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#### Report from the Board Chair and Chief Executive Officer

Continuing to grow Diabetes New Zealand (DNZ) and expand our reach to support more people with diabetes has been a focus over the last 12 months. We are still a small charity and know we have a lot more to do to make a difference, but we are pushing hard to lift our game and be more relevant and supportive. The work we do is even more important now in the context of a health system that is being challenged with funding and resourcing issues right across the sector.

Over the last 12 months Diabetes Wellington Youth, Diabetes Canterbury Youth and Diabetes Hawkes Bay ceased to exist as separate organisations and joined DNZ, pooling their resources and allowing us to expand the network of areas we support. Diabetes Marlborough also joined DNZ after the end of June. We welcome these regions and groups knowing that as we strengthen our numbers, we can increase our voice and provide better services.

In other regions various committees and groups also assist us to grow our reach and add more value. We are committed to continue to grow as funding allows, whilst at the same time ensuring prudent and careful management of our reserves.

We are pleased to report on some of our achievements through the Statement of Service Performance which forms the basis of this Annual Review. However, there are achievements which cannot be measured year on year but should form part of this Report.

### We strengthened our partnerships with:

- the New Zealand Society for the Study of Diabetes (NZSSD) the clinical team supporting people with diabetes across the country. We are working more closely with clinicians to ensure we speak with one voice about diabetes.
- the Diabetes New Zealand Research Foundation (DNZRF) who has now
  established a website with information about its objectives and the summer
  student grant programme it supported over the summer period last year. Check
  out the website at dnzrf.org.nz. While DNZRF is still in start-up mode, it has
  plans to grow its capital base to have more grant funding available for diabetes
  research relevant to New Zealand conditions and our context.

- primary and community health providers, including iwi and pacific providers, to strengthen and grow our Diabetes Community Coordinator roles. We now have a presence in nine regions of New Zealand working alongside primary health care workers to support people with diabetes to access health services and better manage their diabetes. Our Coordinators have also delivered Diabetes Self-Management Programmes with the support of local health professionals. The Coordinators working in the different regions pivot their support to align with local needs. The majority of our Coordinators are either Māori or Pasifika peoples.
- the Edgar National Centre for Diabetes and Obesity Research and He Oranga Ora National Science Challenge who supported Diabetes Action Month by holding a Symposium *Transforming Lives – 100 years of Insulin* which was held at Parliament in November 2022.

### We strengthened our advocacy by:

- Developing a Position Statement on CGM
   Funding in partnership with NZSSD, the Edgar
   National Centre for Diabetes and Obesity
   Research and He Oranga Ora National Science
   Challenge. We collectively urged the New
   Zealand Government to support Pharmac
   to fully fund Continuous Glucose Monitoring
   (CGM) technology for all New Zealanders
   living on insulin to improve health outcomes
   and promote equitable care for people with
   diabetes.
- The announcement in July 2023 from Pharmac that they were to accept Requests for Proposals to secure the supply of, and fund, CGMs for people living with diabetes was welcomed. Whilst it is not clear what this might mean and who will benefit, it is a step in the right direction. Mindful of the experience in Australia where the introduction of CGMs for all was staged over a number of years, our "#CGMforall" campaign will continue.

Diabetes Action Month was themed "Diabetes Matters" with four sub themes for the month – Language Matters, Nutrition Matters, Movement Matters and Prevention Matters. The legacy from this campaign was the development of Language Matters Resources which are downloadable from the website.





# There were changes to our **Board of Trustees** over the year:

- Andy Archer and John Denton resigned as trustees. They became trustees at the time we
  merged the Auckland branch committee with the Trust so we could build better working
  relationships and greater consistency in the delivery of services across the country. We
  thank them for their contribution during this period of transition and acknowledge Andy
  Archer's contribution over many years to 'things diabetes' such as his report advocating
  for a sugar tax to be levied in New Zealand. It is still used as a reference document when
  Diabetes New Zealand is asked to comment on healthy food choices.
- Recognising that our trustees did not reflect the multi-cultural society in which we live we appointed Bev Gibson (Te Atiawa, Ngaruahine, Te Arawa) and Erolia Rooney (Pacific peoples - Samoa) as trustees and Tio Taiaki (Te Ātiawa ki Whakarongotai, Ngāti Tūwharetoa, Āti Hau Nui-ā-Pāpārangi) as a Special Advisor to the Trust.

There is always more we could be doing, and we are only limited by the resources available to us, so we are incredibly grateful for the support we receive from our donors, grant funders, sponsors, and the contracts we have with Te Whatu Ora.

