



# 2017 AND BEYOND

Our Vision and Direction

**Diabetes Advocates brave the weather** to urge members of Congress to increase funding support for diabetes research and programs.



# To Those We Serve

Picture a life—and a world—without diabetes. We do.

We see freedom from the pain of finger pricks, injections and the countless costly drugs and devices needed to manage diabetes every moment of every day. We see the end of diabetes-related blindness, amputation, dialysis, heart attack and stroke. We see people able to live productive and happy lives.

**This bold vision stands in stark contrast to our present reality.**

Diabetes continues to grow across our country and around the world, and the costs are shocking. Unless we act, over the next 10 years, we expect the costs of care for diabetes and related complications to exceed \$7 trillion globally.

But the financial cost pales in comparison to the cost of human lives. **Around the world, one person dies every 6 seconds from diabetes and its consequences.**

We are united to defeat this global threat. We are people with diabetes and their friends and family members, volunteers, researchers, health care professionals and advocates. Together, we will be relentless, concentrating our power on these three strategic priorities to defeat diabetes:

**Drive Discovery:** Through research, partnerships and innovation on a global scale, we will drive discoveries to prevent, manage and ultimately cure diabetes.

**Raise Voice:** We will intensify the urgency around the diabetes epidemic and mobilize bold action through advocacy and engagement.

**Support People:** We will provide new, effective resources for individuals and populations living with and at risk of developing diabetes and for the health care professionals serving them, and offer those resources when, where and how they are needed.

[Join us. Together, we can end this disease.](#)

Respectfully,



Kevin L. Hagan  
Chief Executive Officer  
American Diabetes Association®



## Our Vision

Life free of diabetes and all its burdens.

## Our Mission

To prevent and cure diabetes and to improve the lives of all people affected by diabetes.

## Our Role

As the global authority on diabetes, we support, promote and work with others in the diabetes community to advance knowledge and translate discoveries about diabetes and its complications into practical solutions that make everyday life better for people living with or at risk for diabetes.

# Why We Exist

Diabetes is the single greatest chronic disease threat to global health today.

It is one of the fastest growing diseases, and without action, more than 640 million people around the world will have diabetes by the year 2040.

Diabetes is a 24/7 disease that hurts, disables and kills our loved ones. It is costly by many measures—lost work, decreased quality of life and increased medical bills. Spending on personal health care for diabetes is greater than spending for any other disease. This is weakening our communities and threatens to bankrupt health systems around the world.



RATES OF DIAGNOSED DIABETES COMPARED TO NON-HISPANIC WHITES:  
**AFRICAN AMERICANS & HISPANICS: NEARLY 2X MORE LIKELY TO BE AFFECTED.**  
**AMERICAN INDIANS/ALASKA NATIVES: OVER 2X MORE LIKELY TO BE AFFECTED.**  
**ASIAN AMERICANS: 1.2X MORE LIKELY TO BE AFFECTED.**



**5 MILLION: DIABETES-RELATED DEATHS GLOBALLY (IN 2015).**



But as deadly as diabetes can be, it often remains invisible. Support for research and clinical care is inadequate. People struggle to access information and resources and to manage the daily burdens of diabetes.

