“Santé Diabète has for several years developed the approach of strengthening public policies instead of substituting for them. That strategy has produced impressive results for people in Burkina Faso, Mali, and the Comoros in 2017-18. Over the past two years, Santé Diabète has expanded its educational and advocacy activities in Northern countries, especially in France. The organisation’s values, specifically ensuring equitable access to care regardless of what disease afflicts patients or where they live, do not apply to just one region. We must defend these values in developing countries as well as in France. The health challenges that the developing world confronts closely parallel those the West faces, so experiences are worth sharing. Moreover, neither region is an impenetrable fortress. The bridges connecting them, especially migration, create a multi-faceted and complex reality that requires us to examine how health systems respond here and abroad.

Over the past two years, Santé Diabète has begun to make an impact by applying the added value of its work in the South to Northern nations (prevention workshops for children who migrate alone; staff from the Comoros and the Réunion University Hospital sharing expertise; adapting Malian prevention pamphlets for France, etc.). Santé Diabète has also developed new ways for people from the various countries where it operates to collaborate (i.e., sharing experience between the Comoros and Mali). Santé Diabète has also continued to advocate internationally, and in 2017, it organised a successful conference in Grenoble for all Francophone stakeholders in the fight against diabetes. Another milestone was our participation in the United Nations summit on Non-Communicable Diseases (NCDs), where we were the only representatives from French civil society.

Our NGO is becoming an increasingly vital catalyst that is fostering a large network of partners as well as South-South and North-South collaborations. This growing network symbolises the need to combat the global social and health crisis that diabetes represents.”
“2017 and 2018 were notable for enhancing the activities and results of our current three-year programme. The quality of our work in both France and the countries where we operate has earned recognition from our partners. In this context, Santé Diabète has committed to a dynamic of sound growth that helps us maintain both the high quality of our work and a clear vision of the future.

We carry out our activities mainly in the countries where we intervene. Those activities include supporting primary prevention, expanding care, therapeutic education, equitable access to treatment, strengthening civil society, supporting public policy, and advocacy. Few NGOs dedicated to a single, critical public health issue delve into it so fully and address all of its dimensions. However, only that level of commitment can achieve the substantial changes needed to improve the health of individuals.

Santé Diabète is fully committed not only to the programmes and interventions it carries out, but also to its networks. Those connections help us advance strategies and policies for promoting diabetes care nationally and globally. We can carry on this fight thanks to the strength of our partner network (which includes universities, hospitals, media, foundations, governments, and regional organisations) that Santé Diabète has built so patiently.

Finally, Santé Diabète has gained legitimacy and prestige because it has preserved its local roots, both in Grenoble, in the Auvergne Rhône Alpes region but also in the cross-border area. These roots remain vital and help nourish Santé Diabète, increasing the impacts of the change and results we achieve and the fights we wage. We’ve the ability in France to address prevention, patient care, and to influence the legal and regulatory environments. We are encouraged by our practices and experiences in other geographic and cultural regions, and can build bridges to connect them. We can combat discrimination, educate people around the world, and take action to respond to the triple health/food/production threat we face.

I also need to thank our staff and volunteers, as well as the many technical and funding partners who have supported our efforts for years”.

"USING OUR NETWORK’S STRENGTH TO ACHIEVE SOUND GROWTH"
David Hacquin - Santé Diabète President
**OUR MISSION**

Building and strengthening health systems to achieve better diabetes prevention and care

Santé Diabète has a team of 30 people and more than 200 local and international partners. They work in the field daily to save lives through better diabetes prevention and care, striving to improve quality of life for people with this chronic disease.

Santé Diabète has gained unique diabetes expertise in Africa and developing countries, knowledge and experience that international actors regularly seek (for example, for missions to strengthen national health systems or studies conducted by experts). Since 2011, Santé Diabète develops in France a program of education to the health and the international citizenship.

**OUR APPROACH**

Santé Diabète stands out for how it operates

- We are the only NGO that specialises in fighting diabetes in Africa
- We make diabetes care sustainable by strengthening local health systems
- We work directly with ministries; health care leaders; and local, regional, and national care institutions
- We build strong civil societies and support patient associations
- We promote South-North, South-South, and North-South collaboration
- We inform the world through international advocacy
- We contribute to the global fight against diabetes as the only independent NGO that is recognised by the World Health Organisation (WHO) and serves as a member of its global NCD coordination system
- We work with an international network to find local solutions
- Our organisation and our leadership are based in West Africa, closer to the field

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**SANTÉ DIABÈTE IN 2017-2018**

- **30 collaborators**
- **200 partners**
- **5,095 students educated**
- **39,196 people at risk screened**
- **1,237 health professionals trained**
- **16,000 people with type 2 diabetes received care**
- **729 children with type 1 diabetes received care**

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Santé Diabète is a non-governmental organisation founded in 2001. Its mission is to address the lack of access to care for African people with diabetes and the failure of development stakeholders to manage this health emergency.

