## LET'S MAKE TIME



Everyone has the same number of hours in a day, but people living with diabetes must dedicate a significant amount of their time and energy to managing their condition. They are constantly thinking about their blood sugar levels, monitoring their insulin intake, and facing interruptions in their daily tasks. Diabetes demands their attention and can often take up a large part of their day.

At Diabetes Canada, we understand the profound significance of time, especially for those living with diabetes. Our annual impact report celebrates the collective efforts of everyone who dedicated themselves to making every moment count this past year. From the generosity of our donors and corporate partners to the unwavering commitment of our staff and volunteers to the tireless work of our researchers, 2023 was infused with purpose and determination.

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#### Welcome

#### A message from the Chair of the Board



I'm grateful to have had the opportunity to be so deeply involved in a cause for which I'm so passionate."

It's been an absolute privilege to serve as Diabetes Canada's Chair of the Board. Now that my tenure is done, I want to express my gratitude to everyone who has been part of the journey. Thank you to our supporters, staff, volunteers, healthcare professionals, and Board members for continuing to step up year after year.

With your patience and support, we navigated the turbulent waters of the pandemic in 2021 and righted the ship in 2022 — putting systems and strategies in place to ensure Diabetes Canada more effectively delivers on the mission you've entrusted to us.

In 2023, we set sail! **Diabetes Canada invested more in research than ever before**, building on our reputation as a leading research funder and attracting the brightest researchers to this cause. We also put a new six-year (2024-2029) research strategy in place that gives us a road map for the future.

To ensure that the research we fund, the education programs we offer, and the health policies we fight for have a direct impact on the lives of people living diabetes, we engaged more deliberately and actively with people with lived experiences in 2023. In addition to amplifying the voices of the diabetes community, we also made strides to change the conversation about diabetes. Addressing the stigma and misconception around diabetes is vitally important and will continue to be a focus going forward.

As 2024 begins, and I step away from my duties with the board, I do so with confidence and optimism, knowing that **everything is in place to reach for new horizons**. The time is right for Diabetes Canada to have a significant impact on national health policy and healthcare delivery, on community support, and in the lives of people living with diabetes.

I'm proud of what we've accomplished together and hopeful for what the future holds. Thank you again for being part of this exciting journey.

Dr. Peter Senior, Chair of the Board

#### A message from our President & CEO



Thank you for your support and for taking the time to make a difference in the lives of people living with diabetes."

When I reflect on what we accomplished together in 2023, one word comes to mind: **hope**.

Hope that our increased investment in diabetes research will lead to new technologies and more effective treatments. Hope that the Framework for Diabetes in Canada will lead to improved care as well as access to medicines, devices and supplies. And hope that changing the conversation around diabetes will lead to better emotional and mental health for those living with the condition.

Last fall, we asked close to 2,000 people living with type 1 and type 2 diabetes to share the kind of stigmas and misconceptions they face and the impact that has on their wellbeing. Many of them shared with us that they feel judged because of their diabetes, some even saying that people think they brought it on themselves. It's no wonder so many of us who live with diabetes still have trouble talking openly about it. Clearly, it's time to **change the conversation**, and Diabetes Canada is at the forefront of those efforts.

In 2023 we partnered with JDRF to launch a new mental health practitioner program specific to the social and psychological challenges of living with diabetes. Helping people who live with diabetes needs to include helping the team that surrounds them. That's why we also continue to support healthcare providers through initiatives such as **Diabetes Simplified** — a new program that helps make recommendations from the **Clinical Practice Guidelines** more accessible.

Let me share three more reasons that 2023 was full of hope. Thousands of people living with diabetes found connection and education through our virtual event conference, **Diabetes Canada Connect**. Hundreds of children and youth living with type 1 diabetes found friendship and empowerment at **D-Camps**. And through events like **Pump Couture**, people of all ages helped raise funds while putting diabetes proudly on centre stage.

Each milestone achieved and each barrier overcome is a testament to the power of your support. Thank you again for sharing your time, generosity and courage to help bring hope to people who live with diabetes.

Laura Syron, President and CEO







## Key achievements in 2023

With the support of generous donors and partners like you, Diabetes Canada continued to make time to improve lives through education, advocacy and research.

## ► THE GO-TO SOURCE FOR EDUCATION & CONNECTION

The **1-800 BANTING** Information and Referral team fielded **15,173 incoming calls and emails**, spending approximately **48,633 minutes** providing people who are living with diabetes with compassionate support, helpful information and access to important resources.

#### D-CAMPS ARE A HIT

At our **Diabetes D-Camps**, **985 children and youth living with type 1 diabetes** made important
connections and learned to manage their condition
better on their own. Within a day of opening
registration, 70% of D-Camps sold out. Our Family
Camps were popular too, attracting **855 family members** from coast to coast. Thanks to your generous
support, we provided more than **\$230,000 in financial assistance** to help more children experience the joy of
camp. To see the impact of your support, read Diwan's
story on page 14.

#### INCLUSIVITY TAKES CENTRE STAGE

Building on the popularity of the inaugural **Pump Couture** in 2022, we took the diabetes fashion show across the country, with stops in Vancouver, Saskatoon, Toronto and Halifax. Through the support of a great committee, models, sponsors, emcees and community partners, Pump Couture 2023 was a success. Created to bring visibility to people living with diabetes, the event welcomed over 100 models to the runway and **raised more than \$350,000 to help send 140 children living with diabetes to D-Camps**. See page 16 to meet one of our youngest Pump Couture models.



I've been downsizing for a big move and struggled to find organizations accepting donations. I was thrilled to discover Diabetes Canada's clothing donation program. Their convenient home pickup and easy online scheduling made the process a breeze. Being able to donate clothes, books, and small household items not only eased my move, but also supported a worthy cause."