# Who We Are and What We Do

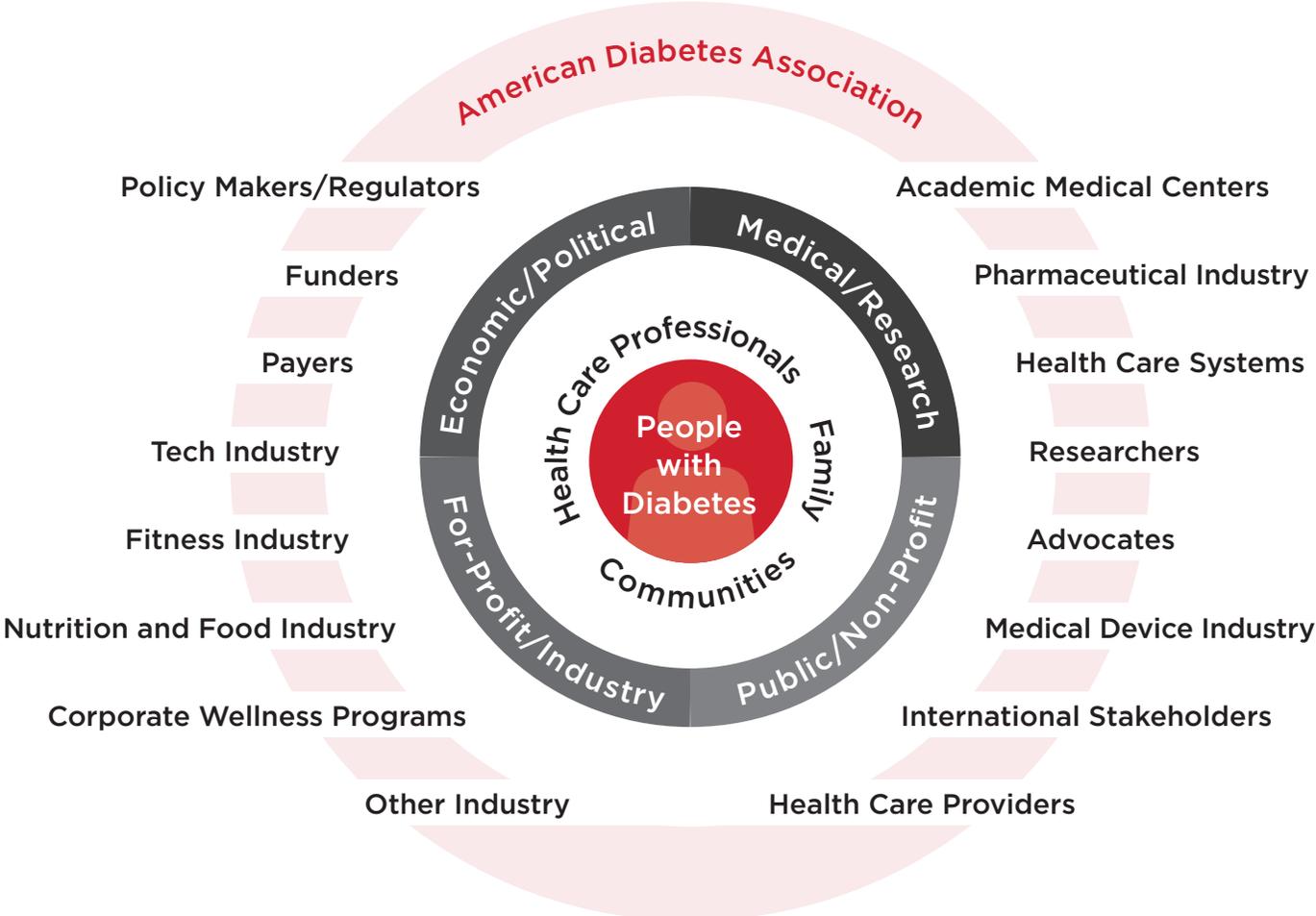
The American Diabetes Association is the trusted global authority on diabetes.

We are a powerful organization committed to leading the fight against diabetes and its deadly consequences. We are thought leaders, researchers, advocates, health care professionals, people with diabetes, their family and friends—everyone committed to fighting diabetes—working together.

- We fund research to better understand, prevent and manage diabetes and its complications. We improve lives as we work toward a cure for diabetes.
- We employ a unique approach to awarding research grants that is designed to solicit and fund the best ideas from the brightest and most innovative scientists, researchers and investigators.
- We ensure a strong pipeline of research talent by funding and mentoring next-generation diabetes scientists.
- We publish the world's two most respected scientific journals in the field, *Diabetes* and *Diabetes Care*.
- We set the standards for diabetes care.
- We hold the world's most respected diabetes scientific and educational conferences.
- We challenge legislators and officials in Washington, D.C., and in statehouses and courthouses around the country to increase research funding, improve health care, enact public policies to stop diabetes and end discrimination against those denied their rights because of the disease.
- We support individuals and communities by connecting them with the resources they need to prevent diabetes and better manage the disease and its devastating complications.

# Diabetes Ecosystem

Diabetes touches every aspect of life for individuals and communities. Helping people who live with diabetes is the central focus of our mission. We bring people together from every corner to combat the disease.



# Priorities to Defeat Diabetes

The American Diabetes Association has three strategic areas of focus:

## DRIVE DISCOVERY

Through research, partnerships and innovation on a global scale, drive discoveries to prevent, manage and ultimately cure diabetes.