Santé Diabète began working in Mali, then expanded its operations to Burkina Faso, Senegal, the Union of the Comoros, and France (the organisation’s home). Santé Diabète now has permanent teams in all five countries.
15 YEARS OF ACTION

**Mali**
- **2001**: The NGO “Santé Diabète MALI” was founded.
- **2003**: The NGO began its first activity in Mali.
- **2012**: Political and humanitarian crisis in Mali. Santé Diabète mobilised and provided free emergency insulin to 1,814 people with diabetes who could have died without it.

**Burkina Faso**
- **2011**: Santé Diabète organised a delegation to Burkina Faso. Santé Diabète MALI changed its name and became Santé Diabète Burkina Faso.

**France**
- **2001**: The NGO “Santé Diabète MALI” was founded.
- **2003**: The NGO began its first activity in Mali.
- **2012**: Political and humanitarian crisis in Mali. Santé Diabète mobilised and provided free emergency insulin to 1,814 people with diabetes who could have died without it.

**Union of the Comoros**
- **2016**: Santé Diabète organised a delegation to the Union of the Comoros and launched a programme to fight diabetes in the island nation.

2017: Start of a three-year programme agreement. Santé Diabète implemented a programme combining diabetes / HIV and diabetes / TB care funded by the 5% Initiative.

2018: Santé Diabète was nominated to serve as a member at the Third United Nations High-level Meeting on NCDs in New York. Santé Diabète was the only French civil society representative among the 27 international delegations.
FINANCIAL TRANSPARENCY

WE SPEND 98.5% OF OUR FUNDS DIRECTLY IN THE FIELD

Our Administrative and Financial Coordinator (AFC) and the Administrative and Financial Directors (AFDs) of each delegation work to improve administration and finance. In 2017 and 2018, they achieved substantial progress creating procedures to harmonise accounting, finance, and administration, as well as for internal and external control.

In 2017, we completed the process of transitioning accounting, payroll, and supply management to software managers at our head office and in our delegations.

To complement the external controls achieved via international audits, in 2018 we implemented a quarterly internal control procedure. Led by the Santé Diabète AFC, this procedure aims to monitor accounting and financial records at the NGO’s head office and in all delegations. This step enhanced internal and external controls help us ensure greater financial transparency at Santé Diabète.
<table>
<thead>
<tr>
<th>JOBS BREAKDOWN (€)</th>
<th>SOURCE OF FUNDS (€)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supply procurement 67 824,21</td>
<td>Sale of goods 66 572,96</td>
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<tr>
<td>Stock variation [supplies] 8 438,22</td>
<td>Sales income [goods and services] 92 782,29</td>
</tr>
<tr>
<td>Other external expenses 686 316,80</td>
<td>Operating grants 967 974,26</td>
</tr>
<tr>
<td>Taxes, duties, and similar payments 524,54</td>
<td>Other income 18 239,90</td>
</tr>
<tr>
<td>Staff compensation 304 439,92</td>
<td>Financial income 3 786,78</td>
</tr>
<tr>
<td>Payroll tax 60 342,32</td>
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<tr>
<td>Depreciation and amortisation 34 708,76</td>
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<tr>
<td>Other expenses 14 863,78</td>
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<tr>
<td>Financial expenses 326,63</td>
<td>-</td>
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<tr>
<td>SPECIAL EXPENSES (II) 594 567,86</td>
<td>SPECIAL INCOME (II) 718 139,97</td>
</tr>
<tr>
<td>TAXES ON BENEFITS (III) 849,00</td>
<td>-</td>
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<tr>
<td>TOTAL EXPENSES (I+II+III) 1 773 202,05</td>
<td>TOTAL INCOME (I+II) 1 867 497,16</td>
</tr>
<tr>
<td>PROFITS OR LOSSES 94 294,11</td>
<td>-</td>
</tr>
<tr>
<td>TOTAL 1 867 497,16</td>
<td>TOTAL 1 867 497,16</td>
</tr>
<tr>
<td>FREE USE OF GOODS 3 218 005,70</td>
<td>VOLUNTEER WORK 4 800,00</td>
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<tr>
<td>CONTRIBUTIONS -</td>
<td>IN-KIND CONTRIBUTIONS -</td>
</tr>
<tr>
<td>VOLUNTEER STAFF 4 800,00</td>
<td>IN-KIND DONATIONS 3 218 005,70</td>
</tr>
<tr>
<td>GENERAL TOTAL 5 090 302,86</td>
<td>GENERAL TOTAL 5 090 302,86</td>
</tr>
</tbody>
</table>

