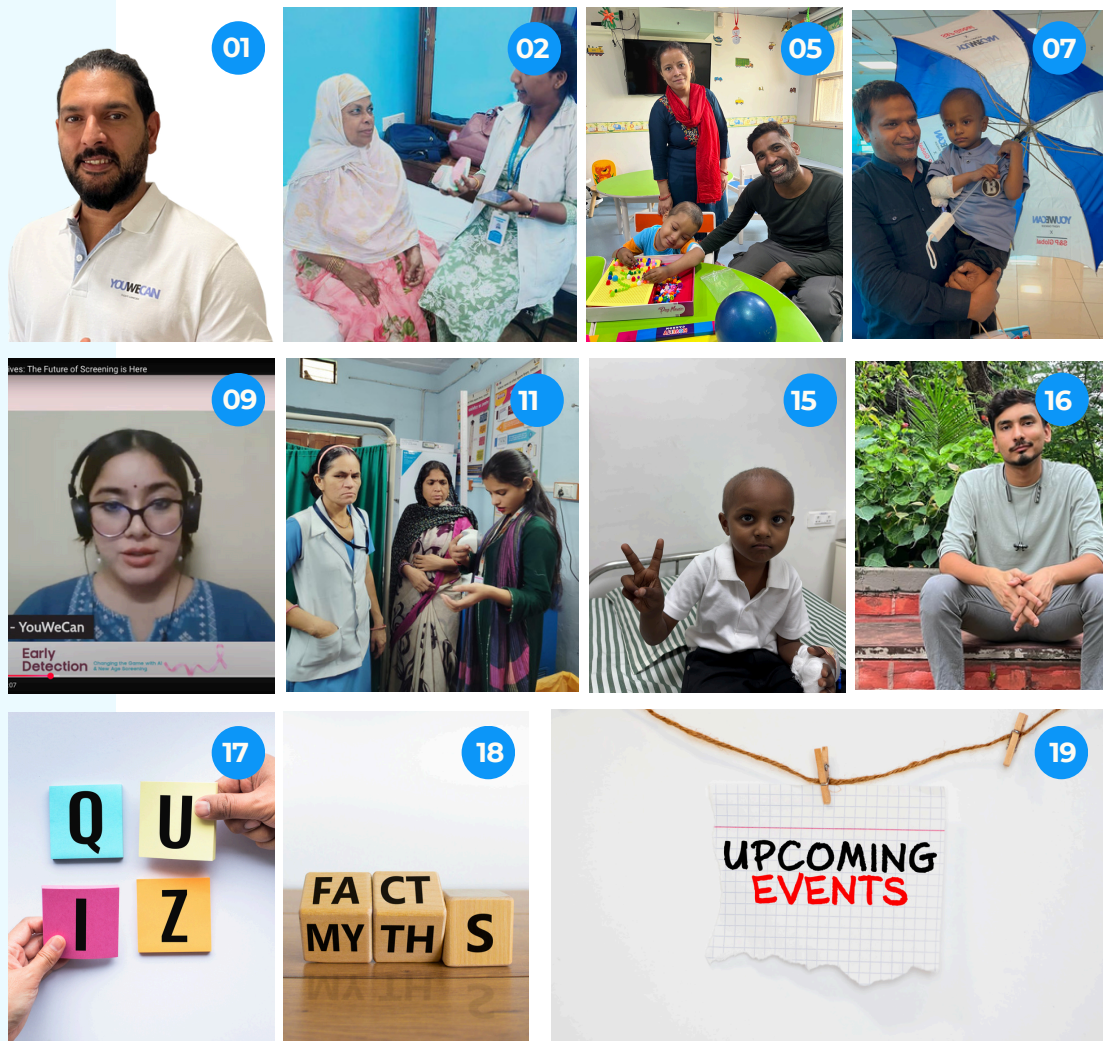




**Healthy women build
stronger futures!**

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Words of Encouragement

Dear Warriors,

At YouWeCan, we've always believed that early action can change lives. But over the past months, witnessing the courage of thousands of women and children across India, I've been reminded that early action does more than just save lives—it transforms them. Through initiatives like Swasth Mahila Swasth Bharat and Swasth Mahila Swasth Goa, we are not just running screening programs.