## RAISE VOICE

Intensify the urgency around the diabetes epidemic and mobilize bold action through advocacy and engagement.

## SUPPORT PEOPLE

Provide new, effective resources for individuals and populations living with and at risk of developing diabetes and for the health care professionals serving them, and offer those resources when, where and how they are needed.

## Where We Are Now ---

Diabetes is a complex disease that has many forms, and it leads to complications that harm people from head to toe. While researchers have made great progress through the decades, financial support for diabetes-related research is significantly lower than the economic toll diabetes takes on individuals and society. This inadequate support relative to the great need limits the discovery of fundamental causes and new therapies that would ultimately improve the lives of people with diabetes.

New scientific approaches from many areas of biology and technology are emerging. But research funding is far too low, and the number of diabetes-related scientists too few, to take full advantage of these opportunities. As a result, discoveries that would help people with diabetes are tragically delayed.

To achieve our vision of life free of diabetes and all its burdens, we must increase research funding and attract and enable people from throughout the scientific, medical and technology communities to work together to accelerate progress.

“Diabetes knows most of my family members. Complications have already robbed me of several relatives. I am truly tired of missing days and weeks at a time, away from both work and family. If I can’t work, I will not be able to continue to pay for my medications. Please help us find a cure for this disease and put a stop to the ongoing suffering that it creates!”

— **Michelle Foster, Virginia**

Association volunteer, advocate, daughter, African American, nutrition educator, person with diabetes

Through research, partnerships and innovation on a global scale, drive discoveries to prevent, manage and ultimately cure diabetes.

## Strategies

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**1** Increase American Diabetes Association investment in research on the causes of diabetes and its complications and how to treat, prevent and cure the disease and its related disorders.

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### OUTCOMES

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Triple American Diabetes Association funding for research.

Promote increased funding for diabetes-related research by the United States government (National Institutes of Health, Centers for Disease Control, Veterans Administration, etc.), the pharmaceutical/biotechnology industry and other ecosystem partners.

**2** Facilitate the worldwide exchange of information about diabetes research, treatment and prevention by increasing the reach and influence of American Diabetes Association journals, conferences and meetings.

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### OUTCOMES

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Increase visibility of and attendance at American Diabetes Association-led scientific and medical conferences.

Develop and use technology and new forms of communication to disseminate new findings in research and clinical care presented in Association-led journals and conferences.

**3** Provide greater value and career-enhancing programs and services for scientists and health care providers, especially those just entering their professions, thus attracting the brightest and most dedicated talent in the fight against diabetes.

## OUTCOMES

Develop new programs and services for the Association's professional members in all phases of their careers.

Increase the number of scientists and health care providers, especially those in training, who become Association members.

Enhance and sustain the Pathway to Stop Diabetes® program that attracts emerging, outstanding scientists from all scientific disciplines to diabetes-related research.

**4** Develop worldwide partnerships with technology innovators to further enhance and analyze the wealth of available data and build innovative care tools and treatments for diabetes and prediabetes.

## OUTCOMES

Increase innovation in technology and its use by health care professionals and individuals with diabetes to provide solutions and overcome challenges.

**5** Work cooperatively with government, private and non-profit supporters of diabetes research to enhance the scope, type and impact of discovery efforts in diabetes.

## OUTCOMES

Develop joint programs with government, pharmaceutical and other non-profit organizations to expand research efforts, attract new scientists and promote the training of health care professionals to further diabetes-related science and research.

## Where We Are Now

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“I do not know of an American Indian family untouched by diabetes. Like other American Indians, I have personally witnessed the spread of diabetes in my family and community, and I have not known a world without diabetes. Diabetes should not be a part of anyone’s traditional culture.”

— **John Beaver, Oklahoma**

Association volunteer, advocate, son, Muscogee  
(Creek) tribal member, Tour de Cure® team captain

While diabetes affects people of every race, ethnicity, community and socioeconomic status, the disease attacks certain racial and ethnic groups much harder than others. In addition, it is much more difficult to manage in communities with limited access to quality health care, healthy food options, safe physical activity and education about diabetes.

Even where people have the resources they need to manage their disease, they may be treated unfairly. Misconceptions about diabetes can keep children from being medically safe at school, prohibit workers with diabetes from working in jobs they love and cause law enforcement officers to mistake a medical emergency for intoxication.

