

# ANNUALA ANNUEVN REVIEW **Staying well until** a cure is found











## CONTENTS

#### DRWF Annual Review 2020

Message from the Chairman and Chief Executive	01
The impact of diabetes	02
Our purpose, aims and activities	04
Trustees	05
Fundraising - London - Edinburgh Bike Ride	06
Editorial Advisory Board	07
2020 Awareness & Educational Support Activities	10
United Through Diabeties	11
Diabeties Educational Events	12
Camp in the Cloud	13
World Diabetes Day	14
2020 Research Funding and Achievements	15
Research Advisory Board	16
2020 Research Grants Awards	18
Income Expenditure Profile 2020	20
Community Fundraising Highlights	21
How to support DRWF	22
Trusts/Legacies/In Memory	23
Giving in memory	24
Future plans	25

# Message from the DRWF **Chairman** and **Chief Executive**



Our focus for 2020 was on building resilience and sustainability for the future through succession planning, diversification of income streams and delivery of purposeful programs that continue to meet the ever-changing needs of, and make a difference to, people living with diabetes.

To that end, Dr Shivani Misra, Consultant in Metabolic Medicine & Diabetes at Imperial College London, was elected to the Board of Trustees in January. Shivani brings a wealth of clinical and scientific knowledge to the Board having been recognised as one of London's leading health influencers in the Evening Standard's annual Progress 1000 list in 2018. We have known Shivani for many years as she was awarded a DRWF Fellowship in 2012 and went on to conduct the national My Diabetes Study. We are really pleased to have her join the DRWF family.

We had planned to grow and develop many of our activities in 2020 but of course the Covid-19 pandemic brought the world pretty much to a standstill, with our daily lives significantly impacted. It has been a challenging time for everyone but our small DRWF team really dug deep and were magnificent in coping with the change of working arrangements, and cancellation of activities and events which ultimately resulted in several team members being furloughed. We're very lucky to have been able to bring these team members back to their full roles, when many charities have not been so blessed.

The health and safety of our team has been paramount during the pandemic months and we are extremely fortunate to have arrived at this point without having encountered any significant illness due to Covid-19. Our hearts go out to all those that have lost family and friends.

Much has been learned during these difficult months and we've identified a number of areas in our structure and activities which require investment of funds, time and expertise. It is often quoted that 'necessity is the mother of invention' and we certainly discovered this to be the truth in 2020, being pushed perhaps more quickly than we might have been comfortable with, into exploring online and digital activities in greater depth.

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Our learnings from the pandemic have played a big part in helping us scope out our next 3-year growth strategy, but we are benefitting from having a stable and well-run charity with the reserves that enable us to invest in future sustainability, whilst being responsive to the needs of the people that we support and the researchers that we fund.

Most importantly, we learned that in the world's hour of need, medical research pushed all boundaries and found a vaccine for Covid-19 that is now being rolled-out with lightening-speed to protect our communities. Diabetes is one of the world's leading health challenges – we must act with the same determination in our research for a CURE!

As we continue to navigate these uncertain times, I want to thank the DRWF team, trustees, advisory board members, supporters and volunteers who work so tirelessly and give so generously to our cause.

We could not achieve what we do without you all. Thank you!

W. Michael Gretschel Chairman Sarah Tutton Chief Executive

## The impact of diabetes

#### Diabetes is a chronic, progressive disease that can have a debilitating impact on almost every aspect of life.

Type 1 diabetes cannot be prevented. It occurs when the pancreas doesn't produce any insulin and is considered to be an auto-immune response in the body.

Type 2 diabetes is considered to be largely related to lifestyle factors. It can be prevented, or at least its onset delayed, in many cases by changing diet and exercise habits.



Diabetes, its care and treatment, is reported to cost the NHS almost 10% of its annual budget which is approximately £10 billion.

It is thought that around 80% of these costs is attributed to treating the complications of diabetes - many of which can be avoided.

One in six people in a hospital bed has diabetes. People with diabetes are twice as likely to be admitted to hospital.

## The scale of the problem



Latest figures indicate that around 4.7 million people in the UK have diabetes and it is thought that around a further 1 million adults have T2 but are yet to be diagnosed. More than 5 million people in the UK could have T2 diabetes by 2025.



Diabetes is a global issue with more than 463 million adults living with the condition around the world in 2020. This is expected to reach 700 million by 2045.

Self-management is the cornerstone of diabetes care and to be effective, requires strong partnerships with health care providers and support networks.

We provide the information and tools to encourage and support a proactive approach to self-care.

## There are 2 main types of diabetes



## Type 1 cannot be prevented

• Type 1 diabetes accounts for around 10% of those diagnosed with diabetes in the UK





## Type 2 can be prevented

 Type 2 diabetes accounts for around 90% of all those diagnosed with diabetes in the UK



 More than half of all cases of Type
2 diabetes could be prevented or delayed



 10,350 people in the UK have end stage kidney failure because of their diabetes



More than 1,700 people have their sight seriously affected by their diabetes every year in the UK

## The objects of the charity are

- To assist in the relief of persons with diabetes and any similar or related diseases or conditions
- To raise public awareness about diabetes and any similar or related diseases or conditions, their incidence, causes, treatment, avoidance and relief



#### The focus of our work

There are more than 4 million people diagnosed with diabetes in the UK. This figure has more than doubled in the last 20 years and it is anticipated that if nothing changes, this will rise to 5 million in the next 4 years.



Around 90% of people with diabetes have type 2, which can often be prevented. There are a number of risk factors which increase the likelihood of a type 2 diagnosis, such as being overweight or obese, which puts people at greater risk of a range of chronic health conditions and ultimately increased risk of premature death.

Approximately 10% of people with diabetes have type 1 diabetes which is a chronic autoimmune condition where the body is unable to produce insulin which is required to regulate blood sugar levels. Type 1 diabetes cannot be prevented.

It is estimated that up to 5% of those diagnosed with diabetes have rare types such as MODY (maturity onset diabetes in the young), CFRD (cystic fibrosis related diabetes), LADA (latent autoimmune diabetes in adults) and a small handful of other types.

It is estimated that the care and treatment of diabetes costs the NHS around 10% of its annual spend, which equates to approximately £10 billion per year. This is a staggering £1.1 million per hour.

Whilst all diabetes can lead to significant health challenges, such as increased risk of cardiovascular disease, blindness and amputation, it is important to remember that type 2 diabetes can be prevented or at least its onset delayed. There is also evidence of people with type 2 diabetes achieving 'remission' where they have had major weight loss through restrictive diets or bariatric surgery.

Self-management of diabetes is central to reducing the risks associated with complications and therefore much of our work is focused on providing information and educational support programmes that empower self-management and seek to encourage a pro-active approach to good self-care. We consider that those with the greatest knowledge of their condition will have a better understanding of the disease and will be better equipped to have an impact on the progression of their diabetes and any associated complications. Our Diabetes Wellness activities in the community provide a great platform for meeting people sharing similar health concerns, making new friends and building peer support networks, all of which serve to enhance both the physical and psychosocial management of diabetes.

The research we fund spans all types of diabetes and related health, helping improve understanding of cause, treatment and management with our ultimate goal being to find a cure for what is considered to be one of the 21st century's leading health challenges, worldwide. With the commitment of a multi-disciplinary Research Advisory Board, and a rigorous peer review process for applications, we invest in innovative Pump Priming projects and Fellowships which we believe will demonstrate impact for people with diabetes in the fastest time-frame. To-date, we have committed almost £13 million to research since our first awards were made in 1999.