**FINANCIAL TRANSPARENCY**

**Social Missions** are programmes that Santé Diabète has implemented around the world, and all head office activities related to coordinating missions. The costs of international educational, development, and solidarity actions are part of our social mission and are listed under this heading.

**Operating Costs** are all general costs that Santé Diabète departments pay, as well as costs related to informing and educating the general public, such as the cost of our website.

**Association Funds Without Right of Recovery** are reserve funds that Santé Diabète set aside at its creation and that belong to the organisation. Nearly all reserve funds are in the treasury and are available to fund activities while donor reimbursement funds are pending.

**Debts** are amounts payable to suppliers, social security funds, and funds that institutional donors provide but Santé Diabète does not use during the year.

**Deferred Income** is a sum that Santé Diabète will receive in N+1 that it records in N.

**Association Funds Without Right of Recovery** are funds that do not definitively belong to Santé Diabète and that the organisation must use in full to ensure implementation of its activities.

**A Surplus** is the excess amount in income accounts compared to expense accounts.

**Fixed Assets** are buildings, vehicles, computer equipment, etc.

**Stocks** refers to the value of items in stock.

**Receivables** are money due from clients and donors.

**Treasury (Liquid Assets and Cash)** refers to money that is available immediately for Santé Diabète’s needs.

**Deferred Expenses** are expenses that Santé Diabète will pay in N+1 that it records in N.
# OUR AREAS OF EXPERTISE

<table>
<thead>
<tr>
<th>Area of Expertise</th>
<th>Mali</th>
<th>Burkina-Faso</th>
<th>Union of the comoros</th>
<th>France</th>
<th>International</th>
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</thead>
<tbody>
<tr>
<td>Primary prevention</td>
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<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
</tr>
<tr>
<td>Strengthening health care</td>
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<td>✔️</td>
<td>✔️</td>
<td></td>
</tr>
<tr>
<td>Diabetes humanitarian response</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Therapeutic education</td>
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<td>✔️</td>
<td>✔️</td>
<td></td>
</tr>
<tr>
<td>Access to medication</td>
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<td>✔️</td>
<td></td>
</tr>
<tr>
<td>Strengthening civil society</td>
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<td>✔️</td>
<td>✔️</td>
<td></td>
</tr>
<tr>
<td>Supporting public health policy</td>
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<td>✔️</td>
<td>✔️</td>
<td></td>
</tr>
<tr>
<td>Educating citizens and promoting international solidarity</td>
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<td></td>
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<td>✔️</td>
</tr>
<tr>
<td>Developing graduate training</td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Research</td>
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<td>✔️</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
DIABETES AROUND THE WORLD: A GLOBAL HEALTH EMERGENCY

DIABETES

Diabetes is a disease linked to pancreatic dysfunction and characterised by chronic hyperglycaemia, an excess of sugar in blood.

There are three main types of diabetes:

- **Type 1 diabetes** affects 10% of people with diabetes, mainly children and young adults: the pancreas do not produce any insulin at all. Patients must therefore “compensate artificially” with daily, subcutaneous insulin injections.

- **Type 2 diabetes**, which affects 90% of people with diabetes; chiefly adults who are over age 45, sedentary, and overweight; is related to poor use of insulin by the body’s cells.

- **Gestational diabetes** occurs in pregnant women, who experience severe, variable hyperglycaemia. They also have a cumulative risk of complications during pregnancy and delivery and of then developing type 2 diabetes.

THE FIGHT AGAINST DIABETES

A global health emergency

Diabetes is now the seventh-leading cause of death globally. It has a major impact on every nation, high- or low-income, and is a true health emergency.

The alarming progression of diabetes is directly related to lifestyle changes (lack of physical activity, large-scale urbanisation, and how we produce and consume food). How we live has a strong impact on our health and our environment, raising the risk of developing NCDs such as diabetes.