- National Diabetes Trust supporter

## ► THE FRAMEWORK FOR DIABETES GATHERS MOMENTUM

One year after the federal government's tabling of the **Framework for Diabetes in Canada**, great progress has been made. In June 2023, the Public Health Agency of Canada announced the investment of nearly **\$1 million over three years**, which will allow Diabetes Canada to begin the critical work of implementing the recommendations and strategies laid out in the Framework. Read more on page 24.

#### ▶ SUPPORTING HEALTHCARE PROFESSIONALS

Diabetes Canada's healthcare professional webinars were viewed more than 5,000 times while the podcasts had over 3,000 downloads in 2023. The multi-disciplinary Vascular Congress brought together 1,400 speakers, 76 exhibitors and 3,798 delegates including healthcare providers, researchers and people with lived experience. Read more on page 27.

#### **▶ LIFE-CHANGING DIABETES RESEARCH**

Thanks to our generous supporters and partners, Diabetes Canada invested **\$7 million in research** through the End Diabetes Awards. Together, we funded **76 research projects** involving over 260 researchers at 20 different research institutions. You can read about some of these exciting studies on page 10.

#### **▶ DECLUTTER FOR DIABETES**

Each year, Diabetes Canada diverts up to 100 million pounds of clothing and household items from landfills, saving over 1 billion kWh of energy and reducing our donors' carbon footprint. Donated items collected and diverted from landfill translated into \$2.9 million to support diabetes research, education, programs and advocacy.



## Changing lives today and shaping a better tomorrow

In 2022, Diabetes Canada initiated a three-year strategic plan to ensure we can more effectively deliver on the mission you've entrusted to us. As we wrap up year two, we are happy to report on our progress and plans for 2024.

## INVEST IN MORE LIFE-CHANGING DIABETES RESEARCH

To achieve our vision of a world free of the effects of diabetes, we need to harness the transformative and combined power of technological, medical, and scientific research. That's why, with the help of supporters like you, **Diabetes Canada invested over \$7 million in diabetes research in 2023, more than tripling our investment in diabetes research since 2021**. Each of the 76 projects funded has the potential to unlock new insights and breakthroughs in the field of diabetes management, care, and risk-reduction.

Here are a few highlights of the exciting research projects we funded, with your support:



**Dr. Valeria Rac's** research focuses on preventing vision loss from diabetic retinopathy. Diabetic retinopathy is a serious complication of diabetes, accounting for 80% of blindness in people with diabetes in Canada. Early detection through regular screening can help prevent vision loss; however, not everyone living with diabetes has equal access to eye care professionals. Dr. Rac is using provincial healthcare data to identify unmet care needs and make that information available to communitybased doctors and nurses. This project is a crucial step towards the creation of an equitable national diabetic screening program.

These new awards will energize the dynamic research community and add to the growing excitement about identifying new treatments for people living with diabetes on the immediate horizon."

- Dr. Rob Screaton, Co-Chair of Diabetes Canada's National Research Council



**Dr. Mary Jung** is implementing a diabetes prevention program to improve health outcomes in underserved communities. Using evidence-based counselling techniques, the goal of the Small Steps for Big Changes program is to empower people to make lasting dietary and exercise changes to lower their risk of developing type 2 diabetes. After a successful launch in Kelowna, the program was expanded to northern communities in B.C. and next it will be expanded across Canada. Dr. Jung hopes to make Small Steps for Big Changes freely accessible to all people living with prediabetes across Canada.



**Dr. David Campbell** is working to reduce inequitable health barriers for people experiencing homelessness. Managing diabetes is difficult, requiring medications, a strict diet, regular exercise, monitoring blood sugar levels, and access to a healthcare team. This is especially challenging for people experiencing homelessness. In Dr. Campbell's study, **members** of the community act as co-researchers, helping to collect stories of stigma related to diabetes and homelessness, and explore the knowledge and attitudes of the frontline staff in the shelter system. The study's goal is to empower participants to help find solutions to the challenges they face.



b Dr. Nicole Woods and her team are looking to improve the detection of diabetes-related foot wounds for people living with diabetes who are disadvantaged.

Foot and leg wounds from diabetes-related complications account for more than 70% of lower limb loss in Canada. You can read more about Dr. Woods' research on the next page.

My biggest message is one of absolute gratitude to Diabetes Canada and its donors. This work is so important and touches so many lives."

- Dr. Nicole Woods

## Best Foot Forward: Foot screening to avoid limb loss

Diabetes can cause nerve damage (diabetic neuropathy) and poor blood flow or circulation to the legs and feet. As a result, people with diabetes are less likely to feel a foot injury, such as a blister or cut. Diabetes can make these injuries more difficult to heal. Unnoticed and untreated, even small foot injuries can quickly become infected, leading to serious complications such as limb loss.

Diabetes is the leading cause of all non-traumatic amputations below the knee in Canada. It is estimated that **85% of these amputations could be prevented** with early intervention methods.

The Clinical Practice Guidelines recommend that healthcare providers perform foot examinations annually for people living with diabetes and more frequently for people at higher risk of complications, such as those experiencing diabetic neuropathy. However, far too many people living with diabetes don't have access to primary care providers and in fact many people have never had a foot exam.

That's where Dr. Woods and her team come in. A healthcare education scientist, Dr. Woods has partnered with a team of chiropodists (foot and lower limb health specialists), to develop a foot screening program for people who are disadvantaged in Ontario. This includes people who live in rural communities with no access to specialists, people in Black and Indigenous communities as well as newcomers to Canada who are less likely to have a primary care physician, and people who are unhoused.



