line method whereby the cost of an asset is written-off over its estimated useful life at the rates given in note 3. Depreciation on additions during the first half of the year is charged for the full year, and on those in the second half of the year at 50% of the normal annual rate. Depreciation for half year is charged on disposals made during the year.

 $The \ residual \ values \ useful \ lives \ and \ depreciation \ method \ are \ reviewed \ and \ adjusted, if appropriate, \ at each \ balance \ sheet \ date.$ 

Subsequent costs are included in the assets' carrying amount or recognized as a separate asset, as appropriate, only when it is probable that future economic benefits associated with the item will flow to the Association and the cost of the item can be measured reliably. The carrying amount of the replaced part is derecognized.

Maintenance and normal repairs are charged to the statement of income and expenditure. The gain or loss on disposal or retirement of an asset represented by the difference between the sale proceeds and the carrying amount of the asset is recognized as an income or expense.

#### 2.3 Intangible fixed assets

Intangible fixed assets are initially capitalised at cost , which includes the Purchase price and other directly attributable cost of preparing the asset for its intended use

Intangible fixed assets are subsequently carried at cost less accumulated amortization and impairment losses. These costs are amortised to income and expenditure using the straight line method over their estimated useful lives of three to five years.

#### 2.4 Impairment of non-financial assets

The carrying amounts of the Association's assets are reviewed at each balance sheet date to determine whether there is any indication of impairment loss. If any such indication exists, the asset's recoverable amount is estimated to determine the extent of impairment loss, if any. An impairment loss is recognized for the amount by which the assets carrying amount exceeds its recoverable amount. The recoverable amount is the higher of an assets fair value less cost to sell and value in use. Impairment losses are recognized in the statement of income and expenditure.

#### 2.5 Financial instruments

#### 2.5.1 Financial assets

The Association classifies its financial assets at initial recognition in the following categories depending upon the nature and purpose for which the financial assets were acquired.

#### (a) At fair value through profit or loss

Financial assets at fair value through profit or loss are financial assets held for trading and financial assets designated upon initial recognition as at fair value through profit or loss. A financial asset is classified as "fair value through profit or loss" if acquired principally for the purpose of selling in the short term. Assets in this category are classified as current assets.

Investments are initially recognized at fair value and transaction costs are expensed out in the statement of income and expenditure. Subsequent to initial recognition these investments are carried at fair value. Gains or losses arising from changes in the fair value of these investments are included in the statement of income and expenditure.

#### (b) Held-to-maturity

Financial assets with fixed or determinable payments and fixed maturity, where management has the positive intention and ability to hold till maturity are classified as held-to-maturity.

#### (c) Loans and receivables

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market. They are included in current assets, except for maturities greater than twelve months after the balance sheet date, which are classified as non-current assets.

#### (d) Available-for-sale

Available-for-sale financial assets are non-derivatives that are either designated in this category or not classified in any of the other categories. They are included in non-current assets unless management intends to dispose of the investments within twelve months from the balance sheet date.



All financial assets are recognized at the time when the Association becomes a party to the contractual provisions of the instrument. Regular way purchases and sales of investments are recognized and derecognized on trade date (the date on which the Association commits to purchase or sell the asset). Financial assets are initially recognized at fair value plus transaction costs except for financial assets at fair value through profit or loss. Financial assets carried at fair value through profit or loss are initially recognized at fair value and transaction costs are expensed in the statement of income and expenditure. Financial assets are derecognized when the rights to receive cash flows from the assets have expired or have been transferred and the Association has transferred substantially all the risks and rewards of ownership. Available-for-sale financial assets and financial assets at fair value through profit or loss are subsequently carried at fair value. Loans and receivables and held-to-maturity investments are carried at amortized cost using the effective interest rate method

#### 2.5.2 Financial liabilities

All financial liabilities are recognized at the time when the Association becomes a party to the contractual provisions of the instrument.

A financial liability is derecognized when the obligation under the liability is discharged or cancelled or expired. Where an existing financial liability is replaced by another from the same lender on substantially different terms, or the terms of an existing liability are substantially modified, such an exchange or modification is treated as a derecognition of the original liability and the recognition of a new liability, and the difference in respective carrying amounts is recognized in the statement of income and expenditure.

#### 2.6 Stocks

Stocks are valued at lower of cost and net realisable value. Cost is determined using the first-in-first-out method.

#### 2.7 Cash and cash equivalents

Cash and cash equivalents includes cash in hand and cash with banks on current, collection, deposit and savings accounts.