We are breaking silence, building awareness, and creating systems of care where none existed. When a woman steps forward for a screening in a remote village, that moment is nothing short of heroic. And when a child undergoing cancer treatment finds joy, even if only for a few hours, it is a reminder that healing begins with hope.

I've always believed in fighting back, even when the odds are stacked against you. These programs, and the people who make them possible, embody that same spirit. They show us that strength is not about what you endure, but how you rise.

This is just the beginning. With every screening, every partnership, and every smile, we're building something bigger than treatment. We're building a future where early detection, dignity, and care are within reach for every Indian.

Let's keep going. Let's never stop believing.

Yuvraj Singh

We are breaking silence, building awareness, and creating systems of care where none existed. When a woman steps forward for a screening in a remote village, that moment is nothing short of heroic.



Swasth Mahila Swasth Goa: A Landmark in Preventive Women's Health

Over 1.62 Lakh Screenings. Thousands of Conversations That May Save a Life. In Goa—a state better known for its beaches than for its battles with breast cancer—a silent transformation has been taking shape. Through the Swasth Mahila Swasth Goa (SMSG) program, early detection is no longer a privilege. It's becoming a habit, a right, and, slowly but surely, a culture.

More than 1.62 lakh women have now been screened under this initiative—a number that tells only part of the story. The real change lies in the conversations sparked, the fears addressed, and the confidence built in thousands of homes, villages, and urban settlements.

What makes SMSG unique isn't just the scale—it's the depth of community engagement, the systematic use of frontline health workers, and the infrastructure built for continuity, not just coverage.

**From Remote Villages to Urban Wards:
Embedding Health in the Everyday**
In the early days, it wasn't easy. Many women hesitated—some out of modesty, others out of fear, and most simply because they didn't know that breast cancer could affect them, too.

So we started with listening. With sitting down on community floors and holding open conversations. With schoolteachers and anganwadi workers who opened doors. With health educators who traveled into the state's remotest corners—not with pamphlets, but with patience.



From that foundation, the program grew. Screening camps were no longer just events—they became familiar fixtures, often held in schools, local halls, and even under makeshift tents when needed. Slowly, the unfamiliar became routine. In urban neighbourhoods, working women found time between shifts. In tribal belts, mothers walked miles with infants in tow. In each of these interactions, health became personal. Not just about symptoms or lumps—but about taking charge of one's future.

What has allowed SMSG to scale while staying rooted is its commitment to system thinking. This isn't just about a number on a dashboard—it's about whether a woman who screens positive knows what happens next, where she should go, and whom she can call.

To ensure this, a coordinated referral and follow-up system was built alongside the outreach effort. Every suspect case is not just noted, but tracked—with warmth, not surveillance. Volunteers check in. ASHAs help navigate the hospital system. NGOs offer counselling when needed.

Behind the scenes, data is not just collected—it's used. To map underserved blocks. To assess quality of screenings. To identify trends and pre-empt future risks. And to constantly refine where and how we show up.



In collaboration with independent evaluators, a detailed impact study is underway—not just to count how many women were reached, but to answer deeper questions:

- Are women returning for follow-ups?
- Has there been a shift in health-seeking behaviour?
- Are frontline workers better trained and trusted?
- Has the program strengthened public health linkages?
- Are we building something that lasts beyond a grant cycle?

This evaluation will shape the future of the program—and perhaps more importantly, provide a roadmap for how large-scale, preventive health interventions can succeed in India's diverse public health landscape.

For every one of the 1.62 lakh women screened, there is a circle of others—families, neighbours, daughters—watching, learning, and preparing to act. That ripple effect is hard to measure, but easy to feel.

In the story of SMSG, we see a deeper truth emerge: that preventive health is not about ticking boxes, but about creating safety nets made of trust, access, and informed choice. Goa has shown what's possible when political will, public systems, and community ownership come together. And in doing so, it has laid the foundation for a healthier, more informed generation of women—who will pass on not just genes, but knowledge, agency, and hope.