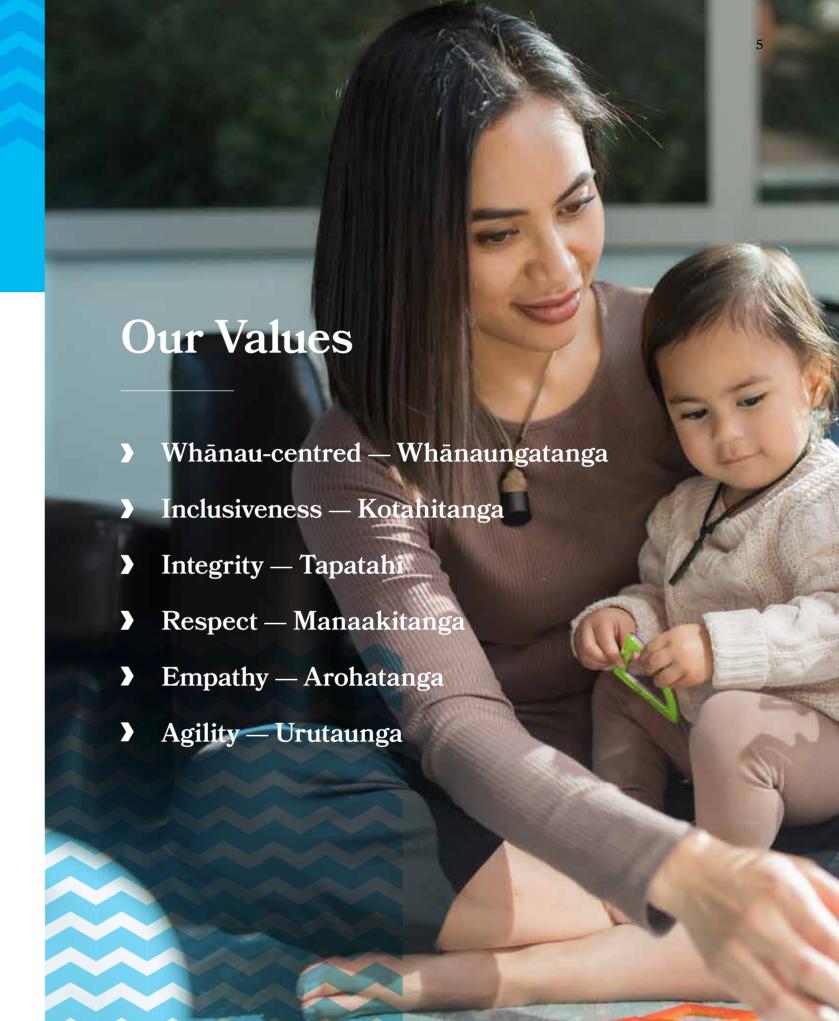
We look forward to the year ahead and delivering on our purpose – to reduce the impact of type 1 diabetes and incidence of other types of diabetes in Aotearoa New Zealand.



Catherine Taylor Chair



Heather Verry
Chief Executive





# **Core Objectives**

Ā mātou whāinga matua

Individuals
Whānau
Government
Health Support Networks



# Leadership & Reach

Provide essential leadership for all New Zealanders affected by diabetes, delivering impactful change and converting burdens to freedom for healthy, active and fulfilling lives.

# Champion & Advocate

Represent and champion the needs of all people with, or at risk of diabetes, to reduce the incidence complications and burdens of this long-term health condition.

### **Empower**

Deliver innovative, high-impact services that prevent diabetes and empower people with diabetes and their whānau to self-manage with confidence and live well.

### Prevention

Through partnerships, applied research and community-partnered programmes, lift early detection rates and *Turn the Tide* on the incidence of diabetes.