#### 2.8 Foreign currency translation

These financial statements are presented in Pakistan Rupees, which is the Association's functional currency. Transactions in foreign currencies are translated into Pakistan Rupees at the rates of exchange prevailing on the date of the transactions. Monetary assets in foreign currencies are translated into Pakistan Rupees at exchange rate prevailing at the balance sheet date. The resulting exchange gains or losses are included in the statement of income and expenditure.

#### 2.9 Provisions

Provisions are recognized when the Association has a present legal or constructive obligation as a result of a past event and it is probable that an outflow of resources will be required to settle the obligation and a reliable estimate can be made of the amount of the obligation. Provisions are reviewed at each balance sheet date and adjusted to reflect current best estimate.

#### 2.10 Donations / Grants

Donations / grants are accounted for on receipt basis. Donations received for operations are classified as income in the statement of income and expenditure.

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	ciation	e per	unu	%	15	13	30	15
	Depre	, rate	anı		_	-	67	_
	Book value	, As at June 30, rate per	2024	Rupees	15,729,063	864,652	663,017	17,162,572
	z	As at July 1, Charge for Disposal / As at June 30, As	2024	Rupees	3,871,968	531,298	2,512,840	75,052,658
	D DEPRECIATIO	Disposal /	adjustments	Rupees	1			
	ACCUMULATE	Charge for	the year	Rupees	266,338	152,586	284,150	3,028,692
		As at July 1,	2023	Rupees	3,605,630	378,713	2,228,690	72,023,966
		Ć,	2024	Rupees	19,601,031	1,395,950	3,175,857	92,215,229
	Т.	(Deletions)		Rupees	1			
	COST	Additions		Rupees	12,125,480		395,400	259,242
		As at July 1,	2023	Rupees	7,475,551	1,395,950	2,780,457	91,955,987
3 TANGIBLE FIXED ASSETS		2024		Assets own use	Building	Ambulance	Computers	Equipment & Furniture and Fixtures
(1)								

34,419,304

81,968,764

3,731,766

78,236,998

116,388,067

12,780,122

103,607,945

Total

TANGIBLE FIXED ASSETS										
		COST	Т		7	ACCUMULATED	ACCUMULATED DEPRECIATION		Book value	Depreciation
2023	As at July 1,	Additions	(Deletions)	(Deletions) As at June 30,	As at July 1, Charge for	Charge for	Disposal / As at June 30,	As at June 30,	As at June 30,	rate per
	2022			2023	2022	the year	adjustments	2023	2023	annum
	Rupees	Rupees	Rupees	Rupees	Rupees	Rupees	Rupees	Rupees	Rupees	%
Assets own use										
Building	4,334,644	3,140,907		7,475,551	3,310,760	294,870		3,605,630	3,869,921	15
Ambulance	2,237,539	67,950	(606)236)	1,395,950	1,108,739	179,513	(606)236)	378,713	1,017,238	15
Computers	2,935,545	251,450	(406,538)	2,780,457	2,399,367	235,861	(406,538)	2,228,690	551,767	30
Equipment & Furniture and Fixtures	89,797,752	2,790,617	(632,382)	91,955,987	69,037,738	3,618,610	(632,382)	72,023,966	19,932,021	15
Total	99,305,480	6,250,924	(1,948,459)	103,607,945	75,856,603	4,328,854	(1,948,459)	78,236,998	25,370,947	

 ${f 3}$  the depreciation charge for the year has been allocated as follows:

Operating expense Administrative expense

 Rupees
 Rupees

 3,657,130
 4,242,277

 74,635
 86,577

 3,731,766
 4,328,854

42

2023

2024

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	mortization	rate per annum	%	30	
	Book value A	As at June 30, rate per 2024 annum	Rupees	783,907	783,907
	TIZATION	As at July 1, Charge for As at June 30, 2023 the year 2024	Rupees	1,460,557	1,460,557
	LATED AMOR'	Charge for the year	Rupees	335,960	335,960
	ACCUMU	As at July 1, 2023	Rupees	1,124,596	2,244,464 1,124,596
		As at June 30, 2024	Rupees	2,244,464	2,244,464
	COST	Addition	Rupees	000'009	600,000
		As at July 1, 2023	Rupees	1,644,464	1,644,464
2024				Computer Software	Total

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		COST		ACCUMU	ACCUMULATED AMORTIZATION	TIZATION	<b>Book value</b>	Book value Amortization
	As at July 1,	Addition	As at June 30,	As at July 1,	)	As at June 30, As at June 30,	As at June 30,	rate per
	2022		2023	2022	the year	2023	2023	annum
	Rupees	Rupees	Rupees	Rupees	Rupees	Rupees	Rupees	%
Computer Software	1,294,464	350,000	1,644,464	901,796	222,801	1,124,596	519,868	30
Total	1,294,464	350,000	1,644,464	901,796	222,801	1,124,596	519,868	
						2024 Rupees	2023 Rupees	
Operating	Operating expense					268,768	218,345	
Administ	Administrative expense					67,192	4,456	
						335,960	222,801	N.