Gift a Smile: A Day of Magic, Laughter, and Healing at RGC

Because Healing is More Than Just Medicine

On 11th April 2025, the corridors of Rajiv Gandhi Cancer Institute (RGC) echoed with something rarely heard in pediatric oncology wards—unrestrained laughter. The occasion was Gift a Smile, a day that brought joy, lightness, and emotional release to children living with cancer, and their families who carry that weight with them every single day. In a space usually filled with clinical routines and quiet courage, we invited something radically different: wonder.

The day began with a magic show—but it wasn't just about tricks. For children whose lives are often reduced to hospital beds and test reports, this was a moment where anything felt possible again. Their eyes widened, not from fear of injections, but from awe. Their smiles weren't coaxed—they came freely, as did the applause from parents who, for a while, let go of their daily dread.

After the show, the children played ball games, tackled riddles, and participated in interactive games designed not just for fun, but for movement, for laughter, and for connection. They weren't just patients. They were children again—competitive, curious, gleeful.

In pediatric oncology, medical treatment is only one part of the healing process. Research has shown that psycho-social support—especially in the form of play, joy, and peer interaction—has a significant impact on a child's resilience, response to treatment, and emotional development.



For families who live between diagnosis and discharge, events like Gift a Smile offer a brief but vital pause. A reminder that their child's spirit still shines through the toughest days. A reassurance that they are not alone.

At the end of the day, each child received a carefully chosen gift. It wasn't about what was inside the package. It was about what it represented: You are seen. You are loved. You are not forgotten in your fight. As they opened their gifts and shared refreshments, there was a warmth that filled the room—not just from the food, but from a rare sense of normalcy.

For us at YouWeCan, Gift a Smile wasn't just an event. It was a reminder of why we do this work. Because healing isn't just in the scan reports—it's in the shared laughter between a mother and her child. In the magic that makes a hospital room feel like a playground. In the joy that refuses to be dimmed by diagnosis.

This is what dignity in care looks like. And this is what we'll continue to strive for—with every child, every story, every smile.



Spreading Smiles at PGICH, Noida

A Day of Connection, Color, and Compassion in collaboration with S&P Global

On 25th April 2025, something quietly beautiful happened at the Post Graduate Institute of Child Health (PGICH) in Noida. Amid clinical charts and chemotherapy schedules, we carved out a space for something that doesn't appear on any hospital record—joy.

Together with our partners at S&P Global, we created a day that wasn't about illness, but imagination. Not about treatment plans, but togetherness. Because sometimes, what children living with cancer need most is a break from being “brave.”

CSR often gets reduced to donations and deliverables. But that day, the team from S&P Global showed us what meaningful partnership really looks like. They didn't just sponsor an event—they participated in it, shoulder to shoulder with the children and families.

Their team members painted alongside the children, laughed with them, sat with their parents. It was not an act of charity. It was a gesture of shared humanity—simple, powerful, and deeply felt.

The day began with a coloring activity—but for these children, it was more than an art exercise. It was a window of freedom. A moment to choose their own colors in a world that often feels beyond their control.

As crayons moved across paper, stories emerged—of animals, superheroes, flowers, and flying dreams. And in those quiet drawings lay loud declarations: I'm still a child. I still imagine. I still matter.