## Trustees

DRWF was born from a very personal connection with type 1 diabetes. Having two children diagnosed with the condition made for a commitment and dedication to the cause from Mike Gretschel and his business partner, John Alahouzos, that has never wavered and remains true to its original desire to find a cure for diabetes.

The DRWF group was established in 1993 in the U.S. and in 1998, DRWF was incorporated and registered as a charity in the UK. Over the last 22 years we have become a recognised provider of awareness, educational support programmes and leading funder of diabetes research. The DRWF Board of Trustees are an engaged and committed group of individuals who bring a significant level of expertise to the governance of the charity in the fields of law, business strategy & management, international fundraising, psychology, healthcare and education.

#### **Michael Gretschel**

#### **Co-Founder Chairman of the Board**

Volunteer fundraiser for diabetes research for over 30 years. Mike has a very personal interest in diabetes, with two children having Type 1. In 1993, Mike – along with others – founded the Diabetes Research & Wellness Foundation (DRWF). Since then, the DRWF International Network of charities has grown to include the Diabetes Research & Wellness Foundation (DRWF) in the UK; Association pour la recherché sur la diabete (A-rd) in France; Diabetes Wellness Network Sverige (DWNS) in Sweden and a new group just starting out in Finland. All groups work autonomously, but with the same objective, and work collaboratively on international awareness and research funding campaigns. Collectively, the groups have committed more than £55 million in awareness, education and research funding since inception.

#### John Alahouzos

#### Co-Founder Volunteer fundraiser for diabetes research since 1978

John Alahouzos is a marketing executive by profession and a volunteer for 'The Diabetes Cure' by choice. For almost 38 years he has worked alongside his friend Mike Gretschel to raise funds and awareness for the need to cure diabetes. After many years of volunteer fundraising for the Juvenile Diabetes Research Fund in the US, John, Mike and their wives founded the Diabetes Research & Wellness Foundation (DRWF) in 1993. John is the Chairman of the Board of Trustees of the Diabetes Research & Wellness Foundation in the US and serves as a trustee on the board of the Diabetes Research & Wellness Foundation in the UK, as well as their affiliates in France, Sweden, and Finland.

#### **Jeffrey Harab**

#### Bachelor of Arts, Juris Doctor. Attorney-at-Law, 1979

Jeff has been a member of the Board of Trustees of the Diabetes Research & Wellness Foundation (DRWF) since 2001. He is also a board member of the Association pour la recherché sur le diabete (A-rd) and is an alternate board member for Insamlingsstiftelsen Diabetes Wellness Network Sverige (DWNS). Each of these groups, along with DRWF in the UK, form part of the International Diabetes Wellness Network, and collaborate on global diabetes awareness campaigns, educational programmes and research funding initiatives.

#### Valerie Hussey

#### **Retired Nurse, Musgrove Park Hospital, Taunton**

Val has been a member of the Board of Trustees of DRWF since 1999. She is also an alternate board member for Insamlingsstiftelsen Diabetes Wellness Network Sverige (DWNS). Having worked as a nurse within the NHS for many years, Val has a keen interest in ensuring that people with long-term conditions have the resources available to them to self-manage their condition as effectively as possible. She is a keen supporter of the charity's educational event programme.

#### **Steve Jones**

#### Business coach, public speaker, trainer and consultant

Steve is an expert in creating ideas and strategies that build businesses, drive revenue and improve business position and performance. He has a passion for making companies and their products the best in their product category. Steve's unique understanding of leadership and management, team building and motivation in business, coupled with his understanding, drive and enthusiasm, clearly set him aside as an expert.

#### Dr Shivani Misra

#### Consultant in Diabetes and Metabolic Medicine at Imperial College Healthcare NHS Trust and a diabetes researcher in Imperial College London.

Dr Misra graduated from medical school in 2005 and has actively pursued a research career in diabetes over the last decade. She set up the MY DIABETES study as a PhD student, to examine types of diabetes in different ethnic groups and received the Sutherland-Earl Clinical Research Fellowship from the DRWF to fund this. Her current clinical activity focuses on people with diabetes diagnosed at young age with unusual types of diabetes and on young-onset type 2 diabetes. Dr Misra was a recipient of the prestigious European Federation for the Study of Diabetes Future Leaders Mentorship Award in 2017 and continues to balance clinical and research activity in diabetes.

















## Cameron's London-Edinburgh Cycle

London-based Cameron Muir marked 20 years of living with type 1 diabetes by cycling from London to Edinburgh with a group of friends, in aid of DRWF. Cameron was joined by a group of close friends for the fundraising challenge covering more than 400 miles. They set off from Dalston, London on 28th August and made it north of the border to reach Edinburgh on 4th September.

The group of friends came up with the idea during a lockdown stroll. Cameron and friend James wanted to do something worthwhile with their time to give something back, as the world returned to normality after the first Covid-19 lockdown.

Cameron said: "I was diagnosed with type 1 diabetes aged 10 in 2010. My family and I were away on an annual trip with a group of family friends when I became very ill and had to be rushed to hospital. It was a shock to find out that I had diabetic ketoacidosis. I had to remain in hospital for a week until the doctors could stabilise my condition. It is now my 20th year of taking insulin and I have had many ups and downs with controlling my blood sugar along the way.

"My grandmother, Dr Norma Cooper, who was one of my biggest supporters being a doctor herself, very sadly died in April. She was very interested in research for a cure for diabetes and used to give money to the research centre in Aberdeen in the hopes that she would see a cure during her lifetime. 'There'll be a cure soon,' she used to write to me, sending me many newspaper cut-outs and any information that she could get her hands on. In my grandmother's memory I decided, along with my girlfriend and four of my friends, to raise money for Diabetes Research & Wellness Foundation, cycling from my home in London to my parent's home in Edinburgh. This is 500 miles which we hope to achieve in one week.



"My difficulties as a child growing up with diabetes and as a teenager really affected my life. At school I was a keen sportsman, and at university I became the captain of the 1st XV rugby team. It was hard for me to get my sugar levels right before and after matches. Now I am so grateful for the technology that has been developed. I wear a sensor on my leg so that I can test my blood sugar with my smartphone, and it records everything for me. I would like to raise money in order to help find the cure that my grandmother was hoping for and to help more young people like me who have been diagnosed at an early age."

Cameron and his friends raised almost £17,000 in support of our Pump Priming awards. These are 1 year clinical/non-clinical 'proof of concept' projects which aim to collect translational pilot study data the results of which often enable the researchers to leverage larger, higher value multi-year grant funding to expand their work and ultimately benefit those living with diabetes.





## **Editorial Advisory Board**

#### **Dr Sarah Brewer**

#### GP, Health Journalist and Specialist in Nutritional Medicine

Dr Sarah Brewer MSc (Nutr Med), MA (Cantab), MB, BChir, RNutr, MBANT qualified from Cambridge University with degrees in Natural Sciences, Medicine and Surgery. After working in general practice, she gained a master's degree in nutritional medicine from the University of Surrey. As well as being a licensed doctor, Sarah is now also a Registered Nutritionist, a Registered Nutritional Therapist and an award winning health writer. Sarah is the author of over 50 popular self-help books, including Overcoming Diabetes (Duncan Baird) and Natural Approaches to Diabetes (Piatkus). Her latest books are Live Longer Look Younger, and Eat Well, Stay Well, published by Connections. Sarah is the editor of YourWellness magazine www.yourwellness.com. Follow her occasional nutritional Tweets at www.twitter.com/DrSarahB.