### Unified & Driven

Think nationally and act locally

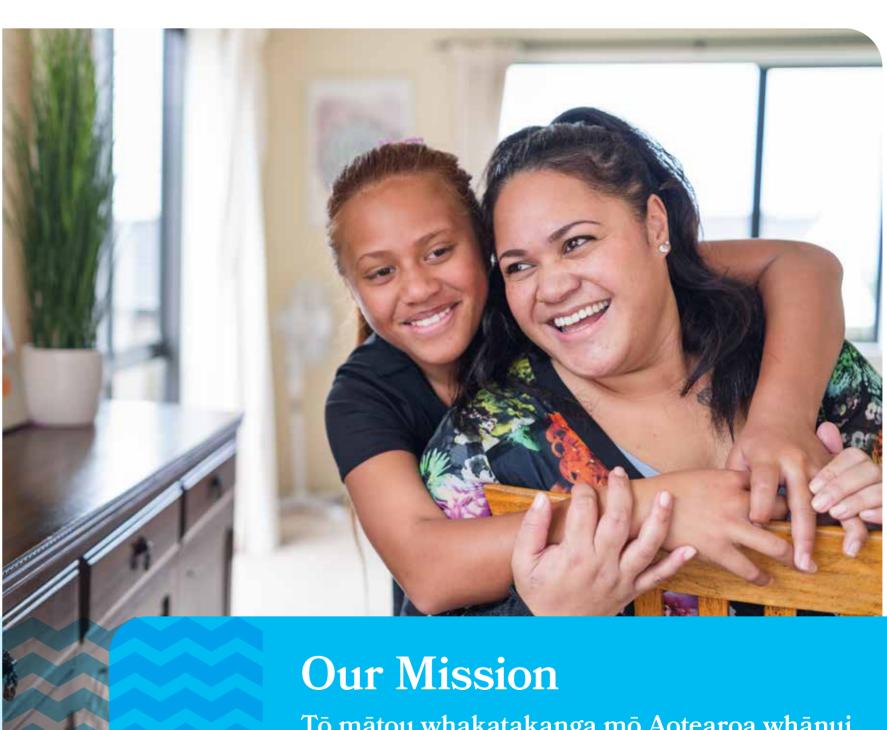
## Diabetes New Zealand wants to:

- Empower people with diabetes to live their best lives and become experts in their own condition.
- Champion improved health opportunities and outcomes for those at risk of, or living with diabetes.
- Collaborate and partner with health professionals, kaupapa Māori services and community group networks to extend our reach.
- Reach all people with diabetes or pre-diabetes, or at risk of diabetes providing access to the best resources, information, and support.
- Achieve equitable treatment and outcomes for Māori, Pacific and Asian people, who have a greater prevalence of Type 2 diabetes and its complications.
- Focus on whānau who are the central source of strength and support for people with, or at risk of, diabetes.
- Work closely with government and its health agencies to promote more appropriate investment in its treatment and prevention.
- Hold government to account.
- Connect, partner, and work with those who provide health education and support to people with or at risk of diabetes.

# Our Purpose

### To mātou koronga mo Aotearoa whānui

Reduce the impact of type 1 diabetes and incidence of other types of diabetes in Aotearoa New Zealand.



Tō mātou whakatakanga mō Aotearoa whānui

Ensure every person living in Aotearoa New Zealand with diabetes or at risk of diabetes has equitable access to affordable, quality diabetes care and education.

# Leadership & Reach

# 0800 Calls & Info/Email Enquiries/Resources

The Helpline and Info email is used mainly by individuals, GPs, pharmacists, health and wellness organisations, sporting organisations, schools and workplaces. The questions cover a wide range of topics. The majority of callers are NZ European (74%), with Māori (12%), Pacific (8%) and Indian and South Asian (6%).

Diabetes NZ has a contract with Te Whatu Ora to produce and deliver a range of information pamphlets. The pamphlets developed follow the principles of Rauemi Atawhai; involve engagement with consumers - especially Māori, Pacific and low income; and include consultation with Te Whatu Ora. Diabetes NZ distributes pamphlets to medical centres, health and wellness organisations, sporting organisations and individuals.



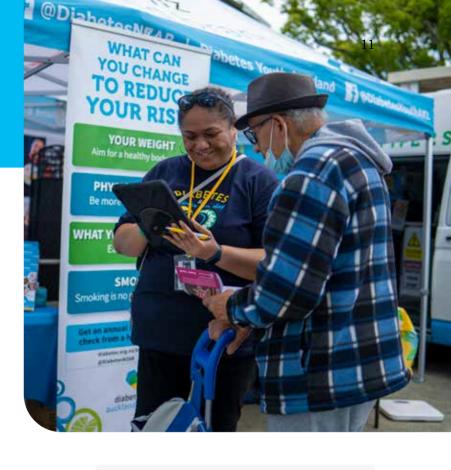
0800 Helpline Email Enquiries

Pamphlets distributed

# **Diabetes Community Coordinators**

Diabetes NZ, working in localities with Primary Health Organisations (PHOs), iwi and Pacific Health Providers has established the Diabetes Community Coordinator model; a successful community-based model, within the current health model and the Long-Term Conditions framework, to support those with diabetes and improve equity in accessing the healthcare system.