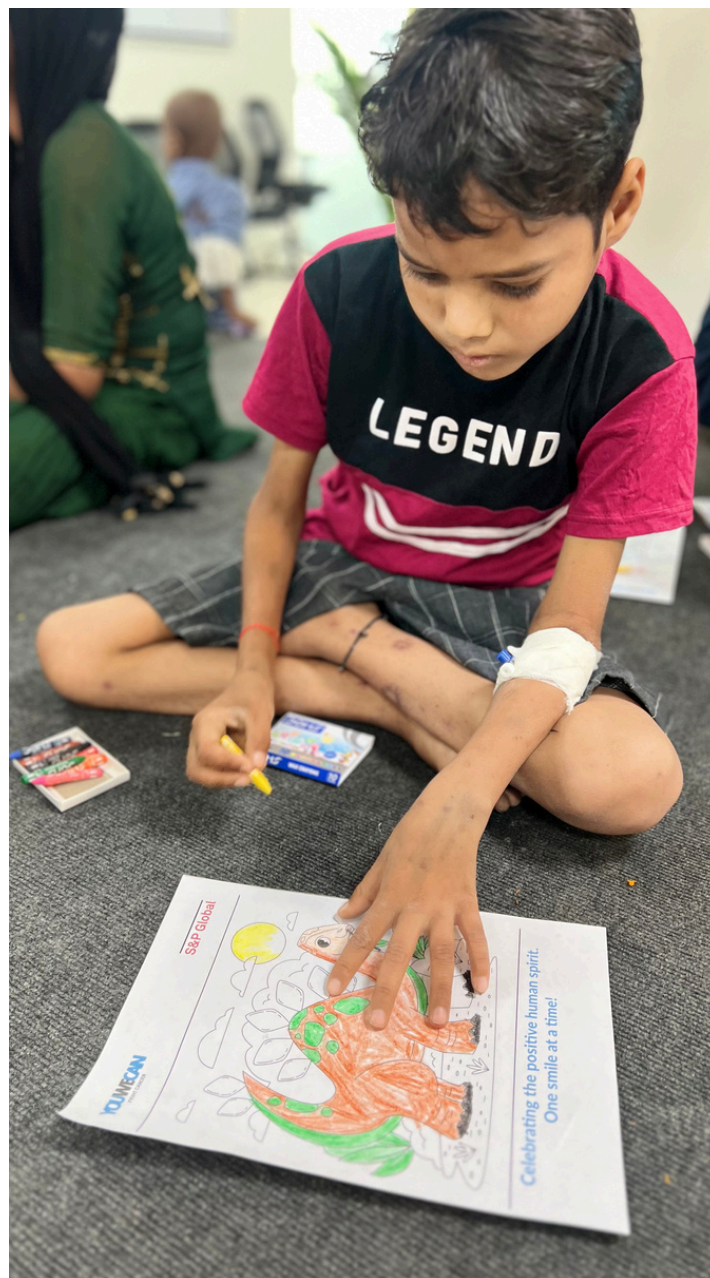


Next came the magic show—a burst of joy that lit up the room. Laughter broke out, not politely but freely, with the kind of abandon only children possess. It was a reminder that wonder still lives in them, no matter how many hospital visits they've endured. Games followed, then dancing. It didn't matter who won. What mattered was the sound of joy echoing in a space usually filled with cautious silence.

Each child received a small gift at the end—an offering that said: This day was for you. You are more than your diagnosis. Some held their gifts close. Some tore them open. Some smiled shyly, others beamed. But all of them, for a moment, looked lighter.

In a development landscape where we often chase large metrics and outcomes, events like this remind us of the unquantifiable. The psychosocial healing that comes from touch, joy, and play. The morale boost families feel when their children are not just patients—but participants in life. The trust built between institutions, caregivers, and communities when they see compassion in action.

And as we packed up that evening, the smiles stayed behind—etched into the hearts of everyone who had the privilege to witness them.



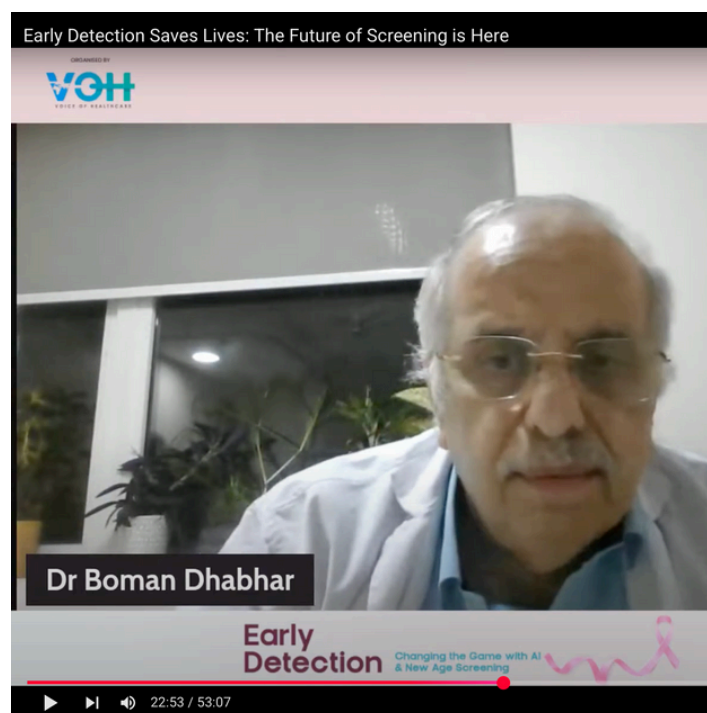
YouWeCan Brings Grassroots Perspective to Voice of Healthcare Panel on AI and Screening Equity