#### Dr Deborah Broadbent MRCOphth,

#### **Ophthalmologist / Director of Liverpool Diabetes Eye Centre**

Deborah Broadbent MB ChB (Liverpool) DRCOG (London) DO (London) MRCOphth graduated from Liverpool University in 1976 and has been working as an ophthalmologist since 1978. In conjunction with colleagues she set up the Liverpool Diabetic Eye Study in 1991 and in 1996 she became the full-time Director of the Liverpool Diabetes Eye Centre.

Over the past 20 years she has developed an expertise in the epidemiology, diagnosis and management of diabetic eye disease. She has presented original papers and been an invited speaker at both national and international meetings. In September 2002 she was appointed as the Lead in Workforce, Training and Education to the English National Screening Programme for Diabetic Retinopathy, and has worked with Skills for Health, NHSU, the National Open College Network and City and Guilds to develop National Occupational Standards in retinopathy screening and a suite of mandatory national qualifications awarded by City and Guilds for all personnel involved in the identification of sight threatening diabetic retinopathy across the UK. She was appointed as Honorary Associate Clinical Professor with Warwick University, advising on the Masters in Diabetic Retinopathy programme, in 2010, and as Honorary Senior Lecturer in the Department of Eye and Vision Science at the University of Liverpool in 2013.

She acts as a peer reviewer for ophthalmic and diabetes journals and is the Section Editor for Retinopathy in Diabetes Digest. She is also on the Advisory Board for the Diabetes Research and Wellness Foundation and is a trustee for The Eye Fund, a charity providing counselling support for people coming to terms with untreatable visual impairment. She continues to be actively involved in research into the epidemiology of diabetic retinopathy, screening for diabetic retinopathy and new therapies.

#### Andrea Cameron

#### Head of the School of Social and Health Sciences, Abertay University

Andrea has worked in Health Care since 1982. After qualifying as a nurse she specialised in Coronary Care Nursing before becoming a Nurse Teacher. She then moved to teaching Sports Science, but remains a registered nurse and qualified exercise instructor. She has undertaken doctoral studies examining the information given to patients with Diabetes by health professionals in the primary care sector and has published in the area of volunteering and employment skills. Andrea has also run for Scotland at international veteran events, and has been a contributor for DWRF since 2004.

#### **Professor Edzard Ernst**

#### Professor in Complementary Medicine, Exeter

Professor Edzard Ernst is Chair in Complementary Medicine and Director of Complementary Medicine at Peninsula Medical School in Exeter. His expertise lies in acupuncture, autogenic training, herbalism, homeopathy, massage and spinal manipulation. He has published more than 1,000 articles in peer reviewed medical literature, 500 original research papers and has written, or been editor, of more than 40 books. Edzard is Editor-in-Chief and founder of two medical journals, and sits on the editorial board for 20 other journals, including DRWF's *Diabetes Wellness News*.







#### Azmina Govindji

#### **Registered Dietitian and TV Nutritionist**

Azmina is a registered dietitian, consultant nutritionist, broadcaster and best-selling author. She is director of Azmina Nutrition **www.azminanutrition.com** and shares daily tips at **http://on.fb.me/AzNutrition**. Azmina has written 15 books including the Gi Plan with Nina Puddefoot and The Diabetes Weight Loss Diet with Antony Worrall Thompson. She was Chief Dietitian to Diabetes UK from 1987-1995 and is currently a media spokesperson for the British Dietetic Association.

#### **Emma Howard**

#### **Community Diabetes Lead Podiatrist, Oxford Health NHS Foundation Trust**

Emma qualified with a BSC Hons Podiatry from the University of Brighton in 1997 and began working as a community podiatrist for the NHS in Shropshire. During this time she completed the Society of Chiropodists and Podiatrist Diabetic Foot Module and began working in acute diabetic foot clinics in Telford and Shrewsbury. After nearly 10 years she moved to work at Knowsley PCT on Merseyside as a Diabetes Team Leader in a community trust.

In 2009 she accepted a position for Oxford Health NHS Foundation Trust where she works as a Community Diabetes Lead Podiatrist. She specialises in the care of the diabetic foot and high risk wound care. The clinics run across community settings and within OCDEM (Oxford Centre for Diabetes, Endocrinology and Metabolism).

She has worked with DRWF since 2007 developing the foot care advice leaflet and has attended the Walking holidays and Wellness Weekends to give presentations and informal advice on foot care in diabetes.

#### **Dr Alison Kirk**

#### Lecturer in Physical Activity for Health, University of Strathclyde, Glasgow

Alison was appointed in January 2009 as a Lecturer in Physical activity for Health at Strathclyde University, Glasgow. She completed a BSc in Physiology and Sports Science at the University of Glasgow (1998) before undertaking a PhD through the same university (completed 2003). She was then appointed as Lecturer at Dundee University before moving to Strathclyde University. Alison currently teaches on the BSc Sport and Physical Activity degree course. She teaches various aspects of physical activity and health and clinical exercise science.

Alison's specialist research area is in behaviour change of physical activity and sedentary behaviour with emphasis towards prevention and management of chronic disease. She has particular focus towards diabetes but with past and current funded research in breast and colon cancer, respiratory and cardiovascular disease. Alison has a drive towards implementation of research findings and knowledge exchange within community and clinical practice and has worked with a number of community and clinical groups on related projects and guidelines.

#### **Dr Alastair Leckie**

#### MBChB DRCOG MRCGP FFOM, Consultant in Occupational Medicine, OHSAS

Alastair is a consultant in occupational medicine and director of OHSAS, an NHS based service provider for occupational health. He graduated from Edinburgh University in 1986 and initially trained and worked as a general practitioner. He trained in occupational medicine at the Institute of Occupational Medicine before moving into his current role. Alastair is involved in postgraduate training for GPs, specialist trainees, and occupational health colleagues. He is an honorary senior clinical lecturer at the University of Glasgow. He frequently sees people in his clinic with diabetes to advise them and their employer regarding any work issues or work based assistance that may be required. Alastair is currently President of the Society of Occupational Medicine.











#### Henrietta Mulnier

#### RGN MSc PhD RNT, Lead Diabetes Nurse, Royal Surrey County Hospital and Primary Care

Henrietta Mulnier RGN MSc PhD is a Lecturer in Diabetes Nursing at the Florence Nightingale School of Nursing and Midwifery, King's College London. She also works clinically as an Honorary Diabetes Specialist Nurse at St Thomas' Hospital London. She has been nursing for nearly 30 years; specialising in diabetes since 1995. Having completed a Doctorate in 2008 her current focus is on research to benefit patient care for those with diabetes. Henri has published widely and is a reviewer for several journals. She is a member of the current National Institute for Health and Clinical Excellence Guidance Development Group for type 1 diabetes and is also on the editorial board for Diabetes & Primary Care.

#### **Dr Mavank Patel**

#### Consultant Physician in Diabetes, University Hospital Southampton NHS Foundation Trust

Dr Mayank Patel has worked as a Consultant Physician in Diabetes and Acute Medicine at University Hospital Southampton since 2008. Since starting as a Consultant, he has overhauled and developed the trusts adult inpatient diabetes service and worked with commissioners to bring new adult multidisciplinary insulin pump and diabetic foot services to the trust. He co-developed 'DiAppbetes', the smartphone application to help healthcare professionals manage inpatients with diabetes. He also contributes to medical undergraduate and postgraduate diabetes training, as well as regularly delivering diabetes education to patients, public and other healthcare professionals in primary and secondary care.

