

# Parliamentarians for Diabetes Global Network

## Newsletter

**The newsletter of the Parliamentary Diabetes Global Network.**  
**Registered Charity number 1175548 Company number 10339168**

### Global Parliamentary Advocacy Forum 2025

Uniting Global Leaders to Transform Diabetes Advocacy & Care



**Save the Date: Global Parliamentary Diabetes Champions to Convene in Valletta, Malta for Global Parliamentary Advocacy Forum 2025**

This edition compiles highlights from around the world – showcasing policy shifts, access challenges, technological advances, and community-led efforts. Each story is paired with a practical advocacy action to inspire global and local change.

- **Register for The Malta Forum and the Global Parliamentary Advocacy Award**
- **WHO Calls for Tax Hike on Sugar**
- **Policy Win in Singapore - CGM Subsidy Approved**
- **Mexico Bans Junk Food in Schools to Combat NCDs**
- **Pakistan's Punjab Province Initiates Insulin Support Program**

From **14-16 November 2025**, Malta will host one of the most significant gatherings of the global parliamentary champions for diabetes. The Global Parliamentary Advocacy Forum, organised by Parliamentarians for Diabetes Global Network (PDGN), will bring together 60 policymakers, healthcare leaders, and global experts to shape legislative solutions for improving diabetes outcomes worldwide.

A major highlight of the forum will be the keynote address by **The Rt. Hon. Baroness of Maidenhead (Theresa May, former Prime Minister of the United Kingdom)**, titled “My Journey in Diabetes”. Drawing from her own lived experience, she will share how diabetes shaped her leadership and policy priorities. She will also be honoured with the inaugural PDGN Global Parliamentary Advocacy Award, presented by senior Maltese government officials. The President of Republic of Malta, Her Excellency Notary **Myriam Spiteri Debono** will make a special presentation at the occasion.

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A welcome reception, in honour of Baroness May is being hosted by the British High Commissioner to Malta, **Victoria Busby OBE**, at her residence.

The forum will also feature addresses from The **Hon. Roberta Metsola**, MEP and President of the European Parliament, and **Prof. Peter Schwarz**, President of the International Diabetes Federation (IDF), who will officially launch the Global Diabetes Index – a pioneering tool to enhance advocacy efforts in every country.

The proceedings of the three-day forum, include sessions in the Maltese Parliament, held under the invitation of **Dr Anglu Farrugia**, Speaker of the Maltese Parliament, with a focus on policy innovation, global collaboration, and aligning with the WHO Global Diabetes Compact ahead of the 2030 targets. PDGN Parliamentary Working Groups from across continents will present progress in-countries and Hon. Sonia Sidhu, MP, Member Standing Committee on Health, Canadian Parliament will present about “The Diabetes National Plan”.

In collaboration with IDF, IDF-Europe, #Dedoc<sup>o</sup>, and the Maltese Diabetes Association, the Forum will also mark World Diabetes Day 2025 on the theme of Stigma at Workplace. The closing session will unveil the Valletta Call to Action, a globally endorsed parliamentary statement aligning legislative priorities with the outcomes of HLM4, setting the tone for accelerated action on diabetes.



Discussing the PDGN Malta Forum 2025 Proceedings with the Speaker of the Maltese Parliament.

Left to right:

**Sir Michael Hirst**, Co-Chair PDGN  
Speaker of the Maltese Parliament, **Hon. Dr. Anglu Farrugia, MP**

**Hon. Claudette Buttigieg, MP**, Malta, Chair of PDGN European Region

**Chris Delicata**, Co-Chair PDGN, Vice President Maltese Diabetes Association

PDGN Looks forward to welcoming its members at the Global Parliamentary Advocacy Forum 2025 which is an ideal opportunity to learn, showcase and network with parliamentary champions from across the globe. Where you have access to travel grant from your Parliament, please access those. However, if no travel support is available from your Parliament, PDGN will do its best to provide travel sponsorship.

PDGN Global Advocacy Forum 2025

Register Now!