In India, breast cancer is not just a disease—it is a quiet emergency. For millions of women, early detection can mean the difference between life and loss. But the question that continues to haunt the public health space is: Are we reaching the right women at the right time with the right tools?

On this critical note, YouWeCan Foundation was invited to contribute to the Voice of Healthcare panel titled “Early Detection – Changing the Game with AI & New Age Screening.” Representing the foundation, Purnima Bist, Program Manager – Breast Cancer, brought with her not just data or models, but field experience—deeply personal, often invisible, and profoundly necessary in rooms like this.

The panel convened a range of healthcare innovators—those working on the cutting edge of diagnostics, artificial intelligence, and screening technologies. But what made YouWeCan’s voice distinct was its grounding in reality.

Purnima reminded the panel that while AI and innovation hold promise, they are not panaceas. “Technology doesn’t work in isolation,” she said. “It works when it meets trust, when it reaches communities, and when it is delivered through hands that know the fears, the language, and the barriers women face every day.



Drawing on insights from two of YouWeCan's largest grassroots programs—Swasth Mahila Swasth Bharat and Swasth Mahila Swasth Goa—she shared how success lies not just in reaching big numbers, but in designing systems that respect local realities.

These programs have collectively screened over 1.5 lakh women, not through mass camps alone, but through carefully built trust loops:

- Frontline health workers trained not just to conduct screenings, but to have difficult conversations.
- Tech-enabled models that simplify rather than complicate access for women in remote or underserved areas.
- Follow-up systems that ensure no woman falls through the cracks after a positive flag.

“Our work doesn’t end with detection,” she emphasized. “It begins there.”

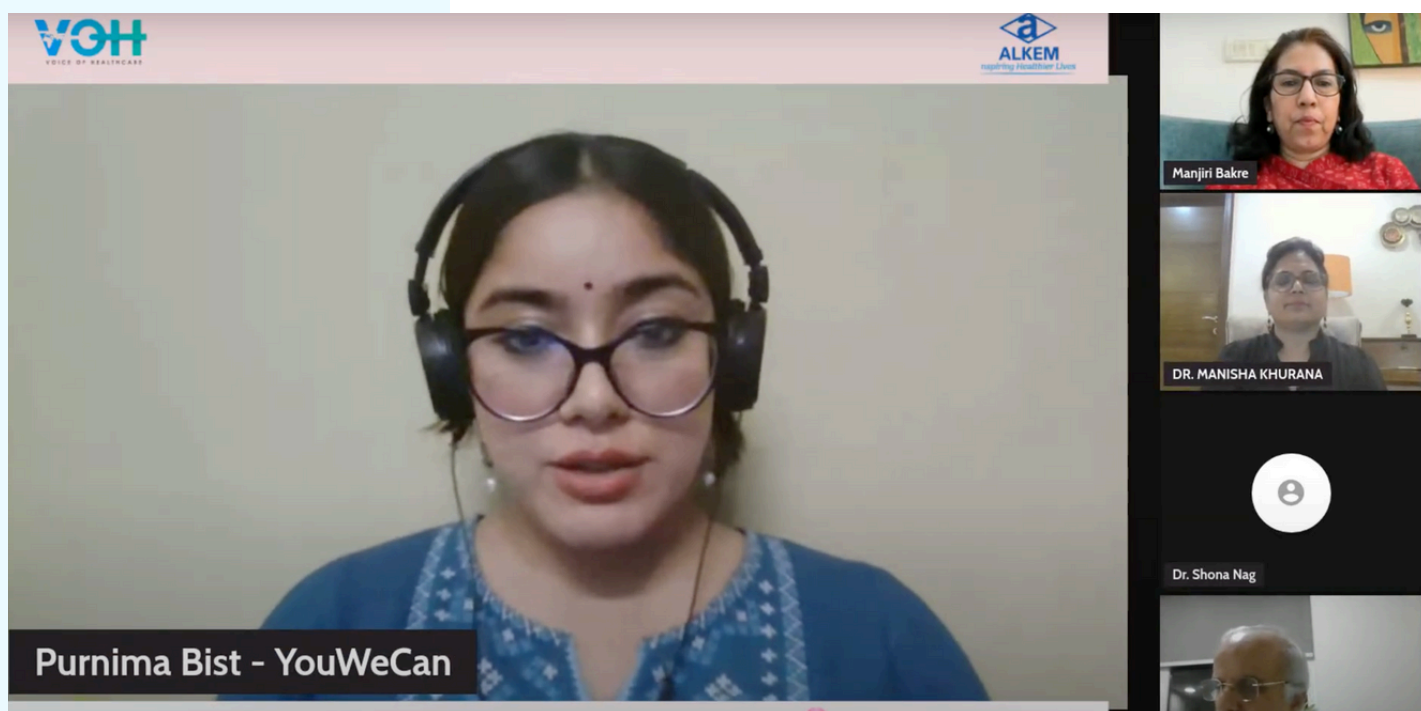
The panel concluded with a shared understanding: that scaling early detection in India will require a radical shift—from fragmented efforts to integrated ecosystems.