DIABETES AROUND THE WORLD

425 million people living with diabetes in 2017

8 in 10 people with diabetes live in a developing country

7th leading cause of death

6% of the world’s population

1 person dies of diabetes every 6 seconds

This figure has quadrupled in just 30 years, and the International Diabetes Federation estimates it will grow to 628 million by 2045.
DIABETES: AN “EPIDEMIC” IN AFRICA

WHY IS DIABETES PROGRESSING SO FAST IN AFRICA?

Mention food problems in Africa, and we imagine adults with gaunt faces and emaciated children with swollen bellies. What we’ve actually seen most often across Africa in recent years is a transition of malnutrition from nutritional deficiency to excess. Obesity is a much greater problem than low body weight and is an urban phenomenon. In African cities, one in four women and one in six men is overweight.

This obesity explosion, which has hit the wealthy as well as other classes, is fundamentally linked to a nutritional transition. That transition features a gradual evolution from a bland diet rich in starch and fibre but low in fat. Much more common now are more varied diets rich in sugar, saturated animal fats, and prepared foods; but lacking in fruits, vegetables, and fibre.

This evolution in diet often coincides with a transition from regular physical activity to a more sedentary lifestyle. Lifestyles are becoming more sedentary due to rapid urbanisation (people working in offices and using motorised transportation, and children spending much more time in front of video game screens).

Social perceptions also play a role in obesity in Africa, where excess weight and obesity are positive outward signs of prosperity and good health.

THE CHALLENGES OF CARE IN AFRICA

- 69.2% of people with type 2 diabetes remain undiagnosed and thus lack care, resulting in more disabling complications
- African children with type 1 diabetes have a life expectancy of less than one year after diagnosis
- A family affected by diabetes spends an average of 17% of its annual income on treating the disease

Diabetes is no longer a disease of wealthy nations. Africa now has 16 million people with diabetes, and is experiencing the heavy impact of the disease. Projections of diabetes progression are alarming. In the next 30 years, the prevalence of diabetes in Africa will likely become the world’s highest, increasing by 140% (an estimated 34.2 million people in 2040). Diabetes prevalence will then exceed 5% of Africa’s population.

Adding value to national policy documents

- We helped draft the new national policy on fighting NCDs and ensured that planning for the new universal health insurance programme addressed the problem of diabetes.

Prevention

In partnership with the Ministries of Health and Education, as well as patient associations, we carried out many activities that contributed to better prevention and earlier diagnosis of diabetes:

- To mark annual World Diabetes Days, we supported prevention campaigns in Malian media.
- We implemented a prevention campaign using SMS that sent nearly 30,000 messages.
- We organised 71 events offering diabetes screening and 60 sessions on preventing diabetes risk factors.

Enhancing skills of health professionals

- We provided advanced training to specialists.
- We created and supported a network of expert physicians who provide consultations.
- We implemented decentralised training targeting the broader community of health professionals to help them incorporate diabetes in diagnostic and referral practices.

Supporting civil society

We supported and strengthened patient associations, which are key players in the fight for effective diabetes control. These groups have been a pillar of our strategy since Santé Diabète’s creation.

We continued in 2017-18 to work on building patient associations and expanding their capacities (mobilisation, communication, and advocacy) so they can play a central and sustained role in the fight against diabetes in Mali:

- We organised detailed training before each prevention and advocacy activity.
- We carried out all activities to support policy and prevention efforts by collaborating closely with the Malian National Diabetes Federation and the Endocrinology and Diabetes Association of Mali.
Management of children with diabetes in 19 health centres in Mali has increased 24.5%.

<table>
<thead>
<tr>
<th>Sites</th>
<th>Patient total Jan. 1st 2018</th>
<th>Patient total Dec. 31st 2018</th>
<th>Increase in patient total (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mali Hospital</td>
<td>450</td>
<td>574</td>
<td>24.5%</td>
</tr>
<tr>
<td>Regional</td>
<td>105</td>
<td>117</td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>555</td>
<td>691</td>
<td>24.5%</td>
</tr>
</tbody>
</table>

An academic training programme - organised by the Ministry of Higher Education and Research, Mali Hospital, and Santé Diabète - has trained 16 endocrinologists, 14 of them already serving in various health facilities across Mali in 2018.

IN 2017 AND 2018, WE:

- screened 23,437 people with risk factors for diabetes
- provided diabetes training to 849 health professionals
- provided free treatment to 729 children with diabetes
- held educational sessions on diabetes risk and prevention for 2,185 students

FOCUS: Education workshops for young people with diabetes

Since 2017, Santé Diabète has piloted educational workshops for young people led by physicians and trainers. Workshops split participants into two groups (children ages 2-14 with their parents and adolescents ages 15 and older) to pursue a dual objective. Participants shared their experiences of diabetes and supported each other while learning to manage the disease more effectively by attending therapeutic education sessions.