#### **Professor Philip Preshaw**

#### Specialist in Periodontics, Visiting Professor, Newcastle University

Philip Preshaw is Professor of Periodontology and Consultant in Restorative Dentistry at Newcastle University, UK. He received his Dental Degree from the University of Newcastle in 1991 and his PhD in 1997. He is a registered specialist in Periodontics and is a Fellow of the Royal College of Surgeons of Edinburgh. His main research interests are investigations of the pathogenesis of periodontal disease, and links between diabetes and periodontal disease. Professor Preshaw lectures frequently, and has numerous publications in peer-reviewed scientific journals. He has been awarded a UK NIHR National Clinician Scientist Fellowship, a Distinguished Scientist Award from the International Association of Dental Research, and a King James IV Professorship from the Royal College of Surgeons of Edinburgh for his contributions to research.











## Awareness, information & support

Direct mail played a key part in our communications strategy during 2020, supporting our desire to stay connected with key audiences who do not routinely engage with online channels. We distributed 257,187 campaign packs in 2020. The health information contained within each campaign is targeted at beneficiaries who could act on the information, either in a preventative way (type 2 diabetes) or to inform and support those living with diabetes (all types), in their self-management of the condition. With a positive response from around 14% of those mailed, we know that at least 38,425 people across the country read the information contained within the campaigns. We know from experience that it is likely that many more opened and read the information but chose not to make direct contact with us at that time. Historically, we have seen numbers of people respond to communications that have been distributed many months, or even years before, as they have held onto the information provided for future reference.

Our awareness messages are reaching wider audiences than ever before supported by our increased provision of news and articles on our website and social media channels and via our Health Unlocked community forum, the world's largest social network for health. The DRWF Diabetes HU forum has a total 5785 all time members and this has grown by 30% since early 2019. Around 10% of all members are very active in posting and joining discussions. This is enabling us to interact with more diverse communities where the risk and/or impact of diabetes can be higher and where people feel that they have a safe space within which to share their experiences, gain support and make a difference to others too.

It was clear from the outset of the pandemic that our ability to reach those that we support through digital channels was going to be crucial to our continued operations. To that end, we had to adapt quickly to engage with supporters and beneficiaries alike with lockdown measures accelerating our use of digital channels. This was essential in order to stay connected with the diabetes community during a time of considerable stress, when people with diabetes were being told that they were at greater risk of significant illness if they contracted coronavirus. We doubled our efforts to generate regular reliable news items, and self-management articles to support people through improved understanding of 'sick day rules'. In 2019 our website received 190,174 unique page views. In 2020 that rose to 372,045 unique page views. This is an increase in website traffic of over 95%.

At the start of the pandemic, when it became apparent that we would have to cancel our community events for the foreseeable future, we ran a social media campaign to promote our series of diabetes information leaflets to ensure that people were sign-posted to reliable, Information Standard accredited, adult health and social care information. In 2019 there were 10,653 downloads of these leaflets. In 2020 this leapt to 37,416 which is a three-fold increase.

Whilst in 2019 we had started to explore podcast content as a means of engaging and supporting diabetes healthcare professionals and people living with diabetes, we increased our efforts through this channel in 2020 as an alternative to written information and video content. This resulted in double the number of visitors to our podcasts about Life with Diabetes seeing 549 downloads, a small but solid start to delivering information in this format.

In 2020 we increased our efforts to raise awareness of our activities and services to more people through social media campaigns with most engagement being seen through our Facebook page. In 2019 our sponsored content reached an average of 7,597 people a day, roughly 2,773,000 people in total. In 2020 our sponsored content reach more than doubled to an average of 20,399 people a day, around 7,445,635 people in total and well over 10% of the total UK population. This platform enables us to engage in conversation with a diverse audience, often answering general diabetes related self-management queries; addressing confusions about diabetes, and increasingly responding to questions and comments about diabetes research and recent advances.

Our patient information resources are available free of charge. As standard, they can be requested in hard copy or downloaded from our website as pdf or audio files; requested in enlarged print format or alternative. There was a significant reduction in requests for physical information in the period. This is possibly because people were otherwise caught up in the pandemic. Additionally, because we had minimal staff onsite we were encouraging people to go to our website to download information in pdf and audio format; to listen to our podcast series for additional help and to interact with our social media channels. The impact of this contributes to the increased traffic to our website during the period which saw a 3-fold increase in the volume of resources downloaded.

We distributed 117,177 copies of our newsletter, Diabetes Wellness News, to subscribers, healthcare professionals and regular givers. This is a 1% decrease in the circulation numbers of 2019. The newsletter is distributed to annual subscribers, and on a complimentary basis to healthcare providers who share the information with their patient communities. On a quarterly basis the circulation is boosted as we focus on the research element of our work and send a copy to our regular givers. It is difficult to accurately predict the true readership of the newsletter but through anecdotal evidence, it is clear that it is much wider than those who have specifically requested to receive it. The number of healthcare professionals on our database increased by 6% during the year and this was largely due to sign up of HCPs at Diabetes Professional Care held at the end of 2019.



Our Diabetes Awareness Necklace is distributed free of charge to people with diabetes and healthcare professionals for onward distribution. These necklaces provide emergency identification for those with diabetes should they be unable to alert the emergency services to their condition. They carry the wording 'I have diabetes, please test my blood before treating me'. They are distributed along with medical check-up cards that are used to record tests and results to inform self-management strategies. We responded to 6718 specific requests for free necklaces during the year, with many hundreds more circulated at numerous events in the period.

## Quality in Care Diabetes - award winning Diabetes Wellness educational events



Diabetes structured education aims to provide people with diabetes with the knowledge and confidence to self-manage a long-term condition effectively. The offer of structured education across the country has improved over more recent years. However, the rates of attendance are still very low and vary widely. Self-management is central to diabetes care. Yet, it is reported that high numbers of people with diabetes experience emotional or psychological problems, such as depression, anxiety and diabetes distress, all of which can impact the ability and motivation to self-manage effectively. This leads to poorer health outcomes, reduced

quality of life and increased healthcare costs. Being able to access appropriate support is integral to good self-management.

We have been running an annual programme of Diabetes Wellness events since 2001. We work with diabetes, and related healthcare professionals to facilitate workshops that provide relevant, up-to-date, evidence-based information covering all aspects of diabetes and related health. Delegates choose the sessions and talks that they attend meaning that they create their own agenda for the day, improving engagement and supporting better outcomes. These events bring together a wealth of information, expertise and peer support under one roof.

The event programme is devised and delivered by experts and offers rotating workshops that focus on the day-to-day management of diabetes and the prevention and management of associated complications. An exhibition hall provides a central hub where delegates can access a range of support from primary, secondary and community organisations.



We know that managing diabetes is challenging and effective coping strategies are crucial to support optimal health. These coping strategies are important not just to people living with diabetes but their family, friends and carers. Peer support plays an important part in emotional wellbeing and this in turn can have an obvious impact on the ability to self-manage effectively. For this reason, we feel it is important to include family, friends and carers in workshops and discussions which facilitates discussion around managing diabetes, perceptions and expectations, in an environment where everyone has experienced or is experiencing something similar. These





"Learning about diabetes at these events is contributing significantly towards my improved health and wellbeing".

events are relaxed and welcoming in approach. They are inclusive and provide for diverse needs. They also provide an amazing opportunity to spend time with a whole host of health care professionals asking the questions that really matter to the individual, in a relaxed and informal environment.