The heart of the model is the Diabetes Community Coordinator (DCC), a role which connects people with diabetes with education and clinical support. The Coordinators work alongside primary healthcare clinicians to enable access to healthcare, improve equity and provide psychosocial support to patients.



Number of Coord	dinators	7	3	
Number of Refer	rals	774	410	
Number of Partn Māori health pro Kura, community	viders,	151	78	
Coordinators	Referrals	Par	rtners	

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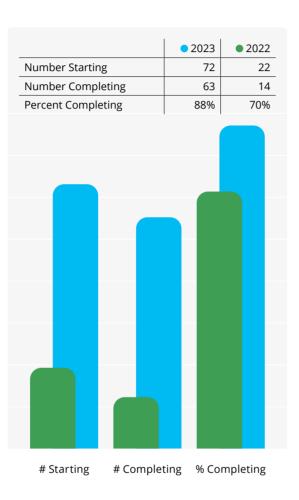
## Empower

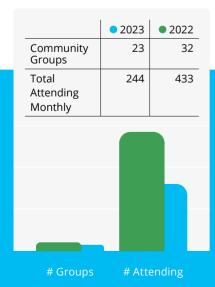
# Delivering DSME – "Diabetes: Your Life Your Journey"

Diabetes New Zealand is delivering an evidencebased programme created by Capital and Coast District Health Board in partnership with University of Otago.

This programme is designed to provide people living with Type 2 Diabetes the tools to start self-managing their diabetes, by attending a six-week programme. Participants throughout the course, learn about all aspects of type 2 diabetes.

The success for the participants is focused on their personal goal setting and increased selfmanagement of diabetes to achieve good blood glucose control.





### **Community Support Groups**

Peer support groups are a real benefit to those with diabetes or pre-diabetes and their family. They enable a place to meet, share and learn about effective self-management to prevent diabetes related complications and encourage each other.

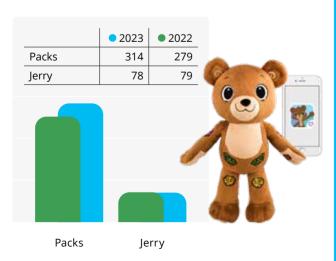


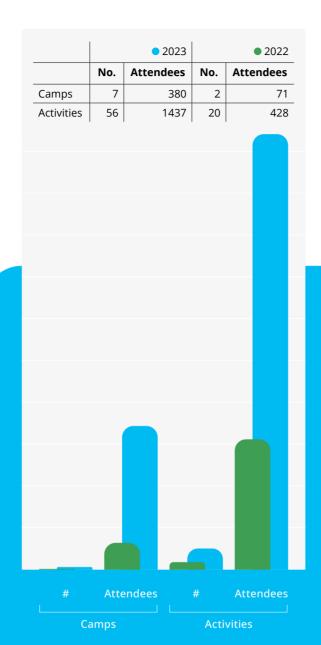
### Youth

### Type 1 Resources

Packs to every child under 18 years that is diagnosed with Type 1 diabetes. Each pack contains resources to help the whole whānau adjust to living with Type 1 diabetes. A diagnosis can be an extremely overwhelming time for the whole family. The packs are distributed by the diabetic team when a child is first admitted to hospital. They are used during their initial training and are an important reference tool at home.

The "Jerry the Bear" packs for children with Type 1 aged between 4-10 years are provided free of charge. Jerry the Bear helps children feel less alone and they can also learn to self manage their diabetes. Jerry also has Type 1 diabetes, and with the help of the Jerry the Bear App, children with Type 1 diabetes discover how they can still play with their friends, take part in sport and live life to the full.







The Live Brave Mana Ora programme is for children and youth with diabetes which supports them and their families by building confidence, independence and providing inspiration. Activities include daytime events and camps for both families and teens. COVID impacted on the number of camps and activities held in 2022.





# Champion and Advocate

### **Diabetes Action Month (DAM)**

#### **OBJECTIVE**

A public education campaign to raise awareness of the realities of living with diabetes and encourage action for New Zealand's largest and fastest growing health condition. Each campaign includes influencers who are prepared to be part of videos; partnerships with specialist services and experts who provide information and advice; community participation in regional events; community digital engagement.