From YouWeCan's side, that means bringing the voice of the last-mile woman to every strategic conversation. And from the sector's side, it means investing in community infrastructure, capacity-building, and continuity of care—not just the tech.

Because ultimately, the question is not whether AI can detect cancer. It's whether the woman who needs that detection will ever access it in time.

Panels come and go. But when development practice, technology, and field wisdom collide meaningfully, they shape policy, funding priorities, and public health imagination.

By being in that room, YouWeCan didn't just share a viewpoint. It held space for every woman who's ever been missed by a system too slow to reach her. And every survivor who reminds us that early detection isn't just about efficiency—it's about dignity and the right to life.



Swasth Mahila Swasth Bharat A Movement for Every Woman. A Moment That Could Save Her Life in partnership with Xiaomi India

In a country where breast cancer continues to silently claim thousands of lives each year, Swasth Mahila Swasth Bharat is not just a campaign—it is a lifeline. At its heart lies a belief both urgent and transformative: that every woman, no matter where she lives, deserves the chance to know her body, detect disease early, and act with agency. Across 15 districts spanning rural heartlands and remote communities, this initiative is bringing health directly to women's doorsteps—carried forward by field teams, ASHA workers, and grassroots champions who know the terrain, the people, and the stigma that too often silences early action.

Here is a glimpse into the stories behind the numbers—of courage, care, and quiet revolutions.

- **Udham Singh Nagar, Uttarakhand:** From the mountain shadows to the floodplains, 9,971 women in Udham Singh Nagar came forward for screening—the highest in any district so far. The results were sobering: 290 suspect cases. But what followed was even more remarkable: a seamless referral network, coordinated follow-ups, and families rallying around affected women. In a state where terrain often dictates healthcare access, this is a powerful validation of what outreach can achieve.
- **Baran, Rajasthan:** Amid Baran's sandstone forts and deeply layered history, a new story is emerging—one of modern-day health empowerment. We screened 8,774 women, and identified 42 suspect cases. These women are no longer passive recipients of care—they are informed participants in their health journey, challenging taboos and bringing others along with them.