Registration is complimentary

To help ensure the best flight options are available to you, we kindly recommend completing your registration by 15th September 2025

**PDGN Co- Chairs, Leadership and Team Members look forward to welcoming you at the Global Parliamentary Advocacy Forum**  
**Valetta, Malta, 14<sup>th</sup> - 16<sup>th</sup> November 2025**



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## Diabetes Stigma in the UK: 97% of People from Non-White Communities Report Negative Experiences

New research from Diabetes UK reveals a staggering finding: 97% of people from non-white communities living with diabetes in the UK report experiencing stigma related to their condition. This stigma takes many forms – from blame and judgment to social exclusion and cultural misunderstanding – all of which can seriously affect mental well-being and diabetes self-management. The findings underscore how stigma intersects with race, culture, and health, reinforcing barriers to care and contributing to worse outcomes. Diabetes UK is calling for urgent action to raise awareness, challenge harmful stereotypes, and ensure that healthcare



professionals are equipped to provide culturally competent, person-centred care. Reducing diabetes stigma is not just about education – it's about equity, dignity, and structural change. Community engagement, better representation

*"We must call out stigma for what it is: harmful, isolating, and deeply unjust – especially for those who already face structural inequality. Everyone deserves to live well with diabetes, free from judgment or shame."*

– Diabetes UK

in health messaging, and inclusive service design must be at the heart of the response.

**Advocacy Action:** Can your country confront diabetes stigma through inclusive policies and culturally sensitive care? Advocate for recognizing and addressing the unique challenges faced by racial and ethnic minorities living with diabetes – and make stigma reduction a priority.

## Diabetes on the Land: Raising Awareness in Farming Communities

**Diabetes on the Land: Raising Awareness in Farming Communities** A new campaign in Ireland is spotlighting a long-overlooked issue: the growing risk of diabetes among farmers. With long hours, irregular meals, and limited access to healthcare, rural populations often face delayed diagnosis and complications from unmanaged diabetes. Reaching these communities requires more than generic messaging—it demands tailored, locally grounded strategies that meet people where they are.

**Advocacy Action:** Launch targeted rural outreach by partnering with agricultural unions, co-ops, and local clinics. Advocate for mobile screening units, culturally relevant education, and the integration of diabetes services into farm support schemes—ensuring early detection and care access for farming communities too often left behind.



## WHO Calls for 50% Tax Hike on Sugar, Alcohol, and Tobacco to Combat NCDs

In a bold move to curb the global rise in non-communicable diseases, the World Health Organization is urging countries to raise taxes on sugary drinks, alcohol, and tobacco by at least 50%. The recommendation is grounded in strong evidence: higher prices reduce harmful consumption and generate revenue for health systems under strain. With diabetes and obesity climbing worldwide—particularly among youth and low-income communities—fiscal measures like sugar taxes are gaining traction as effective public health tools.



**Advocacy Action:** Support national adoption of sugar taxes aligned with WHO recommendations. Push for revenues to be reinvested in diabetes prevention, education, and care—ensuring that fiscal policy becomes a force for health equity and long-term impact.

### Sweet Crisis: Which Countries Consume the Most Sugar?

New global data has revealed a concerning trend—several countries now average over 100 grams of sugar consumption per person per day, far exceeding the World Health Organization's recommended limit of 25–50 grams. This staggering intake is contributing to a surge in obesity, Type 2 diabetes, heart disease, and other preventable non-communicable diseases. From sugary drinks in school vending machines to hidden sugars in everyday foods, the global food environment is saturated with products that are cheap, accessible, and poorly labeled. Despite growing awareness, most countries still lack comprehensive sugar reduction strategies or enforceable regulations to protect public health.

*Without urgent action, the health and economic toll will only grow—particularly among children and low-income communities who are disproportionately affected by poor dietary environments.*

**Advocacy Action:** Campaign for bold national sugar reduction strategies. Urge policymakers to adopt WHO-aligned intake guidelines, introduce clear and mandatory food labeling, restrict marketing of sugary products—especially to children—and integrate diabetes prevention into all national health promotion efforts. The data is clear; now it's time for decisive action.