#### **ACHIEVEMENTS**

**Campaigns:** 

#### 2022 – Diabetes Matters 2021 – Step Up for Diabetes

**Focus:** Language, Nutrition, **Focus:** Foot health

Movement & Prevention Facebook live: • Session 1: Footcare and Diabetes

Facebook live: • Session 1: Nutrition • Session 2: 100 years of Insulin

• Session 2: Prevention Campaigns: • Sneaker Friday

Sneaker Friday
 Health Literacy Video

Health Literacy Videos
 Fitbit 250 Challenge

• Language Matters resource • Mr Vintage Resources

National Survey on Language MattersDiabetes Matters podcast series











#### Communication

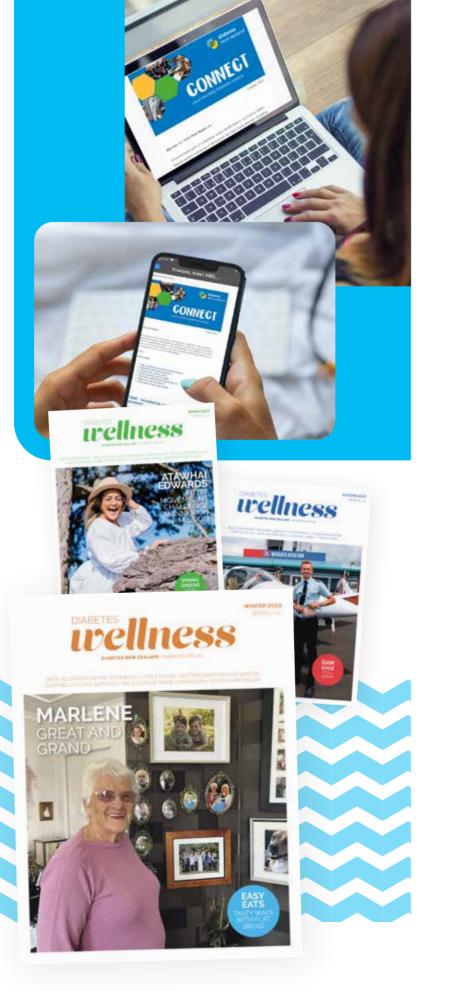
Regular communication includes:

- Wellness a quarterly magazine which is a trusted source of health and lifestyle information for people with diabetes, their families and health professionals.
- CONNECT a monthly electronic newsletter which includes a selection of news, personal stories, blogs and recipes which all link to the Diabetes NZ website.

	• 2023	• 2022
Wellness Magazine – printed	15,910	14,927
Well Magazine via Issuu (online impressions)	92,970	58,777

Printed

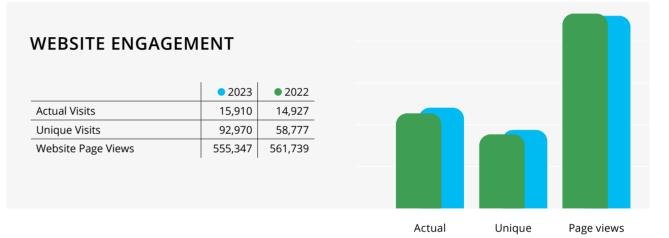
Digital



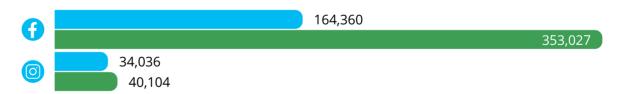
### Website

The website provides Diabetes NZ the opportunity to create content where we honour and embrace the principles of Te Tiriti o Waitangi, and we honour and embrace the enduring cultural values that bind Pacific peoples, and the Yavu foundations of Pacific engagement.



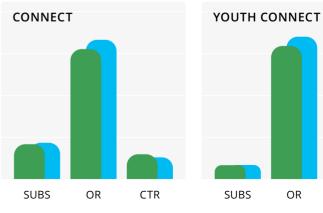


### Social Reach •2023 •2022



#### **Email**

		I
CONNECT	• 2023	• 2022
Subscribers	11,725	11,250
Open rate	45%	42%
Click through rate	7%	8%
		'
YOUTH CONNECT	• 2023	• 2022
Subscribers	453	447



OR

CTR

### Prevention

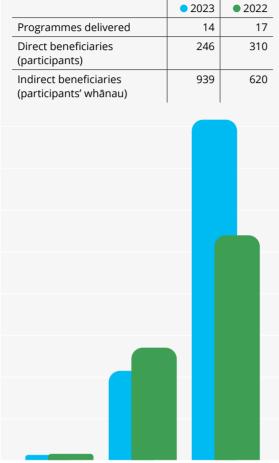
### HOPE (Healthy Options Positive Eating) Programme AUCKLAND BASED

The aim of the HOPE programme, a culturally appropriate family-centred course, is to foster healthier lifestyles amongst those most at risk, leading to a reduction in the incidence of diabetes and diabetes complications. The HOPE courses are run over four weeks in community settings and online through closed Facebook groups (HOPE@ Home) by trained volunteer HOPE Champions.