## Diabetes Wellness Days in 2020

There were 3 Wellness Days scheduled to take place in 2020, all of which had to be cancelled due to the coronavirus pandemic. Venue terms and conditions were negotiated to minimize any cost to the charity due to cancellation. All venues were very considerate in their approach and allowed for rescheduling of dates with deferment of deposits and cancellation charges where applicable.

The cancellation of these events reduced related workload and so the DRWF event co-ordinator role was furloughed between 1st May and 30th September and supported through the Government's Coronavirus Job Retention Scheme.

We produced an interactive digital toolkit incorporating top tips and self-management articles with links to podcast and video content for beneficiaries who had registered to attend the Wellness events. This at least went some way to ensuring that we had provided access to the supportive content that participants would have benefitted from had they been able to attend an event in person.

#### **Diabetes Professional Care**

We have supported Diabetes Professional Care (DPC) in the provision of an educational event for diabetes and related health care professionals for the past 5 years. Usually this CPD accredited event accommodates 5000+ attendees, over a 2-day period at Olympia in London. DPC was unable to proceed with the usual format of event due to the pandemic. Working with an online media agency, they were able to pivot quickly offering online educational workshops to HCP's throughout the pandemic months which culminated in a large online event in the lead-up to World Diabetes Day. This gave DRWF an opportunity to retain visibility within the HCP community, contributing to the programme of talks and workshops, as well as providing a platform for engaging interested parties in discussion about the charity's activities.

"Just like to say a huge THANK YOU for a fabulously informative and useful day. Well organised, with talks from those who have the knowledge."

#### **United Through Diabeties**

In partnership with DPC, we co-hosted an additional patient educational event entitled United through Diabetes on World Diabetes Day. This helped us to deliver a purposeful event at scale on a digital platform that we otherwise could not have offered to the diabetes community. There were over 4000 pre-registrations for UTD from diabetes healthcare professionals, public health officials and people living with diabetes from around the world. On November 14th, 1340 people logged-on to the virtual platform and participated in 21 workshops, talks, panel discussions and community forum sessions, supported by 35 diabetes and related health experts throughout the day. People participated from 41 countries with 91% of attendees from the UK.

"It was an awesome event, full of up-to-date relevant information necessary for both the healthcare practitioners and the patients with diabetes. I want to say very many thanks to you all for giving me the opportunity of gaining more skills and knowledge about diabetes."











## Camp in the cloud

There are around 29,000 children and young people in the UK living with Type1 Diabetes. For these young people, quality of life can be adversely affected by isolation and their inability to participate in many of the everyday activities enjoyed by their friends and peers. This often results in a growing lack of self-esteem and confidence, which can become a barrier to future growth and development.



Having provided our first, very successful, Diabetes Wellness Family Camp in partnership with Over The Wall in 2019, we had planned a great residential programme for 2020. However, the pandemic meant that this event had to be cancelled.

The OTW team worked with digital consultants to devise a unique online platform to enable a virtual **Camp in the Cloud (CiTC)** event to take place. Those families that had been offered a place at the planned residential camps for 2020 were invited to participate in the CiTC experience. This meant that 20 T1D families (70+ participants) had an opportunity to join with others for some creative fun, games and friendship online.

By working in partnership, we were able to present a wonderful opportunity for families with children with Type1 diabetes to connect with others experiencing similar health issues, enabling friendships to develop between families who often feel isolated, which we know can last long after the event.

We recognise that the online experience and associated benefits are somewhat different to an in-person event, but there is opportunity through this platform to reach those children who may not have been eligible to attend an in-person residential event, due to significant health challenges. This potentially widens our reach quite significantly and so we intend to explore the possibility of carrying out online and residential events of this sort, going forward.

'Thank you to everyone of you for the amazing effort that you have put into camp. I had no idea how it was going to work or how you were going to bring those amazing qualities out of the children. The excitement in our house this week has been unbelievable with so much laughter." Camper Parent





Dr Joanne Boldison University of Exeter



Drs Hauge-Evans & Patterson Roehampton University



Dr Richard Hulse & Team



Dr Yu Hsuan Carol Yang - University of Exeter



Dr Guy Taylor University of Newcastle



## **Research Funding**



We provide research grants to researchers whose work we consider offers the best hope and most expedient path to improved understanding of all types of diabetes; new and improved treatments and management strategies, and ultimately a cure.

Awards are offered as a 3-year Clinical and Non-Clinical Fellowship and 1-year Pump Priming project awards. Institutional and discretionary awards are available when funds allow. Contract funding of key personnel within the DRWF Human Islet Isolation Facility at the Churchill Hospital, Oxford is subject to proposal and review on a multi-year rolling contract basis.

We are a member of the Association of Medical Research Charities (AMRC). Membership is the hallmark of quality research funding. As members, we support the use of a rigorous peer review procedure in the allocation of our research funding. Our Research Advisory Board (RAB) is a multi-disciplinary panel of expert clinicians and scientists who assess applications for funding. AMRC carry out audit on research procedures every five years in order to check that they meet the expected gold standard. Universities, government and other funding bodies recognise AMRC membership as an indicator of quality. It also qualifies our grant funding for support from the government's Charity Research Support Fund which enables universities to increase the funds we award by around 20%. We also benefit from the AMRC training and development programme which supports continued use of best practice processes and procedures.

#### **Islet Cell Research & Transplant**



DRWF has made a considerable contribution to the funding of islet cell research and transplant in the UK and around the world. The DRWF Human Islet Isolation Facility at Churchill Hospital, Oxford plays a pivotal role in providing islets for research and transplant as part of a national treatment programme, the clinical element of which is funded by the NHS.

Three personnel are funded within the facility (around 30% of facility staff):

- Lab Manager due for review Jan 2021
- Deputy Lab Manager (post doc researcher) Funding proposal received Feb 2020
- Islet Transplant Administrator Funding proposal received Feb 2020

New funding proposals were received in February for the Deputy Lab Manager and Islet Transplant Administrator positions, as current awards terminated on 30th April, 2020. Having reviewed the proposals, the Board considered that it would be prudent to offer continued funding for 1 year only, giving us the opportunity to establish how Covid-19 would impact our income over the course of the year. This resulted in new awards being offered for 1 year from 1st May 2020 – 30th April 2021.

Subsequently, due to Covid-19, the Islet Transplant Administrator position was furloughed and later became vacant. The Deputy Lab Manager position also became vacant with no-cost extensions being agreed by the Board for both positions.



Prof Paul Johnson, Mrs Sarah Tutton and Dr Steve Hughes

## **Research Advisory Board**

Our Research Advisory Board comprises experts in a wide variety of research disciplines to ensure that all applications are assessed knowledgably and fairly. As a member of the Association of Medical Research Charities we are committed to maintaining a rigorous peer review process for the assessment of research applications, for which the Advisory Board are responsible. This process ensures that only the highest quality research at the best institutions receives DRWF funding. When we are awarding a DRWF Fellowship, we are also intent on rewarding determined and committed individuals who have a proven track record in diabetes research and can display an intention to continue working in the field. It is our hope that a DRWF Fellowship can serve as a significant and fruitful step in the career of a bright, young and ambitious researcher.

In December 2020 Professor David Matthews stood down as the Chairman of the Research Advisory Board after 8 years. He was replaced as Chair by Professor Angela Shore.