These workshops have been highly successful, with over 500 children participating in them to date.

Video "Educational workshops for Malian children with type 1 diabetes": https://www.youtube.com/watch?v=d PvPz6_EU

PERSONAL STORIES

Makani Diakité, age 18

"Before I came here, I never knew there were other girls who could have diabetes, just like I do, but still live a good life. Before I participated in this educational camp, I had no idea what blood sugar was or how to do an injection. I learned all that here, and now feel much more at ease"
Adding value to national policy documents

• We helped draft a national diabetes management guide.

Prevention

In partnership with the Ministries of Health and Education, as well as patient associations, we implemented many measures that contributed to better prevention and earlier diagnosis of diabetes:

• To mark annual World Diabetes Days, we supported prevention campaigns in Burkina Faso’s media.

• We organised 50 events to provide diabetes screening and information on risk factors to Burkina Faso residents.

• We held 122 diabetes risk factor prevention sessions in primary and secondary schools, reaching a total of 3,138 students.

Enhancing skills of health professionals

• We trained 140 health professionals in Burkina Faso’s regions on diabetes management.

• We created and supported a network of expert physicians who provide consultations (Yalgado University Hospital).

• We provided training to health professionals focusing on diabetes, HIV, and TB to help them manage this combination of comorbidities (training 16 patient peer educators).

Supporting civil society

• Santé Diabète has worked closely with two key stakeholders in the fight against diabetes in Burkina Faso: the Burkina Faso Diabetes Patient Support Association and the Living with Diabetes Association.

Our challenge now is to expand medical training while strengthening the role of patient associations (prevention and therapeutic education measures).
IN 2017 AND 2018, WE:

- screened 11,822 people with risk factors for diabetes
- provided diabetes training to 140 health professionals
- trained 16 patient peer educators
- held educational sessions on diabetes risk and prevention attended by 3,138 students

FOCUS
Training on HIV / diabetes / tuberculosis comorbidity

In 2018, we implemented a cycle of continuous medical training for health professionals, doctors and nurses. This training focused on managing HIV / diabetes / tuberculosis comorbidities. We also created a network of peer educators from organisations for patients with diabetes and HIV/AIDS. Our initial goal was to promote management of patients with this combination of comorbidities. However, this training helped us integrate the prevention of diabetes risk factors in people with HIV/AIDS and preventing HIV/AIDS in people with diabetes. This pilot initiative is vital to strengthening Burkina Faso’s health system, and we’ll continue to pursue and expand it in 2019.

In 2013, just 3.8% of health districts in Burkina Faso had health professionals with training in diabetes management. By 2018, Santé Diabète’s efforts had raised this figure to 100%.
Adding value to national policy documents

- We helped draft a national strategy to fight diabetes across the Union of the Comoros.
- Santé Diabète organised a study visit to Mali to share experiences with partners in the fight against diabetes.

Prevention

In partnership with the Ministries of Health and Education, we implemented many measures that contributed to better prevention and earlier diagnosis of diabetes:

- To mark annual World Diabetes Days, we supported prevention campaigns in Comorian media.
- We held 60 events offering diabetes screening and information on risk factors that drew 6,088 people and resulted in 488 new diagnoses of diabetes.

Enhancing the skills of health professionals

Working with the Ministry of Health, we implemented a continuing medical training programme to enhance the diabetes management skills of health professionals. This programme focused on two main areas:

- Training 184 health professionals from secondary and community hospitals on three Comorian islands.
- Providing these hospitals materials to improve their diagnostic techniques (such as blood glucose and Hba1c metres).

Supporting civil society

- Santé Diabète helped organise three main patient associations for three Comorian islands: NARIENSHI, The Comorian Association to Fight Diabetes, and the Mohéli Centre for People with Diabetes. These efforts will help patients play a role in the health care they receive.
- Throughout these interventions, Santé Diabète has taken care not to replace its local partners, but to try and enhance their capacities and help them act independently.
In 2017 and 2018, we:

- screened 6,088 people with risk factors for diabetes
- provided diabetes training to 184 health professionals
- organised 3 patient associations
- provided 4 glycated haemoglobin metres to hospitals on three Comorian islands (the first metres in the country)

**FOCUS**

Training health professionals with support from Réunion University Hospital and Santé Diabète

In 2018, Santé Diabète continued to partner with the Ministry of Health to train health professionals who work in hospitals on three Comorian islands. In 2017-18, this programme provided training to 153 health professionals who received training in managing diabetes (type 1, type 2, and gestational diabetes) and complications of the disease. Teams from Santé Diabète worked with the Heads of the Endocrinology and Diabetes Departments at Réunion University Hospital to prepare the contents of these training sessions: Dr Nathalie Le Moullec and Dr Xavier Debussche.