The sessions are followed by one month and three-month follow-ups. The HOPE programme has been proven to create social value across different aspects of people's lives with proven lifestyle changes.

# Mobile Van AUCKLAND BASED

The Mobile Diabetes Awareness Service is a prevention service that removes the time, cost and cultural barriers that prevent people from visiting their GP by taking free diabetes education and testing into communities at times and places that 'high risk' people gather. Capturing those at risk of diabetes early will lead to a reduction in the number of people being diagnosed with pre-diabetes and diabetes; a reduction in future complications from diabetes; and people establishing new healthier lifestyles and sharing that help to encourage others.



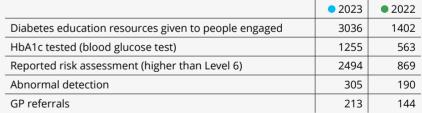
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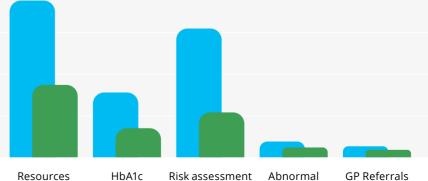
Printed





Digital





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# 2023 Summary Financial Statements

Diabetes New Zealand (DNZ) is a charitable trust registered under the Charities Act 2005 on 25 October 2007, registration number CC11432. Diabetes NZ supports a National Office and has regional offices throughout New Zealand.

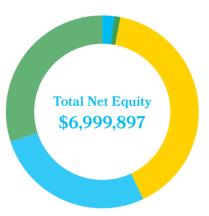
The financial statements for the year ended 30 June 2023 and the accompanying notes consolidate and summarise the financial results of activities carried out by DNZ and The Sir Ernest Davis Diabetes (Auckland) Endowment Fund and The John Nesfield Trust.



Magazine subs	34,115	1%
Sales of goods and services	418,571	11%
Investment Income	585,363	15%
Other	78,065	2%
Donations and Fundraising	536,104	14%
Te Whatu Ora Health NZ and PHO	728,422	19%
Grants	835,026	22%
Pub Charity	180,000	5%
Lotteries	375,000	10%
Legacies, bequests and endowments	67,042	2%



Goods and services	1,038,237	27%
Fundraising expenses	31,204	1%
Employee benefits	2,039,916	53%
Audit and Governance	47,892	1%
Other expenses	715,440	18%



Accumulated Revenue and Expense	2,818,006	2%
Sir Ernest Davis Diabetes Endowment Fund	1,893,775	1%
John Nesfield Trust Fund	2,092,946	40%
McLaren Fund	146,463	27%
Jean Murray Bequest Fund	d <b>48,707</b>	30%