"We can't expect people who are disadvantaged to make their way to us," Dr. Woods explains. "We need to bring the care to them." The team's out-of-the-box solution? Train the people that are already on the frontlines of care such as public service workers (PSWs), community and home care workers, and support staff who work in homeless shelters and newcomer centres.

"These unregulated healthcare providers are the ones who are more likely to have routine access to feet. They're the first line of intervention, so let's give them a chance to learn these skills and catch some of these potentially dangerous wounds ahead of time," Dr. Woods explains.

With funding from Diabetes Canada, Dr. Woods and her team are testing an online curriculum that trains community health workers to identify anything that might turn into a wound, as well as wounds that are already there that could progress to the point of infection. Importantly, they'll also be trained about what to do next. Indeed, part of the research project is to develop a referral pathway.

"Ultimately, we want more people getting their feet looked at to prevent consequences such as limb loss that affect quality of life," says Dr. Woods.

CPG source: https://www.diabetes.ca/advocacy---policies/our-policy-positions/amputation-prevention





#### Looking ahead with determination and hope

In 2023, Diabetes Canada undertook broad consultation with the diabetes community to develop a new research strategy. The result is a six-year plan designed to grow research funding, attract more researchers, and maximize impact. Our goal, with your support, is to award \$60 million in new research funding by 2029 aimed at prevention and treatments that improve quality of life, enhance access to care, and uncover breakthroughs to End Diabetes.

# Meet D-Camps participant, counsellor, and passionate advocate, Diwan Minocha

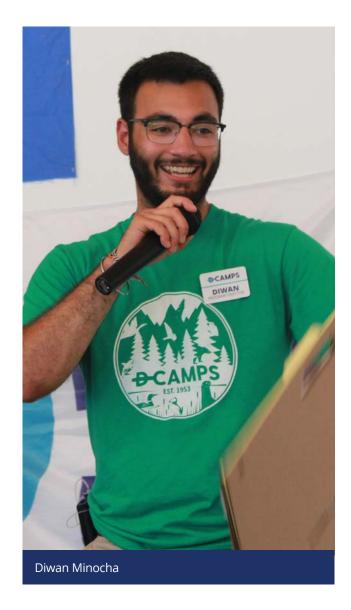
Diwan was diagnosed with type 1 diabetes when he was seven years old. Living in a small town, he didn't know anyone else who had diabetes. "None of my teachers or my classmates knew much about diabetes. It was very difficult for me and my parents to navigate that."

An avid hockey player, Diwan struggled to manage his blood sugar levels. "If I went low in the middle of a game, I'd have to come off the ice and sit out for 30 minutes," he says. "My teammates didn't understand why I had to do that. It was definitely isolating."

When Diwan was nine, he went to his first D-Camp. "I fell in love with camp and never wanted to leave," he says. "Knowing that all the other 60 kids were going through the same things as me was such a relief. He also found it reassuring to know that if he experienced a low during an activity like swimming or canoeing, expert medical help was close at hand. A highlight for Diwan was receiving a First Time Award for changing his insulin pump site on his own.

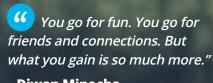
Diwan's experience at D-Camps made such an impression on him that he decided to participate in Diabetes Canada's Leadership Development Program (LDP) and become a camp counsellor. "As a camper, I felt supported and was encouraged to step out of my comfort zone. D-Camps are a judgement free zone. Kids can be as expressive as they want and explore new ideas without the fear of being judged," he says. "I wanted to give that back."

His involvement didn't stop there. During COVID, he was a Dose of D-Camps instructor and in the



past few years he has taken on the roles of Media Specialist, Program Director and Assistant Director for the Atlantic Camps. Today, Diwan is studying to become a Physician's Assistant and hopes to join the medical staff at D-Camps in the future. "Many of the skills I developed at D-Camps — empathy, compassion, listening, communicating and public speaking — are really helping me in my career path and in life," he says.

Knowing that donations from individuals and corporate partners make D-Camps possible, Diwan wanted to share the following message: "Please keep supporting D-Camps. We couldn't run them without your support. Children and young people with type 1 diabetes are getting experiences they wouldn't have outside of camp, thanks to you."



- Diwan Minocha

#### In our 70th year of running D-Camps:

- ▶ We held **9** summer D-Camps and **12** family camp programs across the country
- ▶ **24%** of summer camp attendees were new campers
- ▶ **67** youth participated in the Leadership Development Program
- ▶ **100%** of campers felt that camp helped build self-esteem which will help them live better with type 1 diabetes
- ▶ **100%** of staff feel they made a positive impact on campers

Source: D-Camps Stewardship report

### Meet diabetes advocate and Pump Couture model, Chloe Pow

Diagnosed with type 1 diabetes at the age of four, Chloe and her family faced a lot of stigma at first. Many people, even those close to the family, thought Chloe got diabetes because she ate too much sugar. And kids in Chloe's kindergarten class thought they could catch diabetes from her.

Together with her dad, Conrad, Chloe is determined to fight the misconceptions around diabetes. "People need to know that anyone can develop diabetes. And that if you do, you can still do everything you want to do. It hasn't limited me," she says.

Today at age 10, Chloe is a fierce advocate for children living with diabetes, participating in diabetes-related videos, advocacy campaigns and Pump Couture fashion shows. Chloe modeled in her first show in 2022 when she was just seven years old. This year will mark her third Pump Couture. "My favourite part is striking a pose at the end of the runway so that people can see the continuous glucose monitor on my arm," she says.

"Seeing people proudly display their devices sends such an important message, especially for young people who may be struggling with body image," says Conrad. "Hopefully when they see the audience's reaction and hear the applause, they'll see that they don't need to be self-conscious."