Together, American Diabetes Association advocates raise the voices of individuals and communities, urging policy makers to take action to prevent diabetes, provide access to high-quality affordable health care, fund diabetes research and programs and end discrimination against people with diabetes.

## Intensify the urgency around the diabetes epidemic, and mobilize bold action through advocacy and engagement.

### Strategies

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**1** Work with policy makers, industry and other partners to increase access to adequate and affordable health care that fully meets the needs of those living with diabetes and to reduce financial burdens and remove other barriers to therapies and interventions.

#### OUTCOMES

Improve access for people with diabetes and prediabetes to programs and interventions to help them better manage their health.

Reduce the cost of quality diabetes care and prevention.

**2** Amplify the voice of people with diabetes by increasing the scale of our advocacy efforts with legislative, regulatory and legal decision makers and by expanding our grassroots base, volunteer advocate professional networks and strategic partnerships.

#### OUTCOMES

Increase the number and engagement of volunteers and alliances promoting the Association's legislative, regulatory and legal advocacy priorities.

Elevate diabetes as a national priority.

Champion public policies to help prevent diabetes and reduce policies and behaviors that intentionally or inadvertently hinder efforts to stop the disease.

**3** Ignite a movement to increase government funding for diabetes research and programs, and to protect the rights of people with the disease through an aggressive campaign that highlights the seriousness and eliminates the stigma of diabetes.

## OUTCOMES

Increase government funding for diabetes research and programs.

Increase resources and their distribution so more people can successfully combat discrimination because of their diabetes.

“My mom moved in with us recently, and now I have this whole routine to help her manage her diabetes. You really have to structure your life around your mom, your dad, your relative or whoever you’re being a care provider for. It’s a 24/7 job.”

— **Guadalupe Pacheco, District of Columbia**  
Association volunteer, son, health care and public health consultant, Mexican American, caregiver



**ASHLYNN** had attended a children’s sports program since the age of five. However, when she was diagnosed with type 1 diabetes at the age of nine, the program would not train its staff to administer glucagon, which is sometimes necessary to treat extremely low blood glucose. This meant that Ashlynn was able to attend the program only when Audrey, her mother, could also be there. Ashlynn began to miss many of the activities she loved.

Audrey contacted the American Diabetes Association for help. She learned that Ashlynn had a legal right to participate, and she wrote a letter to the program that outlined these rights. The directors of the program changed the policy and agreed to train their staff about type 1 diabetes, diabetes care (including glucagon administration) and the signs and symptoms of low blood glucose. Today, Ashlynn can fully participate in the program once again.

“When you see your child triumph through the daily struggles of managing type 1 diabetes, you will go to great lengths to ensure his or her well-being. For every parent out there who feels defeated by the weight of advocating for your child, remind yourself that there are people out there who will help. The city of Santa Monica, the American Diabetes Association and I worked positively together to achieve the best outcome for my daughter, Ashlynn. For this I am grateful.”

— **Audrey Berry, California**  
Mom, advocate, caregiver

## Where We Are Now ---

We work for discoveries that will end diabetes, but until then we support people where they are—as they work to manage their diabetes or stop the progression of prediabetes while still living their lives. We help them to do all they can to avoid the devastation of diabetes-related complications: blindness, amputation, kidney failure, stroke and heart disease.

People with diabetes spend, on average, less than three hours per year with health care providers. They need relevant and accessible tools, information, education and support delivered in “real world” ways.

“One day I went from not even knowing I was sick to being diagnosed with a very, very dangerous level of diabetes. I needed to be on heart medication right away, cholesterol medicine, diabetes medication, the whole nine yards.”

— **Christina, Washington**  
Association volunteer, advocate,  
Asian American, person with diabetes

Provide new, effective resources for individuals and populations living with and at risk of developing diabetes and for the health care professionals serving them, and offer those resources when, where and how they are needed.

## Strategies

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**1** Expand our education and content resources and the use of technology to deliver the most valuable information when, where and how people can best use it.

### OUTCOMES

Enhance access to the latest and most proven programs, content and resources on diabetes care for people with diabetes.

Improve the quality of life for people living with diabetes.