# Consolidated Statement of Comprehensive Revenue and Expense for the Year ended 30 June 2023

	Note	2023	2022
Revenue		\$	\$
REVENUE FROM EXCHANGE TRANSACTIONS			
Magazine subscriptions		34,115	39,602
Sales of goods and services		285,373	214,591
Rendering of services		133,198	44,385
Interest received		115,278	81,295
Dividends received		106,887	111,263
Rent received		42,817	43,578
Other exchange revenue		35,248	11,728
Total Revenue from Exchange Transactions		752,916	546,442
REVENUE FROM NON-EXCHANGE TRANSACTIONS			
Grants		1,390,026	1,270,860
Fundraising		285,975	148,976
Other fundraising from the public		62,109	80,214
Rendering of services – Te Whatu Ora Health New Zealand and PHO		728,422	445,879
Donations		188,020	318,246
Legacies, bequests and endowments		67,042	424,657
Total Revenue from Non-exchange Transactions		2,721,594	2,688,832
Total Revenue from Non-exchange Transactions  Total Revenue		2,721,594 3,474,510	2,688,832 3,235,274
Total Revenue			
Total Revenue  Expenses			
Total Revenue  Expenses  EXPENSES ASSOCIATED WITH REVENUE GENERATION		3,474,510	3,235,274
Total Revenue  Expenses  EXPENSES ASSOCIATED WITH REVENUE GENERATION  Costs of sale of goods and services		<b>3,474,510</b> 421,221	<b>3,235,274</b> 327,130
Total Revenue  Expenses  EXPENSES ASSOCIATED WITH REVENUE GENERATION  Costs of sale of goods and services  Service delivery expenses		<b>3,474,510</b> 421,221 617,016	3,235,274 327,130 436,358
Total Revenue  Expenses  EXPENSES ASSOCIATED WITH REVENUE GENERATION  Costs of sale of goods and services  Service delivery expenses  Fundraising expenses		421,221 617,016 31,204	327,130 436,358 17,940
Total Revenue  Expenses  EXPENSES ASSOCIATED WITH REVENUE GENERATION  Costs of sale of goods and services  Service delivery expenses  Fundraising expenses  Total Expenses Associated with Revenue Generation		421,221 617,016 31,204	327,130 436,358 17,940
Expenses  EXPENSES ASSOCIATED WITH REVENUE GENERATION  Costs of sale of goods and services  Service delivery expenses  Fundraising expenses  Total Expenses Associated with Revenue Generation  OPERATING EXPENSES		421,221 617,016 31,204 1,069,441	3,235,274 327,130 436,358 17,940 781,428
Expenses  EXPENSES ASSOCIATED WITH REVENUE GENERATION  Costs of sale of goods and services  Service delivery expenses  Fundraising expenses  Total Expenses Associated with Revenue Generation  OPERATING EXPENSES  Employee benefits		3,474,510 421,221 617,016 31,204 1,069,441 2,039,916	3,235,274  327,130 436,358 17,940 781,428
Total Revenue  Expenses  EXPENSES ASSOCIATED WITH REVENUE GENERATION  Costs of sale of goods and services  Service delivery expenses  Fundraising expenses  Total Expenses Associated with Revenue Generation  OPERATING EXPENSES  Employee benefits  Board of Trustees honoraria		3,474,510 421,221 617,016 31,204 1,069,441 2,039,916 12,500	3,235,274  327,130 436,358 17,940 781,428  1,673,423 5,000
Total Revenue  Expenses  EXPENSES ASSOCIATED WITH REVENUE GENERATION  Costs of sale of goods and services  Service delivery expenses  Fundraising expenses  Total Expenses Associated with Revenue Generation  OPERATING EXPENSES  Employee benefits  Board of Trustees honoraria  Audit fees		3,474,510  421,221 617,016 31,204  1,069,441  2,039,916 12,500 35,392	3,235,274  327,130 436,358 17,940 781,428  1,673,423 5,000 29,062
Total Revenue  Expenses  EXPENSES ASSOCIATED WITH REVENUE GENERATION  Costs of sale of goods and services  Service delivery expenses  Fundraising expenses  Total Expenses Associated with Revenue Generation  OPERATING EXPENSES  Employee benefits  Board of Trustees honoraria  Audit fees  Depreciation and amortisation		3,474,510  421,221 617,016 31,204  1,069,441  2,039,916 12,500 35,392 74,649	3,235,274  327,130 436,358 17,940  781,428  1,673,423 5,000 29,062 51,113
Expenses  EXPENSES ASSOCIATED WITH REVENUE GENERATION  Costs of sale of goods and services  Service delivery expenses  Fundraising expenses  Total Expenses Associated with Revenue Generation  OPERATING EXPENSES  Employee benefits  Board of Trustees honoraria  Audit fees  Depreciation and amortisation  Other operating expenses		3,474,510  421,221 617,016 31,204  1,069,441  2,039,916 12,500 35,392 74,649 640,791	3,235,274  327,130 436,358 17,940 781,428  1,673,423 5,000 29,062 51,113 539,199

# Consolidated Statement of Comprehensive Revenue and Expense Continued

	Note	2023	2022
		\$	\$
(Deficit)/Surplus for the year from Continuing Operations (Brought forward)		(398,179)	156,049
Non-Operating Activities			
Gain/(Loss) on revaluation of investments		363,198	(740,368)
Transfers to Diabetes New Zealand Research Foundation from:			
Thomas Edward Dawson Estate		0	235,073
Graeme Douglas Mack Estate		0	1,048,174
Sir Don Beaven Fund		0	416,179
Total Surplus/(Deficit) from Non-Operations Activities		363,198	(2,439,794)
Total (Deficit) for the year		(34,981)	(2,283,745)

The Diabetes New Zealand Consolidated financial reports were approved by the Diabetes New Zealand Board of Trustees on 22 September 2023. The summary statements cannot be expected to provide as complete an understanding as provided by the full financial reports. A copy of the full financial reports can be accessed by visiting the Diabetes NZ website at **diabetes.org.nz**. The auditor BDO has issued an unqualified opinion. These financial statements have been approved by the Audit, Investment and Risk Committee.