From the beginning, Chloe has had a positive attitude about wearing diabetes devices. She's even helped mentor other children through the process of getting a continuous glucose monitor and insulin pump. "I want them to know they don't need to be scared and that these devices don't change who they are," she says. Adds Conrad, "the pump doesn't define who Chloe is, it keeps her alive. She understands that and wears it proudly."



Chloe Pow (left) with fellow Pump Couture model Natasha Stanford









## Meet dedicated donor, Valerie Walsh and her daughter Andrea

Valerie and Paul Walsh's connection to Diabetes Canada goes back to the very beginning. Paul's grandfather met Banting and Best in 1925, when the doctors knocked on his door. They knew him from social circles and upon hearing he had diabetes, offered him their newly discovered treatment of insulin.

In 1960, Paul's brother Jim was diagnosed with type 1 diabetes. And in 1997, Valerie and Paul's daughter Andrea was diagnosed with type 1 diabetes, at the age of 21.

Andrea hadn't been well for a long time, but her condition went undiagnosed for many years. Even when lab results showed an elevated blood sugar level, there was no official diagnosis, nor any sense of urgency. "The doctor simply said there should be a follow up," says Valerie. At the eventual follow up appointment, Andrea's A1C was 11%, and she was rushed to the hospital.

"The whole trip to the ER was so scary. But when they moved her to the ICU, we were terrified. They were trying to start an IV and her veins kept collapsing," recalls Valerie.

Andrea remembers it a little differently. "It was painful, but I was just so relieved to have a diagnosis, and to know that treatments were available," she says. "I was nervous about doing my first insulin injection on my own. But I was 21, an adult. I knew I needed to do it, so I did it. From the beginning I was determined to take control of my diabetes." Andrea was also an early adopter of technology, getting an insulin pump as soon as it was available.

Shortly after Andrea's diagnosis, Valerie and Paul became monthly donors to Diabetes Canada. And recently, Valerie made the switch to gifts of securities. "I want to support research to keep finding more effective treatments and advance technology such as insulin pumps that have made such a difference in Andrea's life," she says. Valerie is also glad to know her donations help fund Diabetes D-Camps which bring children such joy and peer support, as well as education programs for people living with diabetes

and healthcare providers. "There have been huge advancements in our understanding of diabetes between when my brother-in-law was diagnosed and when Andrea was diagnosed," says Valerie.

"Updating information for people who live with diabetes is vitally important," agrees Andrea. "If there are things I can be doing better, that can save me from complications, then teach me. Even if it's 20 years later. Maybe I couldn't have done it before, but I can now."

To further her impact, Valerie has decided to leave a gift to Diabetes Canada in her will. Knowing all too well that there is a genetic factor to diabetes, Valerie wants to do what she can for future generations including her own grandchildren who may be at risk. Additionally, knowing that there are tax benefits associated with incorporating charitable gifts into estate planning, Valerie can ensure a secure future for her heirs and contribute to a cause she deeply cares about.



There's a great sense of contribution when we give beyond ourselves."

- Valerie

### Meet Advisory Committee member, John Farrell

John's son Ryan was diagnosed with type 1 diabetes in 2006, while attending university. A friend of Ryan's who lives with diabetes noticed that Ryan wasn't looking well and thought he recognized the symptoms of diabetes. "They tested Ryan's blood sugar, and it was dangerously high. He ended up in the ER," says John. After Ryan's diagnosis, John decided to have a blood sugar test too and discovered he had prediabetes.

Those first few years were particularly challenging for Ryan and John as they struggled to understand diabetes and prediabetes, their impact and how best to manage the conditions. "Early on, I felt adrift and unsupported. I didn't know where to turn for information," says John.

After doing much of his own research, John started eating better and monitoring his blood sugar. He and Ryan also took up running. Nonetheless in 2014, John was diagnosed with type 2 diabetes. "The reality is, anybody can develop diabetes," says John. "There's a real misconception out there that it's because people eat too much junk food or are overweight. But look at me, I compete in half-marathons and I still developed diabetes."

With his experience as both a person who lives with type 2 diabetes and as a caregiver, John jumped at the chance to join the People with Lived Experience Knowledge and Connection Advisory Committee.

Always one of the first to volunteer, John has provided feedback on: videos explaining blood sugar levels to people who are newly diagnosed; the information resources available on Diabetes Canada's website; the development of a virtual peer support program; and



John Farrell (left) with his daughter Caitlin and son Ryan

the prioritization of topics for the Diabetes Canada Connect forum. John even participated on a panel about exercise and keeping motivated.

"I volunteer because why wouldn't I," says John. "I have diabetes. My son has diabetes. Every 3 minutes, someone in Canada is diagnosed with diabetes. I want to help. I need to help."

There's still an awareness and knowledge gap when it comes to diabetes. If I can help Diabetes Canada fill that gap, then I'm going to do it."

- John

### Make time for diabetes knowledge and connection

In addition to our current programs, we launched three new initiatives to help meet our goal of scaling up diabetes knowledge and connection for people living with diabetes.

- Diabetes Deep Dives an in-depth video series about diabetes management, featuring experts and people with lived experiences sharing practical tips.
- Diabetes Open Hours a series of live Q & A-style webinars.
- ▶ **Diabetes Canada Connect** a week-long virtual diabetes education and community event.



#### **OUR FIRST DIABETES CANADA CONNECT EVENT WAS A SUCCESS**

This past November, over 2,700 people living with diabetes and caregivers participated in the inaugural Diabetes Canada Connect. The goal of the event was to build stronger support networks and foster learning and empowerment in diabetes management.

### 91% of attendees

said they learned something new and gained valuable information.

- I learned more, loved the variety of events and this helps me be more supportive of my family member."
- Thank you! As a newly diagnosed type 2, these sessions have been invaluable. I cannot tell you how appreciative I am!"