**PERSONAL STORIES**

Mariatou Assane, age 50

“The glycated haemoglobin metres that Santé Diabète provided to the Fomboni Regional Hospital help me manage my diabetes more effectively. I no longer have to travel to Mayotte or to Tanzania just have these tests”.

Mariamou Assane, a 50-year-old woman, works as a supervisor at the hospital in Fomboni. She thanked Santé Diabète when the NGO delivered glycated haemoglobin readers. Mariamou also has diabetes, and formerly had to travel with her husband to Mayotte or Dar Es-Salaam to have her glycated haemoglobin measured. Those trips imposed significant costs on her entire family.
Striving to refine activity in France

In 2017-18, Santé Diabète continued to refine the actions it has taken since 2011:

• Creating and adapting prevention and educational tools we’ve developed in the South.

• Reviewing methods we’ve used for interventions in primary/secondary schools, and explored a new area in order to implement activities for migrant populations.

• The pilot actions we’ve implemented in partnership with various organisations have been highly successful. We are also now evaluating how the needs of Santé Diabète have evolved. The conclusions of this study will help us plan our strategy for intervening in France on a larger scale starting in 2020.

FRANCE: Key Figures

Diabetes now affects four million French people, a figure that has grown six-fold in just 30 years. Ninety percent of these people have type 2 diabetes, but nearly 700,000 people with diabetes ignore their condition. Changes in lifestyle in developing countries are directly connected to the rise in diabetes. A combination of social and environmental factors are also important factors: excess weight, obesity, lack of physical activity, and sedentary lifestyles. Diabetes also affects the most socially fragile people, and prevalence is much higher in the most disadvantaged communities.

The health challenges facing the developing world now parallel more closely those facing the West (migration, social inequality, and how they impact health). We face a dual challenge: creating a dynamic for expanding our prevention actions to reach new groups (such as isolated child migrants, employees in companies) and developing new North-South synergies via our programmes in Africa (adapting tools for France).

Human Development Index (HDI) rank:
22nd (of 189 countries)

Diabetes prevalence:
5.4%

Excessive weight:
1 of 2 French people

Obesity:
15%

Cost of diabetes:
19 billion € annually, 15% of national health expenditures (9% of European health expenditures)

OUR ACTION

Santé Diabète Head Office

The Santé Diabète Head Office in Grenoble ensures the overall consistency of our general strategy. The office coordinates with multiple field delegations in Africa as well as in France, where we’ve implemented multiple pilot actions since 2011. The Head Office guides the administrative, HR, technical and financial aspects of our missions. It also coordinates our national and global advocacy efforts (see the Communication section for more detail). Those efforts aim to achieve the maximum possible influence in public institutions and policy, and thus greater consideration of NCDs in both North and South.

Striving to refine activity in France

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• Reviewing methods we’ve used for interventions in primary/secondary schools, and explored a new area in order to implement activities for migrant populations.

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Educational actions

In 2017-18, Santé Diabète carried out various educational actions across the Auvergne-Rhône-Alpes region:

• We provided information to 850 students through educational cartoons. Those animations focus on how lifestyles have changed in the North and South and the consequences of those changes for our health.

• We developed new educational tools for public schools: the Africa puzzle and the “Discovering the African Continent” playing cards.

• We participated in World Diabetes Day by proposing a prevention action in a private company.

• We educated 51 isolated child migrants in cooking and nutrition workshops that we organised in partnership with the organisation Cuisine Sans Frontières.
FRANCE

IN 2017 AND 2018, WE:

• developed 5 innovative prevention tools
• educated more than 850 students about the development of diabetes
• organised the 1st international Francophone conference focusing on the fight against diabetes
• published an editorial in the newspaper Le Monde that more than 700 organisations and influential people shared

PERSONAL STORIES

Pascale Trouve, maths teacher for allophone students in Grenoble (Mounier and Jean Jaurès Colleges)

"I noticed that students in my classes (single, migrant children, mostly from Sub-Saharan Africa) had little information about diet and always ate the same things (starchy fast foods). I therefore asked Santé Diabète to implement a project to educate students about the importance of a balanced diet for their health. This workshop helped students make direct connections between the typical diets in their home countries and the foods they found in France. Moreover, students learned what diabetes is and how to prevent it".