#### Chairman - Professor Angela Shore

Professor Angela Shore is the inaugural Vice-Dean Research for the University of Exeter Medical School, and was previously Interim Vice-Dean Research for the Peninsula College of Medicine and Dentistry since 2009. She is the Scientific Director of the NIHR Exeter Clinical Research Facility for Experimental Medicine and Associate Director for Experimental Medicine for the UKCRN diabetes research network.

Professor Shore graduated in Physiology from the University of Newcastle and was awarded her PhD for an investigation of the vascular mechanisms underlying fluid homeostasis in patients with Liver Disease. Following postdoctoral positions at the University of London where she expanded her research into the vascular aspects of hypertension, Professor Shore moved to the Postgraduate Medical School Exeter in 1987 to establish the clinical microvascular research unit funded by the Wellcome Trust. Currently Professor Shore's work which is funded by the British Heart Foundation, Diabetes UK, European Union IMI JU and NIHR investigates novel approaches to the identification of early vascular complications and patient stratification for cardiovascular risk.

She was appointed Professor of Cardiovascular Science in 2000.

#### Dr. Ian Salt PhD

Senior Lecturer at the Institute of Cardiovascular & Medical Sciences, University of Glasgow Ian graduated as a biochemist at the University of Bristol prior to gaining his PhD in beta-cell biochemistry from the University of Dundee in 1997. He held fellowships from the British Heart Foundation and Diabetes UK before taking up his current academic post at the University of Glasgow. Ian is currently a senior lecturer in the Institute of Cardiovascular and Medical Sciences at the University of Glasgow. His principal research interests are the molecular mechanisms that link diabetes, insulin resistance and the risk of developing cardiovascular disease.

#### **Dr Rob Andrews**

Rob Andrews is an associate Professor of Diabetes and Endocrinology at the University of Exeter and an Honorary Consultant Physician at Musgrove Park Hospital Taunton.

At the University he leads a group that researches the role that exercise and diet can play in the prevention and management of Diabetes. Ongoing studies include the long term effects of diet and diet and exercise interventions in patients with newly diagnosed Type 2 Diabetes (ACTID follow up); the role that sedentary time has in the metabolic characteristics of patients with Type 2 diabetes (STAMP 2); how exercise can affect beta cell function in Type 1 diabetes (EXTOD). He is also leading a project that aims to develop and pilot an education programme for patients with Type 1 Diabetes and health care professionals to guide insulin and carbohydrate adjustment for safe and effective exercise.

At Musgrove park hospital as well as doing regular Diabetes and Endocrine clinics he runs specialist adult, adolescent and paediatric sports clinics to give advice to sports men, women and children who have Type 1 diabetes.











#### **Professor Peter Jones**

Peter Jones is Professor of Endocrine Biology in the Diabetes Research Group at the Guy's campus of King's College London. Peter obtained his PhD at the National Institute for Medical Research (London) studying peptide hormones in the central nervous system. He started working on beta-cell function in diabetes as a postdoctoral fellow at Queen Elizabeth College in 1984. He was awarded an R.D. Lawrence Fellowship by the British Diabetic Association, followed by a Medical Research Council Senior Research Fellowship, after which he took up an academic position as Lecturer in Physiology at King's. He was awarded the British Diabetic Association R.D. Lawrence Lecture for 1997 and the Diabetes UK Dorothy Hodgkin Lecture for 2015 in recognition of his work on beta-cell function. His research interests remain with the beta-cell, with current focus on cell-cell interactions within islets of Langerhans, strategies for improving islet transplantation therapy for Type 1 diabetes and novel therapeutic targets for Type 2 diabetes.

#### **Professor James Shaw**

James Shaw is Professor of Regenerative Medicine for Diabetes at Newcastle University and Honorary Physician at the Newcastle Diabetes Centre and Freeman Hospital.

Following PhD completion as an MRC fellow with Kevin Docherty exploring gene and cell replacement therapy for diabetes, a Glaxo-Smith-Kline Senior Fellowship enabled him to move to Newcastle and join the world-acclaimed diabetes team there.

In addition to setting up a translational research laboratory he has established a regional insulin pump service, is a member of the Newcastle pancreas transplant team and clinical lead for islet transplantation. He is Chief Investigator for the multicentre Diabetes UK-funded HypoCOMPaSS RCT comparing optimised insulin analogue with pump therapy and conventional with continuous glucose monitoring in type 1 diabetes complicated by impaired awareness of hypoglycaemia. He led the successful United Kingdom Islet Transplant Consortium bid for dedicated NHS funding of this intervention as an established clinical procedure in 2008. This has underpinned a further multicentre Diabetes UK grant to prospectively evaluate biomedical / psychosocial outcomes in all UK islet recipients; and most recently participation in an international RCT evaluating the potential of a novel anti-inflammatory agent to maximise engrafted islet mass post-transplantation

His laboratory group is exploring mechanisms underlying loss of beta-cell mass and function in diabetes in addition to further innovations in islet transplantation. Potentially reversible beta-cell dedifferentiation as a common mechanism underlying beta-cell dysfunction in type 1, type 2 and cystic fibrosis-related diabetes in addition to post-transplantation is becoming a major focus, facilitated by recent Strategic Research Centre funding from the CF Trust. Progress has been considerably accelerated by inauguration of the Newcastle University Islet Isolation and Innovation Hub providing dedicated access to clinical grade research islet preparations.

#### **Dr Mark Evans**

Mark Evans is a University Lecturer in the Institute of Metabolic Science and Department of Medicine, University of Cambridge and an Honorary Consultant Physician in Medicine and diabetes at the Addenbrookes teaching hospital in Cambridge (Cambridge University Hospitals NHS FT).

He qualified in Medicine at St Bartholomews Hospital in 1988 and then subsequently worked and trained as a junior doctor at a number of hospitals in London and South East. He completed an MD at University of London and then spent 3 years at Yale University in USA (1999 to 2002) in the laboratory of Professor Robert Sherwin before returning to his current UK post in 2002.

His particular interests are in type 1 diabetes, structured education, devices and technology including insulin pumps, continuous glucose monitors and automated insulin delivery, hypoglycaemia and brain nutrient sensing.

#### **Dr Angus Jones**

Angus is a NIHR Clinician Scientist at the University of Exeter and an Honorary Consultant Physician in the Royal Devon and Exeter Hospital. His research focuses on clinical questions directly relevant to the management of diabetes. Interests include developing a stratified (or personalised) approach to the management of Type 2 diabetes, diabetes classification and the assessment of endogenous insulin secretion (C-peptide) in the clinical management of diabetes. He trained in medicine in London and worked as a clinician in London, Southampton, Malawi and Southwest England before undertaking an NIHR Doctoral Research Fellowship with Professor Andrew Hattersley in Exeter from 2011 to 2014. He received an NIHR Clinician Scientist Fellowship in 2016 to investigate and integrate biomarkers and clinical features for diabetes classification in adults, research that is using a combination of existing datasets, electronic healthcare records and prospective studies to develop a fully validated prediction model (clinical calculator) for diabetes classification at diagnosis. He was awarded the Diabetes UK Type 2 Diabetes Research Prize in both 2014 and 2015 and a European Foundation for the Study of Diabetes Rising Star Award in 2016.