### 86% of attendees

stated they plan to make changes to their diabetes management.

Thank you so much for this opportunity. I was diagnosed with type 2 ten years ago and have lost motivation gradually but this session really motivated me to stick to the regime and manage better."



#### The Diabetes Knowledge and Connection Advisory Committee

In 2023, we enhanced and advanced our efforts to be the goto place for diabetes knowledge and connection through the creation of a new Diabetes Knowledge and Connection Advisory Committee. The role of the committee, which includes people with lived experience and caregivers, is to provide input and feedback on Diabetes Canada knowledge and connection strategies and programs in order to help people thrive at every stage of their diabetes journey.

## STRATEGIES FOR 2023 AND BEYOND INCLUDE:

- Scale up and further integrate current programs, including our 1-800 BANTING information and referral line, the Diabetes Education Line, Diabetes Canada Connect, plus webinars and videos.
- Build more capacity and improve efficiencies of D-Camp programs for children, youth and families living with type 1 diabetes.
- Create an online diabetes community where people with lived experiences can share information and develop peer-to-peer connections.
- ▶ Ensure educational resources are culturally appropriate and available and accessible to diverse audiences.
- Identify gaps in the patient journey and develop resources and opportunities to address those gaps.





Last fall, Diabetes Canada conducted a national survey on the social experiences of individuals with diabetes, speaking to close to 2,000 people with lived experiences. The goal of the study was to delve into the social and psychological dynamics impacting the lives of people navigating diabetes management. What the survey revealed is quite alarming.

The results show a clear indication that diabetes not only poses significant physical and emotional challenges but can also give rise to stigma and discrimination. The misconceptions, judgments, and biases that people with diabetes encounter can perpetuate a cycle of isolation and inequality.

"How people without diabetes treat individuals living with diabetes significantly impacts their well-being. As experiencing blame and shame from others increases, those living with diabetes report greater levels of diabetes distress," explains clinical psychologist and survey administrator, Dr. Michael Vallis.

The survey also revealed significant variations in experiences related to stigma, discrimination, and

I found it hard to tell people I had diabetes. One of the first friends I confided in asked me, 'do you have the genetic one or the one you gave yourself?' It really knocked me back. It took a long time for me to tell the next person."

- Laura Syron, President & CEO, Diabetes Canada overall well-being among people living with type 1 diabetes vs. type 2 diabetes, as well as variations based on age and ethnicity. This finding underscores the importance of tailoring approaches, messaging, and solutions to address the unique needs of these distinct subgroups of people living with diabetes.

Diabetes Canada will leverage the survey findings to develop strategies and programs aimed at changing the conversation around diabetes and improving the quality of life of those living with diabetes. "It is my hope that the public will come to see that diabetes is not just an individual disease," says Dr. Vallis. "Understanding, supporting and above all being non-judgmental can go a long way to reducing the burden of diabetes in Canada."



## Meet Amy Moore, who lives with type 2 diabetes

Amy was diagnosed with type 2 diabetes at the age of 25. She spent years trying to manage her blood sugar levels with very little support. "I wasn't told about carb counting or finger pricking," she says. "It's no wonder I couldn't get my levels under control."

Eventually, a pharmacist suggested Amy try a continuous glucose monitor (CGM), which was a game-changer. But it wasn't until a few years later — when Amy was trying to get pregnant — that she was finally referred to an endocrinologist. Things improved from there, but Amy questions why it took five years to have access to the specialized resources she needed.

Like many people who live with diabetes, Amy feels that monitoring and managing diabetes is a 24/7 job. As soon as she wakes up each morning, Amy tests her blood sugar. About 20 minutes before she eats breakfast, she gives herself a dose of insulin. An hour after eating, she checks her sugars again. She repeats the process for lunch and for dinner. She also does finger pricks a few times each day to double-check her levels — fearful of going too low.

Aside from the constant worry of managing her blood sugar, one of the biggest challenges Amy faces is stigma. "I feel there is a lack of understanding about the realities of living with type 2 diabetes," she says. "Diabetes is caused by a combination of factors, many of which are beyond our control. What I want people to know most of all is, we didn't do this to ourselves."



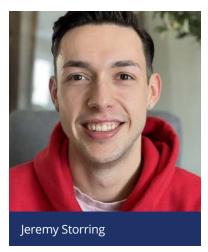


### Secure funding to implement the Framework for Diabetes in Canada

The federal government's tabling of the Framework for Diabetes in Canada in October 2022 was a huge win for the diabetes community and a signal to everyone in Canada that diabetes deserves attention and focus. The Framework is comprised of six areas where opportunities to advance efforts on diabetes could be beneficial. These include:

- Prevention;
- Management, treatment and care;
- Research;
- Surveillance and data collection;
- Learning and knowledge sharing;
- Access to diabetes devices, medicines, and financial supports.

In June of 2023, the Public Health Agency of Canada contracted Diabetes Canada for nearly \$1 million over three years to begin the critical work of implementing the recommendations and strategies laid out in the Framework. We are incredibly proud to play a role in advancing this critical work and we look forward to working closely with the provinces and territories to develop action plans.



The Framework for Diabetes in Canada has helped give me confidence that we are moving towards a brighter future for diabetes in Canada. It has already helped set a standard across Canada, which has been further set by introducing universal access to diabetes medications and devices. The Framework has empowered me as well to keep advocating to ensure that no one with diabetes in Canada is left behind."