The April 2018 cooking and nutrition workshop in Grenoble that we organised in partnership with the organisation Cuisine Sans Frontières educated 51 isolated, child migrants.
EXAMINING HEALTH LITERACY IN PEOPLE WITH DIABETES IN MALI

The study of health literacy in diabetes patients in Mali will involve 360 patients in six health facilities in two areas in Mali (Bamako District and Ségou Region). Our teams in Mali work with partners in the field to coordinate this study: the Ministry of Health, Réunion University, and the team led by Prof. Osborne at Dakine University (Australia), which developed the questionnaire (HLQ).

In 2017, these partners finalised the protocol and Santé Diabète submitted it to the Mali School of Medicine Ethics Committee for approval. Santé Diabète will carry out the operational phase of the study in 2018 and 2019 and collaborate with its local partners until the study ends. We expect to publish results in 2020.

ACCISS STUDY

The Acciss Study is a multi-centre project carried out by Health Action International, the University of Geneva, and Boston University in the United States. Study centres are located in Mali, Tanzania, Peru, and Kyrgyzstan. The study aims to improve access to insulin by analysing two areas: opportunities and constraints related to the availability of insulin as well as the devices patients need to inject it (syringes, metres, and blood glucose test strips). Santé Diabète and its various partners began coordinating study execution in Mali in 2018 and will continue this work until the study ends in late 2020.

EXPERTISE MISSION IN TOGO

Santé Diabète helped the Malian government create a diabetes consultation registry of people with diabetes. This registry will collect information about patients and provide useful, reliable data from consultations to the health information system.

The Togo Ministry of Health wanted to develop such a registry and asked Santé Diabète in 2017 to organise a seven-day expertise mission. Santé Diabète provided experience and data collection tools it had developed in Mali to support the Ministry’s concept.
COMMUNICATIONS AND ADVOCACY

Our advocacy actions in 2017-18 helped increase our visibility on the world stage. They also exposed us to new perspectives through collaborations with global stakeholders in health, nutrition, and the environment. Continuing those partnerships is and will remain vital to combating diabetes and highlighting the challenges this global health emergency poses.

THIRD UNITED NATIONS HIGH-LEVEL MEETING ON NON-COMMUNICABLE DISEASES (NCDS)

The Third United Nations High-Level Meeting on Non-Communicable Diseases took place at UN Headquarters in New York on September 27th, 2018. Nearly sixty heads of state heard reports from an expert commission and civil society representatives. Stéphane Besançon, Santé Diabète’s Executive Director, was nominated to serve on this commission, and was the only French civil society representative among the 27 international representatives. His role in this meeting was a brilliant symbol of our organisation and its expertise, which enhance the legitimacy we’ve gained through our international advocacy.

A memorable moment: When Dr Tedros Adhanom Ghebreyesus asked participants to stand if an NCD affected them personally or they knew someone with an NCD, 300 rose from their seats.

FIRST ANNUAL “FRANCOPHONE GLOBAL HEALTH PERSPECTIVES” INTERNATIONAL CONFERENCE

Santé Diabète organised this first international conference on “Francophone Global Health Perspectives: synergies in the fight against diabetes and NCDs in Africa”. Fifty international experts attended the conference (researchers, scientists, and representatives from civil society and local governments) on December 19th and 20th 2017 in Grenoble. Ten papers were published after the conference.

Among the fifty participants were:

- The Mayor of Grenoble, the Vice-President of the Auvergne-Rhône-Alpes Region, the MP from Isère, and the Chair of the National Ethics Advisory Committee;
- The former Vice-President of the Republic of the Comoros;
- Eight representatives from the European Ministry of Foreign Affairs, the French Development Agency, and other French experts;
- Thirteen representatives from patient associations and civil society;
- Twenty-four representatives of universities and hospitals in Geneva, Montreal, Grenoble, Paris, Bamako, Ouagadougou, and Conakry.