### Save the Date!!!!

**What: Global Parliamentary Advocacy Forum**  
**When: 14<sup>th</sup> - 16<sup>th</sup> Nov 2025**  
**Where: Valetta, Malta**

More Info on Page 1 -2



**Register Now!**

## Diabetes Claims 90,000 Lives in South Africa in a Single Year



Diabetes is now one of South Africa's deadliest health challenges. In 2019 alone, the condition was responsible for the deaths of over 90,000 people—many of them preventable with earlier intervention, better care, and sustained public health investment. These numbers are not just statistics. They reflect years of underinvestment in prevention, delayed diagnosis, and limited access to care—particularly in under-resourced communities. How many more lives must be lost before diabetes is treated as the national emergency it is?

**Advocacy Action:** Does your country have a national diabetes strategy? If not, can you call for an urgent roll out of such a strategy, with investment in primary care screening programs to detect and manage diabetes early?

## U.S. Senate – Bipartisan Bill Aims to Eliminate Food Deserts



Senator Shelley Moore Capito has co-introduced the Healthy Food Access for All Americans Act, a bipartisan bill designed to address the growing crisis of food deserts across the United States. The legislation proposes tax credits and grants to incentivize retailers, nonprofits, and other organizations to establish grocery stores and healthy food providers in underserved communities, where access to nutritious food is often limited or non-existent.

**Advocacy Action:** We encourage parliamentarians to support the Healthy Food Access for All Americans Act and promote inclusive policies that invest in equitable food infrastructure. Expanding access to affordable, nutritious food—particularly in underserved communities—is a critical step toward improving public health outcomes and reducing the burden of diet-related conditions such as diabetes.

## EURACTIV – Ending T1D Suffering with Early Detection

Breakthrough T1D (formerly JDRF) and a coalition of advocates are calling on EU policymakers to prioritize early screening for Type 1 diabetes (T1D), noting that 90% of children in Europe are still diagnosed too late, often in the midst of a life-threatening emergency like diabetic ketoacidosis (DKA). The group stresses that simple, population-based screening programs can catch the condition before symptoms emerge, allowing for earlier treatment, better health outcomes, and less trauma for families.

**Advocacy Action:** Prioritize and allocate funding for national early screening programs for Type 1 diabetes across all EU member states. Early detection is key to ensuring timely diagnosis, preventing diabetic ketoacidosis (DKA), and supporting better long-term health outcomes for children and their families.



## Young Adults with Type 2 Diabetes Fuel Economic Losses in Hong Kong

A new study from the Chinese University of Hong Kong has revealed that Type 2 diabetes is driving substantial productivity and economic losses—particularly among young working-age individuals. Beyond the personal toll, the findings highlight how diabetes is quietly undermining the city's workforce and economy. With early onset leading to longer disease duration, unmanaged diabetes among young adults translates into absenteeism, reduced performance, and rising healthcare costs. The evidence is clear: investing in prevention and support isn't just a health priority—it's an economic one.



### Economics of Diabetes

**Advocacy Action:** Use this economic data to drive corporate and policy investment in diabetes care. Push for workplace wellness programs, early detection efforts targeting working-age adults, and employer policies that create supportive environments for chronic disease management.

**Prevention is no longer optional—it's smart economics.**

## Singapore Expands Access to Diabetes Tech with CGM Subsidies



In a landmark move, Singapore's Ministry of Health has introduced subsidies for continuous glucose monitoring (CGM) systems for people living with Type 1 diabetes. This policy shift marks a major step toward improving diabetes management, easing out-of-pocket costs, and recognizing CGMs as essential—not optional—tools for health. By reducing financial barriers, the subsidy enables more individuals to benefit from real-time glucose tracking, tighter control, and fewer complications. It also reflects growing global recognition that investing in diabetes technology leads to long-term savings in hospitalizations and emergency care. Singapore's action sets a precedent for other governments to follow.