5	N	ote	2024 Rupees	2023 Rupees
	Medicines - Cancer - Others - Lab Chemicals		3,012,799 454,392 632,022 <b>4,099,212</b>	2,804,854 433,942 566,990 3,805,786
6	ADVANCE, DEPOSIT, PREPAYMENT AND OTHER RECE	IVABLE		
	Advances to supplier Security deposits Prepaid insurance Accrued interest Taxes receivables Other receivables		230,498 80,000 77,203 - 9,660,303 536,225 10,584,229	221,183 30,000 32,044 - 4,016,563 504,968 4,804,758
7	SHORT TERM INVESTMENT -At Fair Value through profit and loss			
	Mutual Fund	7.1	246,405,501	203,535,449

**7.2** Daily Profit on Mutual fund carry at the rate ranging 19.52% per day (F.Y 2023 on Term Deposit 19.42% to 18.69% per annum)

#### **8** CASH AND BANK BALANCES

Saving accounts		
-Foreign currency	4,122,082	4,267,377
-Local currency	2,298,105	4,887,730
	6,420,187	9,155,107
Current accounts		
-Foreign currency	37,635	39,483
-Local currency	388,633	3,150,097
	426,268	3,189,580
Cash in hand	50,000	6,640
	6,896,456	12,351,327



#### 2024 2023 **GENERAL FUND-Unrestricted** Rupees Rupees Balance at beginning of year 77,699,872 56,537,593 Add 26,098,367 -Net surplus/(deficit) for the year 21,162,279 103,798,239 77,699,872 **ENDOWMENT FUND-Restricted** Balance at beginning of year 6,082,963 5,533,362 Add: Receipt during the year Income on investment of funds 924,636 549,601 7,007,599 6,082,963

10.1 The Endowment fund received from various donors is to be utilized for capital expenditure. The amount has been invested in Mutual Fund till the time it is utilized.

#### 11 INFRASTRUCTURE FOR PATIENT FUND-Restricted

Balance at beginning of year	165,039,687	124,984,026
Add:		
Receipt during the year	-	27,450,000
Income on investment of funds	25,086,715	12,605,662
	190,126,402	165,039,687

**11.1** The Infrastructure for patient fund received from various donors is to be utilized for capital expenditure. The amount has been invested in Mutual Fund till the time it is utilized.

#### 12 CREDITORS, ACCRUED AND OTHER LIABILITIES

Creditors	712,498	878,148
Accrued liabilities	1,072,579	452,150
others	471,292	235,314
	2,256,369	1,565,612

#### 13 CONTINGENCIES AND COMMITMENTS

There were no contingencies and commitments at the balance sheet date (2023 Nill)

#### 14 DONATIONS AND ZAKAT

15

- Donations	133,708,294	119,287,380
- Zakat	44,495,488	21,136,805
- in kind	5,202,102	1,340,221
	183,405,884	141,764,406
OTHER INCOME		
Profit on investment & Saving	12,420,750	7,889,119
Souvenior	334,550	352,125
Exchange gain- net	-	1,272,187
Gain on disposal	-	525,000
Scrap sales	136,500	110,000
Other	32	478.200