The first international “Francophone Global Health Perspectives” conference was a success!
EDITORIAL CO-SIGNED BY SANTÉ DIABÈTE PUBLISHED IN THE NEWSPAPER LE MONDE

An editorial that we prepared was published in the newspaper Le Monde on September 19th 2018, co-signed by Cynthia Fleury, Gaël Giraud, Cyril Dion, Pierre Salignon, David Béran, Katie Dain, Jean Marie Milleliri, David Hacquin and Camille Mary, and our colleague Marion Nestle, author of the best sellers Food Politics and Soda politics. The editorial was shared widely in media outlets and social media networks.

Read the entire editorial: https://ideas4development.org/lutte-maladies-non-transmissibles-urgence/

INTERNATIONAL SCIENTIFIC AND PUBLICATION COMMITTEES

In 2017, our organisation joined multiple, high-level scientific committees Santé Diabète first joined the international committee of the journal The Lancet, “Diabetes in Sub-Saharan Africa”, then joined the Scientific Committees of the Geneva Health Forum (GLHF) and the World Diabetes Congress (WDC). Santé Diabète was the subject of a 45-minute Award Lecture at the WDC in December 2017 that recognised our 15 years of work.

Santé Diabète has joined two major international committees since January 2018. One is the body overseeing the International Diabetes Federation’s World Diabetes Atlas. Santé Diabète has also joined the UNRWA, HCR, ICRC, IDF, WDF, and many other international organisations and become part of the Diabetes in Humanitarian Settings.

Santé Diabète has also become an official partner of the Chair in Philosophy and Health and will help draft the first white paper on the first patient-run hospital.


NEW WEBSITE

The Santé Diabète website features a new look after a complete update of both design and content. The objective of updating the website was to provide more news about our organisation and the world of diabetes to a larger audience that is more aware and eager for information.
A NEW THREE-YEAR PROGRAMME
2020-2022

The quality of our work in both France and the countries where we operate has earned recognition from our supporters. These relationships have produced constructive, enlightening exchanges with our main donors, the French Development Agency and the World Diabetes Foundation, regarding our three-year programme for 2020-2022. That programme is ambitious, but also sound and realistic.

The programme will focus on four countries: Burkina Faso, France, Mali, and the Union of the Comoros. We will no longer operate in Senegal as we’ve chosen to close the Santé Diabète programme in that country.

The new three-year programme will pursue three main objectives:

- Expanding our prevention campaigns and our efforts to support the diabetes care systems in Burkina Faso, Mali, and the Union of the Comoros;
- Developing more significant interdisciplinary national and international advocacy actions to address diabetes, access to treatment, and the larger areas of health, food, and the environment;
- Enhancing Santé Diabète’s structural and operational capacities to sustain the quality and effectiveness of our actions. Enhancing those capacities will also help create synergy between the actions of the head office delegation in France and delegations in Africa.

STRENGTHEN GOVERNANCE OF SANTÉ DIABÈTE AND CONTINUE DEVELOPING OUR RESOURCES

We will also continue the work we’ve begun to strengthen the governance of Santé Diabète, specifically what makes our NGO unique: how we operate in networks with national or international partners, members of the CA and AG who are asked for help and/or mobilise based on the NGO’s needs, providing their expertise.

We are fully committed to this very unusual operational style, which has deep roots in the history and the genes of Santé Diabète. It is thus vital to ensure that everyone who wishes to help advance our cause can find a place.

To capitalise on this vast network, we will create an online resource centre for sharing good practices and expertise with partners in the South and North, health professionals, patient associations, volunteers, and others.
“Santé Diabète really helped me to learn to live each day with my disease better and to expand my understanding of diabetes. I attended nutrition workshops and learned to cook and eat balanced meals I could prepare using local ingredients. I also learned to do physical activity - such as walking - suitable for my lifestyle. Now, thanks to training from Santé Diabète, I now serve as a peer educator for people in my community, helping them live with diabetes and avoid complications”.

BALLA KOUYATÉ
President of the Diabetes Patient Federation of Mali (Fenadim)

“Santé Diabète has done tremendous work building the system of diabetes care in Mali, expanding access to treatment. Moreover, it has helped local, regional, and national diabetes patient associations grow. These accomplishments represent a genuine revolution for Malian patients compared what they faced 10 years ago”.

DR ABOUBACAR SAID ANLI
Chief Health Executive of the Comoros

“In September 2018, Santé Diabète organised a study visit to Mali to share experiences with partners in the fight against diabetes. This experience helped us develop a clear, concrete view of the steps Mali took to address diabetes and how it implemented its national diabetes policy. The result of this first highly productive exchange is that we are launching, with support from Santé Diabète, a vigorous South-South collaboration between Mali and the Comoros”.

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