 Jeremy Storring, who lives with type 1 diabetes

## Sustaining the momentum

To continue to move the Framework forward, Diabetes Canada held two provincial roundtables in Nova Scotia and Newfoundland and Labrador in 2023, with more planned for 2024. We've also engaged with nearly 1,000 stakeholders so far this year. The goal is to identify and share best practices, including the identification of barriers in health-equity deserving communities. The result of this project will be an inventory of successful diabetes programs and interventions to share with provinces and territories.

"The provincial level is where the Framework will really come alive, and there has been encouraging progress already," says Laura Syron, President & CEO of Diabetes Canada.

- Manitoba is the first province to release a provincial diabetes strategy, Manitoba Diabetes Action Plan, that aligns with the Framework for Diabetes in Canada.
- Alberta's Diabetes Working Group convened stakeholders from across the province to participate in identifying gaps in health care for people with diabetes and developing recommendations to submit to the Minister of Health by March 2024 to inform a provincial diabetes strategy.
- British Columbia took important steps to help British Columbians treat diabetic foot ulcers and reduce their risk of lower limb amputations.
- British Columbia expanded patient choice for a CGM system, including both isCGM and rtCGM to BC PharmaCare.
- Manitoba expanded the age limit for continuous glucose monitor and insulin pump coverage and removed administrative barriers to access a CGM.
- The Ontario Legislature unanimously passed motion 45, a motion to develop a framework for chronic diseases, with an initial focus on diabetes.



Diabetes Canada's Laura Syron and Glenn Thibeault with the Hon. Mark Holland, Minister of Health (middle)

- ▶ PEI, supported by the Government of Canada, will expand its provincial drug coverage to reduce copays for commonly prescribed, eligible medications to \$5 for residents covered under the Seniors Drug, the Family Health Benefit, as well as the Generic Drug and Diabetes Drug programs will greatly reduce barriers to accessing medications for people living with diabetes. The 2023 Budget committed funding of \$400,000 to launch a foot care program further demonstrates PEI's commitment to caring for people living with diabetes.
- Newfoundland and Labrador Health Services began a pilot program for people living with type 1 diabetes to determine the feasibility of a provincial continuous glucose monitoring program.
- New Brunswick in November 2023 the provincial government has enhanced the New Brunswick Insulin Pump Program to offer continuous glucose monitoring coverage to eligible diabetes patients. More than 5,000 New Brunswickers are expected to benefit from this enhancement.

A key focus of the Framework for Diabetes in Canada is improving access to diabetes medications, devices and supplies through financial support. Far too many people living with diabetes in Canada are paying increasing costs for the very medicines and devices they need to survive. Diabetes Canada tracks the out-of-pocket costs of managing type 1 and type 2 diabetes and uses these cost models to show governments that their coverage of drugs and devices needs to be more comprehensive.

In 2023, we updated our diabetes-related out-of-pocket report, and the findings are concerning:

- ▶ For people with **type 2 diabetes**, the out-of-pocket costs in certain parts of Canada are as high as \$10,014 per year.
- For people with type 1 diabetes, the out-of-pocket costs in certain parts of Canada are as high as \$18,306 per year

"People living with diabetes shouldn't have to choose between managing their, or their child's, chronic condition and putting food on the table or paying rent," says Laura Syron. "As the affordability crisis worsens in Canada and people struggle to afford basic needs, I fear we will begin to witness poorer health outcomes as people are simply unable to pay for the treatments prescribed by their healthcare providers."



In my 10 years living with type
1 diabetes, I've seen significant
technological advancements in
management. Until recently, the
financial burden prevented me from
considering an automated insulin
pump. Thanks to Manitoba's lift on
age restrictions for funded pumps,
my quality of life improved, and I
had a healthy pregnancy. There's
more to be done for equitable
healthcare, but initiatives like the
Framework for Diabetes {in Canada}
show progress."

- Nikki Webb

## Increase education supports for healthcare providers

Diabetes Canada continued to support healthcare professionals on the front lines of diabetes care, with the help of supporters like you. We hosted nine webinars and podcasts for healthcare providers on topics such as Diabetes at Different Ages, Clinical Practice Guidelines (CPG) Updates, and Comorbidities with Sex and Gender Considerations. The webinars were viewed more than 5,000 times while the podcasts had over 3,000 downloads.

## A FEW HIGHLIGHTS OF OUR HEALTHCARE EDUCATION INITIATIVES INCLUDE:

#### **VASCULAR CONGRESS 2023**

Diabetes Canada partnered with five other charities and organizations for the Vascular Congress in Montreal last October. The Congress was an unparalleled convergence of expertise, innovation and collaboration all relating to vascular health. Vascular health issues such as heart disease, stroke and kidney failure are all common complications associated with diabetes, which is why it's important to take a more holistic approach to diabetes care.

The Congress was a tremendous success with close to 4,000 clinicians, researchers and diabetes educators convening to explore novel interventions, cutting-edge research and multidisciplinary approaches to care.

#### **DIABETES SIMPLIFIED**

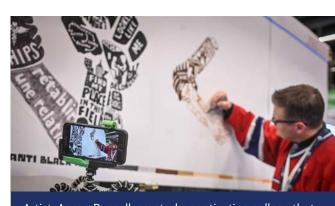
This healthcare education program focuses on practical interpretations of the CPGs. Held three or four times a year, either virtually, in person, or a hybrid model, each Diabetes Simplified program typically offers six sessions, three of which focus specifically on updates or new additions to the CPGs, such as pharmacotherapy and remission of type 2 diabetes. The other three sessions are case-based reviews of topics seen frequently in clinical practice. Participants in Diabetes Simplified include clinicians, registered nurses, nurse practitioners, pharmacists and dieticians — everybody who is patient-facing is welcome.



2023 Vascular Congress



The IDEA Lounge featured activations aimed at promoting inclusivity and innovation in healthcare.