**Advocacy Action:** Mobilize diabetes communities to push for similar CGM subsidies in their own countries. Launch advocacy campaigns that highlight the life-changing impact of access to this technology—supported by cost-saving data and lived experience—to influence health ministries and insurance bodies worldwide.



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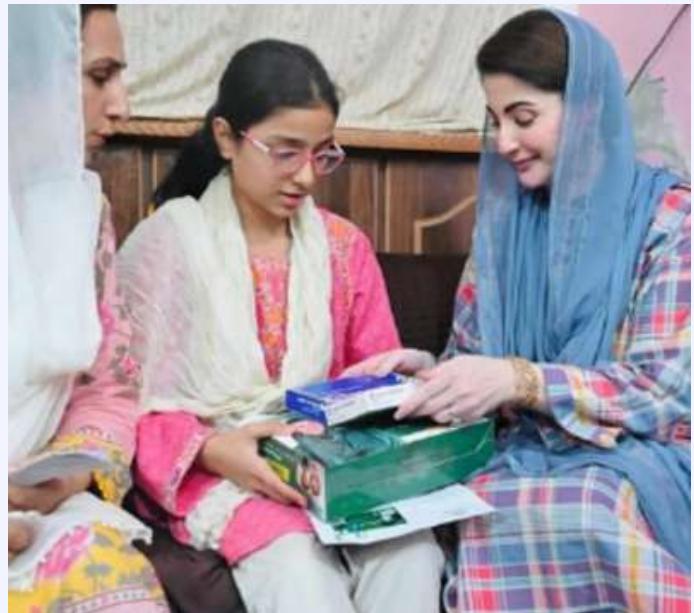
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## Punjab Province in Pakistan Launches an Insulin Support Program for Children under 15

Punjab province in Pakistan has initiated an insulin support program for children under 15 years of age. In this landmark support initiative, the Government of Punjab is carrying out a home delivery service following the tested and proven support system established by a type 1 diabetes community advocacy organization, Meethi Zindagi, which has long been lauded globally for its person centered and cost effective design. This initiative shows the importance of advocacy and collaboration between civil society and policy makers. Pakistan has approximately half its population under the age of 18 years, and a growing young population with diabetes.



**Advocacy Action:** Push for expansion of coverage to age groups above 15, inclusion of diabetes complications screening and for adoption of the program as a policy in the provincial and national legislative framework.

## Alarming Rise in Type 2 Diabetes Among Adolescents Globally



New research has confirmed a steep global increase in Type 2 diabetes among adolescents—a condition once considered rare in youth. The rise signals a critical public health challenge, linked to unhealthy nutrition, sedentary lifestyles, and growing mental health pressures facing young people today. Left unaddressed, early-onset diabetes can lead to more severe complications later in life and a heavier long-term burden on health systems.

**Advocacy Action:** Push for youth-focused prevention policies. Call for healthy school meals, physical activity programs, mental health screening, and tighter regulation of junk food marketing to youth.

**PDGN has Joined Hands with The Australian Centre for Behavioural Research in Diabetes for the The Global Summit to End Diabetes Stigma**  
Stay Tuned for More Updates!

**Join the Global Movement to**  
#EndDiabetesStigma  
EndDiabetesStigma.org

**What: Global Summit to End Diabetes Stigma**  
**When: 28<sup>th</sup> – 29<sup>th</sup> March 2026**  
**Where: Jaipur, India**



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## Safer Roads, Fairer Workplaces: UK Updates Monitoring Rules for Drivers with Diabetes



In a welcome move for the transport sector, updated guidelines in the UK will improve glucose monitoring protocols for bus and coach drivers living with diabetes. The changes aim to enhance safety while supporting continued employment for drivers managing the condition. For those in regulated professions, diabetes can often mean navigating stigma, job insecurity, and rigid medical requirements. These updated rules signal a shift toward more balanced occupational health standards—ones that recognize both the need for safety and the right to inclusion.