- **Virudhunagar, Tamil Nadu:** Virudhunagar has long been known for its entrepreneurial spirit—and now, its women are leading in health consciousness too. With 7,637 screenings and 73 suspect cases, this community is showing that when women are empowered with information, they act with urgency and conviction.
- **Nuh, Haryana:** In Nuh, one of India's most underserved districts, change is unfolding from within. Here, 7,872 women stood up for their health. Among them, 102 were flagged for further diagnosis. Behind each number is a story—a mother, a sister, a daughter—who is now being guided toward timely care. In communities long left out of public health narratives, this is what dignity looks like: being counted, being cared for.
- **Wayanad, Kerala:** Tucked in the lush hills of Wayanad, 6,666 women chose to get screened. 188 of them now stand at the edge of timely intervention. This district reminds us that awareness must travel even where infrastructure doesn't. And that when it does, the response is swift, strong, and deeply human.
- **Moga, Punjab:** Among the mustard fields and open skies of Moga, a quiet resolve runs deep. Here, 7,448 women came forward to be screened—many for the first time. For 107 of them, the results brought early warnings. But with that warning came something else: a system of care, a team that followed up, and the hope that comes from being seen, heard, and supported. In a state where talking about breast health still carries cultural hesitation, these women are now leading the way by example.
- **Osmanabad, Maharashtra:** In drought-prone Osmanabad, the word “resilience” carries weight. When 8,662 women came for screenings, and 97 suspect cases were discovered, it wasn't just data—it was a call to action for community health networks that are too often under-resourced but never short on determination.



- **Dahod, Gujarat:** Dahod is a district where tradition meets transition. Amid tribal populations and tight-knit communities, conversations around cancer often begin with fear. Yet 7,575 women showed up to be screened. Only 11 cases were identified as suspects, but each one is being tracked with the same level of care and follow-up as any major urban center. In places where access is scarce, proximity and trust become powerful tools—and our local health workers are bridging that gap.
- **Barpeta, Assam:** In Barpeta's river-wrapped villages, 7,028 women participated, with 41 cases flagged. These were not just screenings—they were conversations, confessions, and commitments from women who now know they are not alone.
- **Visakhapatnam, Andhra Pradesh:** In Vizag, where industry meets coastline, 4,945 women were screened and 113 suspect cases were found. But numbers aside, it was the community sessions, myth-busting efforts, and emotional support groups that made the biggest difference. Prevention is not just medical—it's social, emotional, and collective.
- **Guna, Madhya Pradesh:** In the central heart of India, Guna witnessed 7,474 women coming forward—not driven by fear, but by a growing awareness that knowledge is strength. Seventeen were found with early signs, and each one is now being supported through further diagnosis and care. This effort is a reflection of what happens when public health messaging is consistent, culturally sensitive, and rooted in long-term engagement.
- **Bahraich, Uttar Pradesh:** In Bahraich's borderland blocks and rural expanses, early detection has found a new home. We reached 5,395 women in just a few weeks—and identified 96 potential breast cancer cases. In a district where healthcare is stretched and distances are long, this kind of intervention can mean the difference between treatment and tragedy.



- **Kalaburagi, Karnataka:** Kalaburagi's 4,674 screenings revealed 163 potential cases—each one a woman who may not have known otherwise. Here, deep community engagement was the catalyst. Door-to-door visits, group meetings, and trusted local voices helped dissolve fear and replace it with informed choice.
- **Khammam, Telangana:** Khammam's response was overwhelming: 8,615 women stepped forward, and 167 suspect cases emerged. In these towns and villages, screening is no longer an abstract concept—it's a visible, mobile, and accessible service that's saving lives.
- **Nadia, West Bengal:** Among the literary and cultural richness of Nadia, 5,854 women took a bold step toward prioritizing their health. The 239 suspect cases identified are now part of a referral chain that includes not just hospitals, but community workers who follow up personally—ensuring no woman is left behind.



Survivor Story

My son, Divyam Suraj, is a bright and spirited young boy. He is just five years old, and we are a family from Pune. Our lives took an unexpected turn in January 2025 when Divyam was diagnosed with cancer. The news was devastating. We were referred to Bharati Hospital, and it was there that a social worker introduced us to the Yuvraj Singh Foundation.

From that moment on, YouWeCan became more than just an organization; they became our extended family. The support and assistance they provided were invaluable. The ongoing treatment that Divyam needed would simply not have been possible without their help. They stood by us, guiding us through the complex medical procedures, offering emotional support, and easing our financial burden. We owe an immense debt of gratitude to the Yuvraj Singh Foundation.

Their dedication and commitment have given Divyam a fighting chance. Divyam, even at his young age, has been incredibly brave throughout this journey. He has shown remarkable resilience and a spirit that inspires us every day. He now dreams of becoming a doctor when he grows up. He wants to help others, just like the people at YouWeCan have helped him.