Artist, Aaron Russell, created a captivating collage that visually represents the spirit of the IDEA Lounge.



## Meet Dr. Gihane Zarifa, family physician and Diabetes Simplified faculty member

Family physicians aren't just working with people living with diabetes. They're facing so much more. So when there's overwhelming data on just one condition like diabetes, and it's changing so fast, it's challenging for healthcare providers to keep up to date. "That's why Diabetes Simplified is so important," says Dr. Gihane Zarifa. "We take all the new recommendations from the Clinical Practice Guidelines (CPGs) and the new data that's being published and distill it for healthcare providers in a way that becomes applicable from one visit to another, from one day to another."

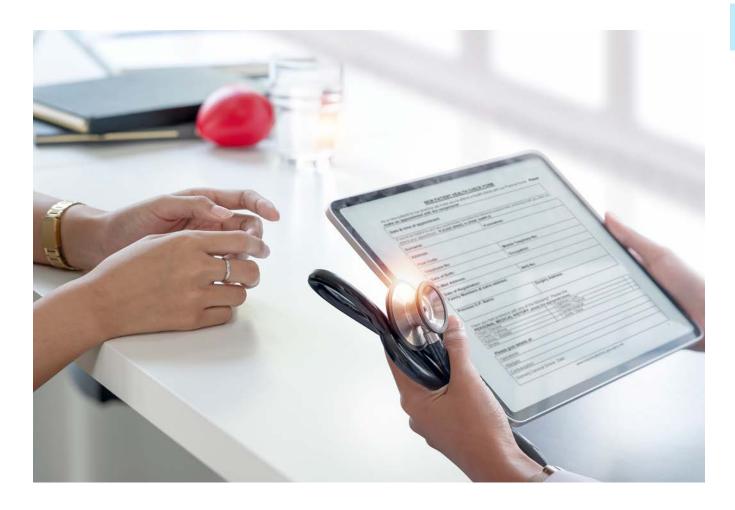
The goal is to fill the gap in what the CPGs recommend and what is being done in community practices and to arm healthcare providers with the knowledge and tools needed to optimize diabetes management.

"With family care physicians being the first point of contact, it's important to do proper screening and to identify those who are living with diabetes or prediabetes and to work to prevent complications," says Dr. Zarifa. "From a primary care perspective, there's so much that we can do for people living with diabetes to improve their trajectory of care."

At the end of each Diabetes Simplified session, participants are asked to respond to a short survey about the applicability of what they've learned. "The overwhelming majority say that they have an intention to put the knowledge they've gained into practice — which is the ultimate goal," says Dr. Zarifa.

In addition to being a faculty member of Diabetes Simplified, Dr. Zarifa is a family physician at the Credit Valley Hospital in Mississauga, teaches residents in the Family Medicine Teaching Unit, and is the physician lead on a regional family health team that focuses on diabetes care.





## Integrating the Clinical Practice Guidelines into Electronic Medical Records

The vast majority of adults living with diabetes are not being screened at the recommended frequency, and the standard of diabetes care is not consistent across healthcare professionals.

Implementing evidence-based guidelines is at the core of delivering the best care for people living with diabetes. However, for most busy clinicians there are too many guidelines to recall in real time.

Diabetes Canada initiated a pilot project in Newfoundland to integrate the Clinical Practice Guidelines (CPGs) into Electronic Medical Records. The hope is that making the CPGs readily accessible to clinicians at the point at which they are treating their patients and updating their records will improve the standard of care.

One of the results of this initiative has been a reduction in complications of the condition. For example, **foot examinations increased by 80%**, which could significantly reduce the chances of foot amputations.



### Updates to the Clinical Practice Guidelines

Two exciting new chapters addressing the important issue of do-it-yourself automated insulin delivery (DIY AID) and type 1 diabetes were added to the Clinical Practice Guidelines (CPGs) in 2023.

The two chapters — Do-It-Yourself Automated Insulin Delivery: A Position Statement and Do-It-Yourself Automated Insulin Delivery: A Health-Care Practitioner User's Guide — provide key messages and guidance to help health-care providers (HCPs) be inclusive of DIY AID in their daily practice, and to better support people living with type 1 diabetes who choose this insulin delivery method. DIY AID systems have become increasingly popular, and it is important for HCPs to be aware and supportive of the use of these systems in order to encourage selfmanagement and shared decision making, ensuring people living with diabetes can be confident in their individualized care and meet their own personalized diabetes goals.

Additional chapter updates to the CPGs last year included Diabetes & Mental Health and Hypoglycemia in Adults. For more information, visit, **guidelines.diabetes.ca** 



Dylan MacKay, PhD



Having Diabetes
Canada support patient
choice in insulin
delivery systems has
had a huge impact on
clinical practice. Many
more health-care
professionals are now
comfortable bringing

up DIY AID as an option

for people with type 1

diabetes."

 Ilana Halperin, endocrinologist and lead author of the DIY AID paper

My do-it-yourself automated insulin delivery system has been life changing, but there is still a lot of uncertainty on how to start DIY AID and how to support people who use DIY AID. The new Diabetes Canada chapter and user guide are exactly what is needed to help empower people living with type 1 diabetes to start DIY AID and provide the information needed for practitioners to feel confident in supporting them."

 Dylan MacKay, living with type 1 diabetes and co-author of the DIY AID User's Guide

#### **Professional Awards**

At the Professional Conference in October, Diabetes Canada presented awards to healthcare professionals whose work in the diabetes field has made a significant impact on people's lives.