**Advocacy Action:** Support the development of tailored occupational health protocols for people with diabetes. Advocate for fair, evidence-based workplace policies and push for sector-specific support programs—particularly in high-risk industries like commercial driving—where health and livelihoods must go hand in hand.

## When Economies Crash, Diabetes Suffers Most

A new study highlights a troubling reality: economic recessions in low- and middle-income countries (LMICs) are linked to worse outcomes for people living with diabetes. As healthcare budgets shrink and poverty rises, access to insulin, monitoring tools, and nutritious food becomes increasingly precarious—widening health disparities and deepening the burden of the chronic condition. The findings make clear that diabetes care is especially vulnerable during economic downturns, yet too often overlooked in crisis response plans. Without targeted protections, people with diabetes are left to navigate austerity measures with life-threatening consequences.



**Advocacy Action:** Call for diabetes protection policies in economic crisis planning. Advocate for ring-fenced funding for diabetes care and social safety nets that ensure continued access to insulin, monitoring, and food security—especially in LMICs where the risk of disruption is greatest.



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## Breakthrough Tech: Artificial Pancreas App Now Available on iOS

A new chapter in diabetes care is unfolding with the launch of a closed-loop “artificial pancreas” app, now available on iOS. This breakthrough technology automatically adjusts insulin delivery based on real-time glucose readings—helping people with Type 1 diabetes achieve better control, fewer highs and lows, and improved quality of life. The app’s arrival marks a leap forward in digital health, but access remains a critical barrier. In high-income countries and beyond, the cost of closed-loop systems is often out of reach for many, particularly for children and underserved populations who stand to benefit most. If innovation is to be truly game-changing, it must also be accessible.

**Advocacy Action:** Push for regulatory approval and public reimbursement of closed-loop technologies by engaging health authorities and insurance bodies. Demand equitable access to this life-changing tech through public petitions, awareness events, and policy dialogue—so that no one is left behind in the future of diabetes care.

## Stem Cell Therapy Brings Type 1 Diabetes Closer to an Insulin-Free Future

In a groundbreaking development, researchers have shown that stem cell-derived therapy may allow some people with Type 1 diabetes to live without daily insulin. These promising results bring the condition closer to an insulin-free future — potentially marking a transformative shift from lifelong management to a lasting medical solution.

However, scientific breakthroughs must go hand in hand with ethical and equitable access. As trials progress, concerns are mounting over affordability, global distribution, and whether those most in need — particularly in low-resource settings — will be able to benefit. Innovation without inclusion risks deepening existing health inequities.

**Advocacy Action:** Advocate for ethical access to emerging diabetes cures. Push for clinical trial diversity, strong regulatory oversight, and bold commitments from governments and pharmaceutical companies to make future stem cell therapies safe, affordable, and accessible to all.



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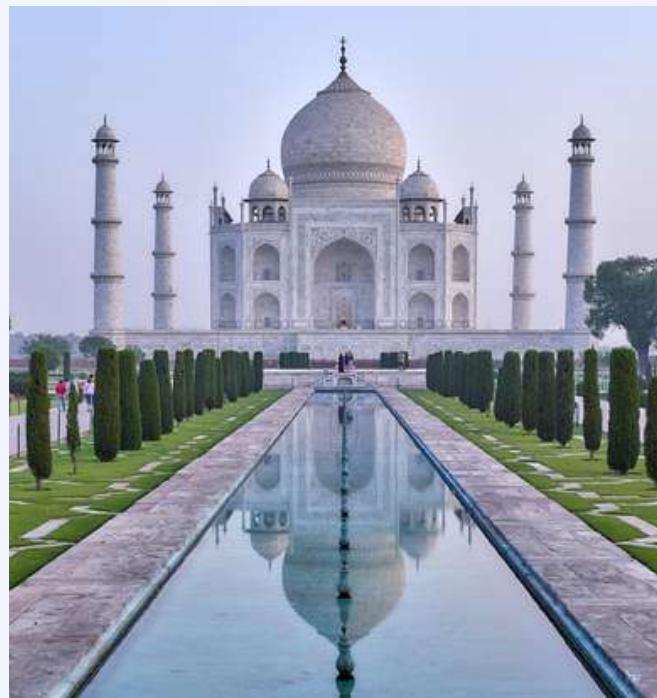