### **Consolidated Statement of Financial Position**

#### **AS AT 30 JUNE 2023**

	Note	2023	2022
Assets		\$	\$
CURRENT ASSETS			
Cash and cash equivalents	10	1,261,624	1,511,097
Receivables (from exchange transactions)	11	134,891	40,590
Prepayments		25,019	15,048
Inventories		20,832	55,193
GST Receivable		0	38,605
Investments	12	401,879	254,741
Total Current Assets		1,844,245	1,915,274
NON-CURRENT ASSETS			
Property, plant and equipment	13	105,769	163,172
Intangible assets	14	21,667	48,520
Investments	12	5,848,443	5,582,939
Total Non-Current Assets		5,975,879	5,794,631
TOTAL ASSETS		7,820,124	7,709,905
Liabilities			
CURRENT LIABILITIES			
Payables (from exchange transactions)	15	376,196	347,935
GST payable		16,252	0
Deferred exchange revenue		28,644	49,116
Deferred non-exchange revenue	17	399,135	440,640
Total Current Liabilities		820,227	837,691
TOTAL NET ASSETS / EQUITY		6,999,897	6,872,214
Net Assets / Equity			
Total Accumulated Revenue and Expense	19	2,818,006	2,872,368
SPECIAL PURPOSE RESERVES			
Defined Funds			
- McLaren Fund	19	146,463	141,427
- Jean Murray Bequest Fund	19	48,707	45,626
- Sir Ernest Davis Diabetes (Auckland) Endowment Fund	19	1,893,775	1,801,769
- John Nesfield Trust Fund	19	2,092,946	2,011,024
Total Special Purpose Reserves		4,181,891	3,999,846
TOTAL NET ASSETS / EQUITY		6,999,897	6,872,214

# Thank you

Diabetes NZ is grateful for the wonderful support we receive from our Champion sponsors, donors, grant funders, fundraisers and supporters enabling our offices and volunteers to support and advocate for people with diabetes and their families/whānau.

#### **Champion Sponsors**







#### **Grants and Major Donations**







Pub 🍀

Charity













#### **Diabetes Action Month 2022 SPONSORS**









#### **PARTNERS**





#### Live Brave Mana Ora Programme **Sponsors And Partners**











- Advance Ashburton Community Foundation
- Air Rescue and Community Services
- Auckland Airport Community Trust
- Bendigo Valley Sports & Charity Foundation
- BlueSky Community Trust
- Christchurch Airport Community Fund
- Christchurch Casinos Charitable Community
- Community Trust South
- D V Bryant Trust Public Trust
- David Levene Foundation
- Dragon Community Trust
- Dunedin Casino Charitable Trust
- Dunedin City Council
- Eastern & Central Community Trust

- First Light Foundation
- Gallagher Charitable Trust
- Giltrap Community Trust
- Grassroots Trust
- Grassroots Trust Central
- Guy Anson Waddel Charitable Trust, proudly managed by Perpetual Guardian
- Hamilton City Council
- Hutt Mana Charitable Trust
- ILT Foundation
- ILT Trust
- J A Redwood Charitable Trust, proudly managed by Perpetual Guardian
- Kiwi Gaming Trust
- Lois Dalley Charitable Trust

- Louisa and Patrick Emmett Murphy Foundation
- Public Trust
- Milestone Foun dation
- Nelson City Council
- NH Taylor Charitable Trust, proudly managed by Perpetual Guardian
- Nora Howell Trust
- NR & JH Thomson Charitable Trust, proudly managed by Perpetual Guardian
- NZCT Community Trust
- Page Trust Public Trust
- Rano Community Trust
- Rātā Foundation
- Rotorua Trust
- Roy Owen Dixey Charitable Trust Public Trust

- Tasman District Council Youth
- Taupō District Council
- TECT (Tauranga Energy Consumer Trust)
- The Estate of Ernest Hyam Davis & The Ted and Mollie Carr Endowment Trust, proudly managed by Perpetual Guardian
- The Trusts Community Foundation
- Toi Foundation
- Top of the South Community Foundation
- Trust Tairāwhiti
- Trust Waikato
- Vernon Hall Trust, proudly managed by Perpetual Guardian
- W Duncan Bickley Trust Fund, proudly managed by Perpetual Guardian
- Waipā District Council

#### To our Fundraisers

Last but not least, thank you from the bottom of our hearts for your support. There are too many of you to mention individually but without your grassroots support in the community we would not be able to raise awareness about diabetes the way we do.







PO Box 12 441, Wellington 6144

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