#### One call for applications was issued in 2020:

#### Pump Priming 2021 (call announced November 2020 awarded in early 2021)

A total of 27 applications were received for consideration. These were reviewed by the Research Advisory Board and 6 awarded in 2021. The awards totalled £119,696

Six research awards made totalling £119,696

## 2020 Research Grant Awards

Institution: University of Exeter Recipient: Dr Joanne Boldison Project: Single cell isolations from pancreatic tissue for high-dimensional immune profiling Amount: £19,989

EXETER

**Summary:** Type 1 diabetes occurs when the immune-system attacks a healthy pancreas. Cells of the immune-system, invade the pancreas and insulin-producing cells in the pancreas are destroyed, which results in a loss of blood glucose control. To develop targeted therapy for individuals affected by diabetes, we need to understand the immune cells that invade the pancreas. In humans, access to the pancreas is limited, however the QUOD Bank supports studies by providing tissue samples post-mortem. First, we will setup a new method to separate immune cells from tissue samples of human pancreas to study different cell types, then develop sophisticated analyses to evaluate our data, so we are not bias. To complement our approach, we will use the current method to study pancreatic immune cells from donors with diabetes. This funding will establish a new way, using state-of-the-art technology, to evaluate the invading pancreatic immune cells in more depth..

Institution: University of Exeter Recipient: Dr Yu Hsuan Carol Yang Project: Interventional neurobiology to regulate hormone secretion: The critical role of galanin in pancreatic islet physiology Amount: £20,000



**Summary:** Since its discovery, the role of neurons in pancreas biology remains controversial. This is in part due to the lack of tools required for directly controlling pancreatic nerves and assessing the effects in living animals. Zebrafish studies are translatable to human development and disease given the high conservation of organs and physiology. I have established assays necessary for live zebrafish analysis of pancreas neurobiology and plan to implement these tools by targeting neurons that produce the galanin neuropeptide. The pancreatic islets are important for producing the hormones that help regulate blood glucose levels. Following the increase or decrease in galanin signals, we will visualize the effects on pancreatic islet formation and activity. The tools developed from these studies will be used to help us understand neural control of pancreas biology (including the regulation of hormone release) under normal and diseased states.



Institution: Nuffield Department of Primary Care Health Sciences, Oxford Recipient: Dr Nerys Astbury Project: Exploring the Long-term health Outcomes following a PrEgnancy with Gestational Diabetes Mellitus (ELOPEGDM)

#### Amount: £19,985



**Summary:** Gestational diabetes is a form of diabetes that affects pregnant women. It usually goes away after birth. Getting GDM increases the risk of problems during pregnancy and birth. There is also evidence that women who develop GDM are at much higher risk of developing conditions like type 2 diabetes. But the effect of getting GDM on other conditions as well as on the health of the baby has not been widely investigated. Using one of the UK's largest databases of routine healthcare records we will measure the effect getting GDM has on health and disease risks in mothers and their babies. Insight into the full effects that GDM has on women and their babies will provide a boost to research efforts for the early detection, prevention and treatment of GDM.

Institution: University of Roehampton Recipient: Dr Astrid Hauge-Evans Project: A novel and sex-specific role for LEAP2 in the regulation of pancreatic islet function Amount: £20,000



NOTTINGHAM

TRENT UNIVERSITY

**Summary:** Both obesity and increased blood sugar are important factors in the development of type 2 diabetes (T2D). They are controlled by hormones such as insulin and ghrelin. Ghrelin stimulates food intake, promotes weight gain and inhibits insulin secretion from islets in the pancreas, which in turn leads to higher blood sugar levels. Targeting ghrelin action may therefore be a way of preventing or treating obesity and/or T2D, but so far no useful pharmaceutical blockers of ghrelin have been discovered.

Importantly, a new protein from the liver and small intestine has now been found to counteract the effects of ghrelin. Our initial experiments suggest that this small protein, Liver-Enriched Antimicrobial Peptide-2 (LEAP2), stimulates insulin secretion. Interestingly, this action differs between males and females. Our study will investigate the role of LEAP2 in regulating blood sugar levels, focusing on sex-specific differences and the way this peptide affects pancreatic islet function.

#### Institution: Nottingham Trent University

Recipient: Dr Richard Hulse

**Project:** Functional significance of HIF1 activated dorsal horn sensory neurons in the manifestation of type 2 diabetic neuropathic pain

Amount: £19,760

**Summary:** We have shown that in type 1 and 2 diabetes, if the spinal cord sensory neurons fail to receive blood, they become damaged and longlasting pain develops. We think that pain develops in diabetes as reduced blood flow prevents oxygen getting to the spinal cord. Pain signals are generated in our hands and feet, travel along sensory nerves until they reach the spinal cord, where pain information is filtered. Spinal cord sensory neurons normally turn this signal down or off. In diabetes these neurons lose their ability to turn pain signals off, resulting in people with diabetes feeling pain. It is currently unknown why these neurons change their function.

HIF1 is found in neurons when there is reduced oxygen. A mouse model of Type 2 diabetes will be used and in these animals I will stop them producing HIF1 in the neurons, to prevent diabetic neuropathic pain from developing.

### **Institution:** Newcastle University **Recipient:** Dr Guy Taylor

**Project:** REBEL - CV study: Does Residual &-cELL function and exercise offer synergistic protection against hyperglycaemic induced Circulating Vasoprotective dysfunction in type 1 diabetes? **Amount:** £19,696



**Summary:** For people with T1D, exercise is beneficial, potentially reducing the progression of diabetes-related complications. Many people (up to 80%) with T1D still release small amounts of insulin together with C-peptide, a molecule involved in the creation of insulin, from the pancreas. This may also help protect against diabetes complications, although exactly how is currently unknown. One possible way is through endothelial progenitor cells (EPCs), which circulate in the blood and repair blood vessels; with T1D associated with having lower numbers of these important cells. We have recently discovered that individuals who no longer produce any insulin/C-peptide are not able to increase the number of EPCs after exercise, compared to those who still produce insulin/C-peptide from the pancreas. We propose exploring how having some ability to still make insulin/C-peptide may influence how well EPCs work in normal and high blood glucose conditions, and whether this works in combination with exercise.

## Income: Expenditure Profile 2020

The information presented here is not the full statutory accounts but a summary of the information which appears in the full accounts for financial year ending 2020. This summary information may not contain sufficient information to allow for a full understanding of the financial affairs of the Diabetes Research & Wellness Foundation (DRWF). The full statutory accounts can be supplied on request or accessed via the Charity Commission website by entering the charity registration number 1070607 in the search box.



## Highlights from 2020





DRWF joined the nation and took part in the 2.6 Challenge, with the "My cup of tea challenge" and asked people to donate £2.60, the average price of a cup of tea, and post a selfie drinking it. £600 was raised at this event.

Nichola Daly with her baby Millie and her mum Julie Daly. Nichola was due to take part in the Great Birmingham Run which was cancelled due to Covid-19. She still completed the run at home and raised over £1500.



Chris Rivinus and his daughter challenged themselves to climb 26 000 steps as their 2.6 challenge and raised over £600.



England cricket legend Sir Ian Botham OBE lead the call for DRWF Research support during the Covid-19 pandemic and raises £1147. Sir Ian is no stranger to the challenges faced by families with diabetes – his daughter Becky has type 1 diabetes.

## How to support us

#### YOUR GENEROSITY CAN HELP OUR DREAMS BECOME A REALITY

We don't receive any government income and rely entirely on donations and fundraised income to support our work. The researchers we fund work tirelessly to improve our knowledge of diabetes; explore new treatments and management pathways, on the long road towards our ultimate goal of a CURE. Alarmingly, diabetes continues to grow in pandemic proportions around the world and with almost 5 million people living with diabetes in the UK, our work is increasingly important.