#### **MEET TWO OF THE 2023 AWARD RECIPIENTS:**

- ▶ **Dr. Jeffrey Habert** received the Gerald S. Wong Award which is bestowed on a physician in recognition for significant contribution to the diabetes community. Dr. Habert's work on guideline development and dissemination is vast and has made a tremendous impact on diabetes care in Canada. He joined Diabetes Canada's Dissemination & Implementation Committee in 2024.
- Lisa deMolitor received the Diabetes Educator of the Year Award which recognizes a healthcare professional who has made special contributions to diabetes education through dedication, sensitivity and innovation in the daily practice of patient education and care. Lisa is a registered dietitian and certified diabetes educator who focuses on knowledge translation, diabetes technology, health equity and diabetes distress.





#### Mental Health Training Program

In recognition of the emotional, social and psychological impact of living with diabetes, Diabetes Canada has partnered with the Juvenile Diabetes Research Foundation (JDRF) to create a new mental health training program for social workers, psychologists, psychiatrists and other mental health providers. The goal of the program is to prepare mental health practitioners to be more attuned to what people affected by diabetes might be going through.

#### **Financial Overview**

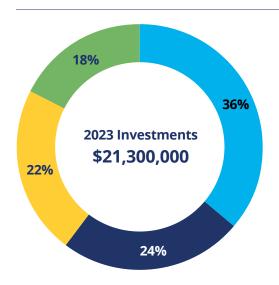
## How your donations help

In our efforts to improve the quality of life for those living with diabetes, we experienced a financial landscape in 2023 that demanded resilience and strategic adaptation. Thanks to the generosity of donors and partners, our unwavering commitment to our mission remained steadfast, reflected in the increased support of Diabetes Canada's vital programs, channeling resources into key areas of need.

Our investment in research saw a significant boost, dedicating almost **\$1 million more** in 2023 than the

previous year. This heightened investment underscores our commitment to driving innovation and pursuing breakthroughs that have the potential to transform lives.

Furthermore, our efforts to support children with type 1 diabetes saw a notable increase in funding, with investments rising from **over half a million dollars in 2023**. This expansion of resources underscores our support to those in need, particularly the most vulnerable members of our community.



#### INVESTMENT IN OUR MISSION

	2023	2022
Research	\$7.7M	\$6.9M
■ Improving management and prevention	\$5.1M	\$5.7M
■ Drive for excellence in diabetes care	\$4.7M	\$4.6M
<ul> <li>Helping children and adults with type 1 diabetes</li> </ul>	\$3.8M	\$3.2M
Total	\$21.3M	\$20.4M

## Where your donations make an impact



#### Improving diabetes management

This includes providing comprehensive educational resources, workshops, and support programs like our toll-free support 1-800 BANTING Info & Referral line to help individuals understand diabetes, develop self-management skills, and make informed lifestyle choices.



#### **Research and Science**

We continue to invest in innovative research across the country like the End Diabetes Awards and collaborative partnerships among researchers, healthcare professionals, industry partners, and individuals affected by diabetes to facilitate knowledge sharing and accelerate progress.



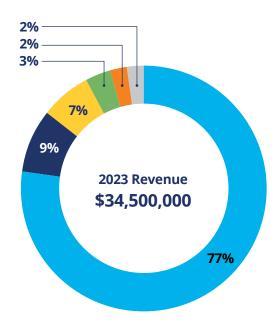
#### **Diabetes care**

As a thought leader in diabetes education and care, we develop internationally recognized Clinical Practice Guidelines to ensure the best research translates into the best care and quality of life by healthcare practitioners for those living with diabetes.



## Helping children and adults living with type 1 diabetes

Your donations empower kids and youth living with type 1 diabetes by providing them with essential skills in a medically supervised environment at our 9 summer D-Camps across Canada. Your support also helps to advocate for improved access to diabetes medications, devices, and supplies for children and adults.



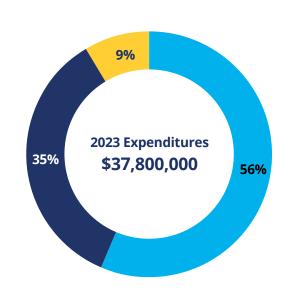
#### **REVENUE**

Where does our support come from?

	2023	2022
Support from the public	\$26.7M	\$27.4M
■ Income from National Diabetes Trust	\$2.9M	\$4.2M
■ Investment and other income	\$2.3M	\$1.1M
■ Camp	\$1.1M	\$1.0M
■ Education services	\$0.8M	\$0.8M
■ Government funding	\$0.7M	\$0.8M
Total	\$34.5M	\$35.3M

#### **PROGRAM EXPENDITURES**

	2023	2022
Mission programs	\$21.3M	\$20.4M
■ Fundraising and public relations	\$13.2M	\$10.5M
Administration	\$3.3M	\$2.6M
Total	\$37.8M	\$33.5M



Together, with the continued support of our communities, we are shaping the future of diabetes, and bringing care and hope to countless individuals and families impacted by this condition.

Learn more about our audited financial statements at diabetes.ca



## Thank you for your support

In reading our annual report, we hope you see the impact of your support. Together, we achieved so much in 2023, from investing \$7.7 million into diabetes research to obtaining a funding commitment from the federal government for the Framework for Diabetes in Canada. With your continuing support, Diabetes Canada will build on this momentum as we tackle critical issues such as the health consequences of diabetes and the stigma felt by so many living with diabetes.

Diabetes Canada is a member of HealthPartners. Thank you to the generosity of employees who participated in the 2023 workplace giving campaigns to help further support our mission.

#### **Leadership Team**

#### **Laura Syron**

President & CEO

#### Tim D'Souza

Senior Vice President, Finance & Business Operations

#### Kim Fletcher

Senior Vice President, Marketing & Communications

#### **Brendan Robinson**

Senior Vice President, Development

#### **Russell Williams**

Senior Vice President, Mission

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Together, we can **End Diabetes**