**2** Support health care providers, especially those working with communities hardest hit by the diabetes epidemic.

### OUTCOMES

Increase the visibility, utility and implementation of the American Diabetes Association Standards of Medical Care in Diabetes throughout the world.

Increase the number of people in communities hardest hit by diabetes who are successfully managing or preventing diabetes and improving their health.

**3** Enhance and amplify Association-sponsored programs to support children and adolescents living with or at risk of developing diabetes.

## OUTCOMES

Expand the number of camps and other programs designed to help children and adolescents manage their diabetes independently.

Increase the number of children and adolescents who participate in these programs.

**4** Develop, pilot and prove the health or cost benefits of innovative tools, programs and interventions based on the American Diabetes Association Standards of Medical Care in Diabetes.

## OUTCOMES

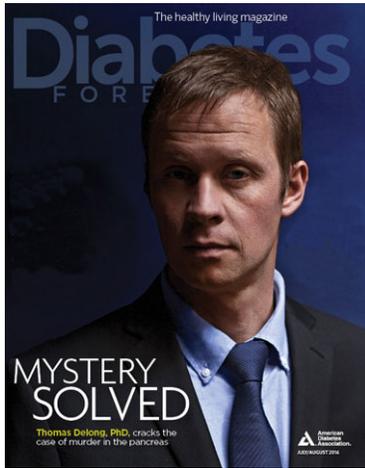
Increase the number of people with diabetes and prediabetes benefiting from American Diabetes Association tools, programs and interventions offered through partnership with local communities, non-profit organizations and private industry.

Advocate for support of Association tools and programs by health systems, payers and communities.

“My mother lost her battle with type 2 diabetes at the young age of 35—the same age I was diagnosed with type 2 diabetes. This year, my 50th birthday, I began my approach to make this the best year ever. Some days, of course, are better than others. But tomorrow I will open my eyes, and I will still be a person with diabetes living life to the fullest.”

— **Ina Mendoza, Maryland**

Association volunteer, daughter, grandmother, Latina, advocate, federal employee, person with diabetes



## **THOMAS DELONG, PHD,**

is a researcher at the University of Colorado School of Medicine. After 10 years in the lab, he made a major discovery in type 1 diabetes—pinpointing one potential cause of the disease. DeLong’s work is funded with a five-year grant from the American Diabetes Association’s Pathway to Stop Diabetes program.

When I was 12 years old, I went on a summer adventure with a youth group to Luxembourg. My friends and I were very excited about camping and backpacking across the entire country. One day, I couldn’t keep up with the other kids. I felt exhausted and kept falling behind. My journey ended on a small hill in the low mountains of Luxembourg. I could no longer carry my backpack, and my legs refused to obey. I collapsed.

My grandmother drove me to the hospital, where I was diagnosed with type 1 diabetes. The disease did not mean much to me at that time, but I was happy to feel my strength return after a few days in the hospital.

They kept giving me shots of a liquid they called insulin. One day the nurse asked me if I wanted to do it myself. I was very surprised and suspicious and asked her if I’d have to give myself shots after I left the hospital. I was shocked, afraid and confused as she made me see that I could not leave type 1 diabetes behind when I left the hospital. Since then, not a single day has passed in which I have not given myself at least three shots of insulin, which means I’ve given myself at least 40,000 shots in the last 30 years.

When I was a teenager, I promised myself I’d defeat this life-altering disease, and in college, I entered the life sciences through the field of chemistry. Later, I joined the lab of a highly recognized immunologist who had isolated T cells that trigger diabetes and asked how the T cells get tricked into attacking their own body, leading to the autoimmune destruction of insulin-producing beta cells. After all, T cells are there to protect us and not to attack us. I spent eight years using my expertise as a chemist and my persistence as a person with diabetes to interrogate T cells to surrender their secret.

I remember the day when I finally got my answer as clearly as the day I had to take my first shot of insulin, and I anticipate that this discovery will play an important role in finding a cure for type 1 diabetes.

The American Diabetes Association quickly recognized the potential of this discovery and has since supported my research and provided me with mentorship through the Pathway to Stop Diabetes grant. They give me the liberty to dive deeper into question of how to stop type 1 diabetes.



## Our camps change lives.

At camp, kids with diabetes and their families become part of a community where they can thrive together. The Association is the largest single provider of camps for kids with diabetes in the world.