10,626,631

12,891,832

			2024	2023
16	Operating expenses		Rupees	Rupees
	Medicines issued	16.1	63,788,212	44,739,699
	Salaries & allowances		42,748,787	35,419,289
	Laboratory expense	16.2	31,982,947	24,792,905
	Utilities		559,754	523,944
	Printing stationery		996,605	894,250
	Travelling conveyance & entertainment		301,770	197,729
	Depreciation Amortization		3,657,130 268,768	4,242,277
	Advertisement & publicity		2,819,263	3,153,302
	Repairs & maintenance		2,017,203	3,133,302
	Ambulance		17,280	42,334
	Wards & equipments		8,009,483	3,878,518
	Uniform & laundry		.,,	-,,-
	Insurance		402,702	63,977
	Security charges		737,352	646,369
	Computer expenses		100,800	123,480
	Bad Debts written off		-	854,666
	Miscelleneous		372,049	475,607
			156,762,901	120,048,345
16.1	MEDICINES ISSUED			
	Opening Stock		2,804,854	6,290,151
	Add: -Purchases		63,996,156	41,254,402
	Closing Stock		(3,012,799)	(2,804,854)
			63,788,212	44,739,699
16.2	LABORATORY EXPENSE			
	Opening Stock		1,000,932	677,173
	Add:			
	-Purchases		28,873,293	20,687,618
	Closing Stock		(1,086,414)	(1,000,932)
	0.111.1		28,787,811	20,363,859
	-Outside tests		3,195,136	4,429,046
			31,982,947	24,792,905
17	Administrative expenses			
	Salaries & allowances		10,549,676	8,561,077
	Utilities		239,894	224,547
	Printing & stationery		427,116	383,250
	Travelling conveyance & entertainment		129,330	84,741
	Repairs & maintenance - Office		1,106,258	980,213
	Insurance		100,676	15,994
	Computer expenses		43,200	52,920
	Auditors Remuneration		189,000	175,000
	Bank charges Depreciation		31,533 74,635	4,160 86,577
	Exchange Loss		173,534	-
	Amortization		67,192	222,801
	Miscellaneous		304,403	389,133
			13,436,448	11,180,413



#### 17.1 SALARIES AND ALLOWANCES

No remuneration is paid / payable to the President of the Association for the year ended June 30, 2023

#### 18 TAXATION

The Association is a non-profit organization under section 2(36) of the Income Tax Ordinance, 2001 (the Ordinance), accordingly, its income is not liable to tax in view of tax credit available under section 100(C) of the Ordinance.

#### 19 NUMBER OF EMPLOYEES

Number of employees as at year end

Number of employees during the year

86	85
83	79

#### 21 DATE OF AUTHORIZATION FOR ISSUE

These financial statements were authorized for issue on \_\_\_\_\_\_\_ by Executive Committee of the Association.

#### 22 GENERAL

Figures have been rounded off to the nearest rupee.

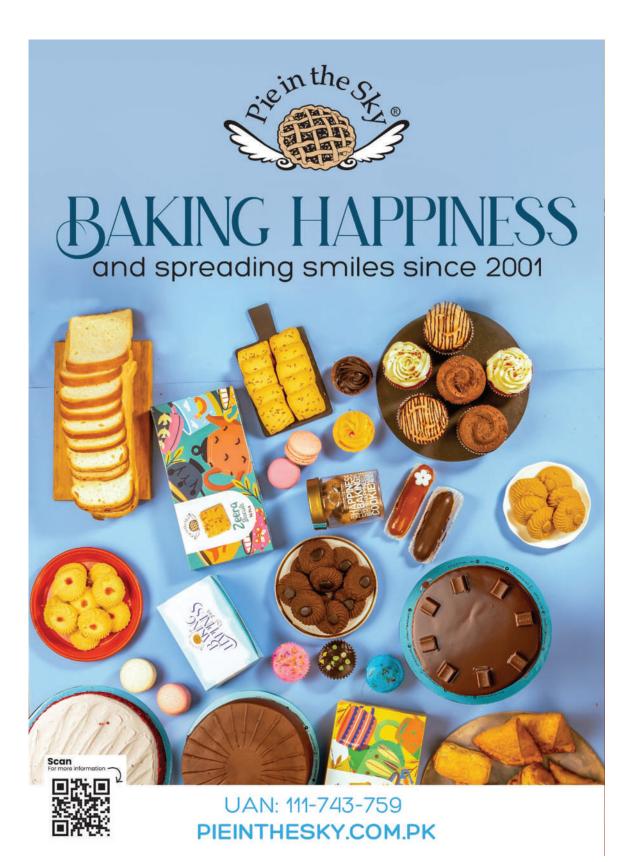
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President

~ A

General Secretary

Treasurer





# With Compliments

Mrs. Sayeeda Leghari Chairperson / Managing Director Sukkur Beverages (pvt) Limited

> Factory Address: A-1,SITE Sukkur Tel: 0715631431-4&0715631307-10

Head Office: Office No.802, 8<sup>th</sup>Floor, Emerald Tower.Block-5,Clifton, Karachi Tel: 02135872667-8



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