Your support enables us to fund the research that we believe will make diabetes a thing of the past. We are investing in a brighter future for people with diabetes, **WILL YOU?** 

If you would like to get involved in our fundraising activities, perhaps participate in a pre-planned challenge event, or hold an event in your local community with family and friends. We would love you to **JOIN US!** 

For fundraising related volunteering, please contact our Community Fundraiser, Karen Scott, on **02392 637808** or email **fundraising@drwf.org.uk** 

For general charity related volunteering, please contact our Office Manager, Steve Lille on **02392 637808** or email **steve.lille@drwf.org.uk** 



#### ALTERNATIVELY YOU CAN -

Make a one-off donation or set up a regular giving direct debit on our website **www.drwf.org.uk/get-involved/donate** 



Play our lottery, a great way to be in with a chance to win a prize and make a donation at the same time **www.drwf.org.uk/lottery** 



Talk to your employer about their Corporate Social Responsibility (CSR) policy, most have one. They may be encouraged to match-fund your fundraising sponsorship. This is a great way to double the money you raise!



It is sometimes hard to understand how making a donation today, or getting involved in a fundraising event can make a difference in the future, but it is this combined effort that drives change forward.

You can visit our website for more inspiration on how you can help us find a cure and create a world without diabetes.

We are investing in a brighter future for people with diabetes, and you help us to do that!

## PLEASE DONATE!

### £10 A MONTH funds 2 DAYS

of a yearly research grant, to find better ways to manage diabetes and ultimately a cure

## 2020 Charitable Trusts and Grants Received

We are very grateful to the charitable trusts and foundations who have so generously invested in the DRWF, facilitating the expansion and continued development of our education and research programmes.

- The Tonge Family Trust Fund
- D S Cohen Charitable Trust
- The Potel Charitable Trust



## Legacy notifications received in 2020

Legacies are vital to every charity as they provide the bedrock financial support we rely upon to look ahead and progress effectively. Leaving a 'Legacy of Hope' enables DRWF to continue supporting leading researchers and those living with diabetes.

#### **Eunice Smith**

**Margaret Morrison** 

**Albert White** 

**Doreen Griffiths** 

**Ernest Evans** 

**Joel Hawthorne-Nesbitt** 

**Darek Wood** 

**Peggy Morris** 

**Arthur Wopling** 

**Roger Swain** 

Marjory Sigrist Harold Lucas Norman Bacon Marina Bailey Martyn Frost Brenda Millatt Ruth Grace Joel Mandell John Bromley Zelda Statman Doreen Robinson Ronald Harsant Alice Frost Patricia Bill Iris Redgrave Joyce Burdett Albertha Greatorex William Gibson Mary Marshall



## Gifts given in memory of a loved one

Donations given in memoriam are a positive way of celebrating the life of someone special and help DRWF continue with their long-term mission - to find a cure for diabetes. Giving 'in memory' is a distinctive way to remember and honour family and friends.

> Nicholas Alexandrou DorisHoran Norman Bacon Lawrence Barrie Alan Beaney **Gerry Begg Carol Calladine Joyce Carter** Mahendra Cheta MrCoffey P Comer JacquelineDuff **Ernest Eddishaw** C Patel Anagnostis Hadjifotiou **Rev Peter Hayward**

Eric Howard Libby Howitt Valerie Jones Peggy Joyce Sean Kelly Rai Lawson Betty Lockley Diane Longmore **Robert Macauley Rose Mills** Gary Ounsworth

Marshall Pennington

Sukhlal Rattu **Bryan Reburn** 

**David Poulton** 

Mary Rose

Audrey Sale

Barbara Stern

PJM Sullivan

Laxani Tolani

**Dorothy Watson** 

Ivan Watts

Irene Wey

Jessy Wheatley

**Colin Woodman** 

Our work is made possible only through our supporters' commitment and generosity for which we say a heartfelt THANK YOU!

## Our focus in 2021 and beyond

Much has been learned during the difficult months of the pandemic and we have identified a number of vulnerabilities in our structure and activities. Investment is required in technology, expertise and resources and this will be addressed through designated funding which has been set aside to support our 3-year Growth Strategy (2021-24). In doing so, we will be better positioned to weather future disruption thereby building resilience and sustainability.

We continue to closely monitor -

## Impact on current and future activities and operation of the charity, its finances and fundraising

Communication has been key throughout the pandemic months and the health and safety of the DRWF team has been paramount. Providing reassurance through clear communication at regular intervals was fundamental to ensuring that we continued to work cohesively, whilst understanding that the crisis was having an immediate and sustained effect on people's lives beyond the workplace. To this end, we ran two employee surveys between April and December 2020 focused on health and wellbeing to identify anxiety, stress and fatigue helping us to establish the need for additional support.

We furloughed 3 staff during the year, all of whom are now back to full contractual working arrangements. Team members are still working from home and we are currently conducting an impact assessment to understand the feeling around returning to usual working practices if, as is currently advised, covid-related restrictions are lifted entirely in mid 2021.

We are fortunate to have arrived at this point without having encountered any significant illness in our team and we are very grateful for that.

Ongoing communication through multiple channels is helping us to establish how the public will/are starting to re-engage with community activities and this will be vitally important to steer our approach to digital and in-person campaigns and events, to ensure that we maximise opportunity and continue to meet the needs of our beneficiaries and stakeholders.

#### **Growth Strategy**

Through the work of our Core Fundraising Group we have identified numerous ways in which to refine and develop existing fundraising activities to enable us to strengthen and diversify income streams.

2020 has shown us the need to be agile, integrated and adaptive in our approach. Whilst the past year has been incredibly challenging, we have been resourceful where possible and gained invaluable experience that will help us reconfigure our approach to 'what good looks like' for DRWF, our supporters and beneficiaries. To this end, we have scoped out a 3-year growth strategy which clearly defines our vision, mission and values and the direction that we will take to build a robust organisation that is well-positioned for the future.

The strategy defines our key activities to maximise opportunity in -

- Diabetes Wellness Network (volunteer and community fundraising activity)
- Diabetes Wellness Programme (our core programme activities in support of people with diabetes)
- Research Funding (redefine our research strategy to maximise opportunity for collaboration with like-minded partners)

Designated funding has been allocated to support the growth strategy in 2021.



## BECAUSE OF YOU

THANK YOU FOR SUPPORTING DRWF

25

Through our awareness raising, information provision and educational support programmes, we enable people with Type 1 and Type 2 diabetes to learn more about their condition. We provide the tools to motivate, empower and engage people to take a positive approach to their self-care. Through supported self-management they can reduce the risk of associated complications, improve quality of life and control their diabetes effectively.

Don't let diabetes control you!

We fund some of the best and brightest diabetes researchers in the UK and around the world. We support Fellowships, Open Funding Projects, Institutional grants and Studentships. We fund peer-reviewed work that we believe will help us to understand the causes; find new treatments; provide insight into effective therapies and management strategies and ultimately, find a cure for diabetes.

You help us to achieve these objectives -

THANK YOU!

## to find out more...

Diabetes Research & Wellness Foundation, Building 6000, Langstone Technology Park, Havant, PO9 1SA



www.drwf.org.uk

Registered Charity in England & Wales, Registration no: 1070607 Company no: 03496304 Company Limited by Guarantee

Statistics/ Figures stated correct at FYE 2020