We have full trust and faith in the Yuvraj Singh Foundation. Their work is a beacon of hope for families like ours, and we are eternally grateful for their unwavering support. We believe that with their continued assistance and Divyam's strong will, he will overcome this challenge and achieve his dream.



Divyam



YouWeFan

Whether you're enchanted by his explosive batting, mesmerized by his impeccable fielding, or inspired by his indomitable spirit, this fan page is the perfect hub for celebrating the remarkable journey of one of the game's most iconic players.

Straight from Jay Yadav's Heart!

Please introduce yourself:

Name: Jay Yadav

Age: 28

Location: Bhopal, Madhya Pradesh

Occupation: Automotive Designer

1. Which is your most memorable Yuvi's moment?

His overall performance in 2011 CWC semifinal v/s Australia.

2. What are the first 3 words that come to your mind when you hear "Yuvraj Singh" ?

- Survivor
- Paaji
- Stuart Broad

3. What is the most interesting fact that you know about Yuvraj Singh, that others may not know?

He is a great admirer of super-cars and super-bikes.

4. What's something you would love to ask Yuvraj Singh when you meet him ?

How do you get this amount of strength and drive in you ?

5. If Yuvraj Singh had a superpower, what do you think that would be ?

If Yuvraj Singh had superpower, he would be like hulk solving problems of the world.

6. Apart from the work already being done at YouWeCan, what other innovation would you like to see ?

I would love to see YouWeCan organise more cricket tournaments for specially abled.

7. What is the one message you'd like to give Yuvraj Singh ?

Please send someone like you in the Indian Cricket Team.



Quiz Whiz

What is the most common type of skin cancer?

A. Melanoma

B. Basal Cell Carcinoma

C. Actinic Keratosis

D. Squamous Cell Carcinoma



 **SKIN
CANCER**

2

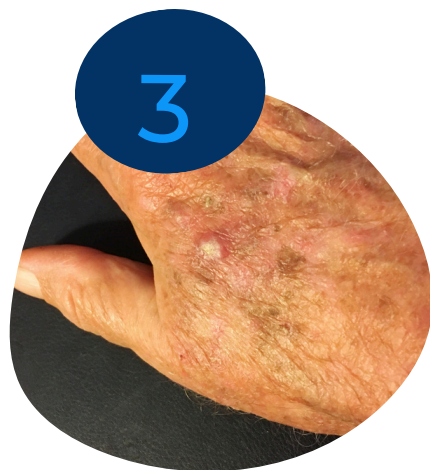
Which SPF is best for daily skin protection?

A. SPF 10

B. SPF 30

C. SPF 100

D. SPF 45



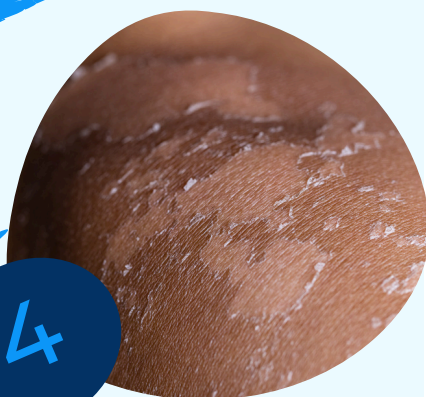
Can people with dark skin get skin cancer?

A. Yes

B. No

C. Maybe

D. It's rare



4



Myth Busters



Myth 1: Only fair-skinned people get skin cancer

Fact: Anyone can get skin cancer — regardless of skin tone. Darker skin may delay visible signs, leading to later diagnosis.

Myth 2: Skin cancer only develops on sun-exposed areas

Fact: Skin cancer can appear anywhere on the body — even in areas not regularly exposed to the sun, like the scalp, soles, or under nails.



Myth 3: If a mole isn't raised or painful, it's not cancerous

Fact: Skin cancer can start as a flat, painless spot. Changes in color, size, or shape are more important warning signs than pain.

Upcoming Events

Mother's Day Celebration at Bharati Hospital Pune



Be a YWC Volunteer



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