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## Times of India – MP Urges Free Treatment for Children with Type 1 Diabetes

In a strong appeal to the Maharashtra government, Member of Parliament Hemant Waje has called for free treatment and essential support for children living with Type 1 diabetes. Speaking in the state assembly, he emphasized the financial burden families face in affording lifelong insulin therapy and glucose monitoring, and urged the government to take concrete action to protect the health and rights of affected children.

**Advocacy Action:** Support legislative efforts to ensure universal, free access to insulin, monitoring tools, and ongoing care for all children with Type 1 diabetes in India. Policymakers must recognize diabetes care as a child health right—not a luxury.



## Surging Demand for Retina Screen Shows Urgent Need for Expanded Eye Care Access



Ireland's national diabetic retinopathy screening program, RetinaScreen, is experiencing record-high demand—a clear signal of growing awareness and need. But with rising diabetes rates, the system is struggling to keep pace, particularly in rural areas and among those with limited access to specialist care. Regular eye screening is critical to preventing vision loss, yet access remains uneven. The UK introduced annual screening after a successful cross-party campaign—demonstrating that policy momentum can lead to life-changing services.

**Advocacy Action:** Call for an urgent scale-up of diabetic retinopathy screening programs. Advocate for mobile screening units, extended clinic hours, and rural outreach. Push health departments to guarantee annual eye exams as a basic right for everyone living with diabetes.



## Sugar, SNAP, and State Policy: Can Missouri's Soda Ban Promote Health Equity?

Missouri has entered the national spotlight in the USA with the introduction of Senate Bill 662, a legislative proposal aiming to prohibit Supplemental Nutrition Assistance Program (SNAP) recipients from using their benefits to buy candy and sugary sodas. Spearheaded by Republican Senator Rick Brattin, the bill requires a federal waiver from the U.S. Department of Agriculture before implementation and has sparked a new wave of debate around food justice, public health, and the ethics of social support programs. The stated goal is simple: promote better health outcomes by restricting public funds from supporting nutritionally poor choices. But like many public health policies, the implications are far from straightforward. On one hand, rising rates of diet-related chronic diseases such as Type 2 diabetes and obesity disproportionately affect low-income communities. Reducing access to sugar-laden products could theoretically contribute to better long-term health outcomes. Public officials supporting SB 662 frame it as a preventive intervention aimed at improving nutritional standards among vulnerable populations. Yet critics warn that such restrictions risk becoming punitive rather than protective. For many SNAP recipients, limited transportation, food deserts, and rising grocery prices already narrow food choices. Removing access to certain items without addressing broader structural barriers may further stigmatize and burden low-income individuals without achieving meaningful health gains. Additionally, opponents of the bill question whether legislators should dictate dietary choices under the guise of public welfare. The proposal also raises questions about precedent. If Missouri receives a USDA waiver and implements this policy, it could open the door for similar reforms in other states. But without robust monitoring and evaluation frameworks, we risk enforcing moralistic food hierarchies instead of fostering true health equity.

**Advocacy Action:** We invite stakeholders, practitioners, and community advocates to actively engage in the process of advancing nutrition-sensitive reforms to SNAP and related food assistance programs. Your participation is vital in promoting the commissioning of rigorous impact assessments and ensuring that policy proposals are guided by evidence, informed by affected communities, and implemented equitably. By contributing to this process, you help support reforms that strengthen public health while addressing disparities in food access through integrated investments in food systems, education, and community resources.

## Australia Urged to Take Early Action on Diabetes, a Top Killer

Diabetes is now one of Australia's most common and deadly chronic conditions, prompting renewed calls for early intervention and stronger prevention efforts. Health experts are urging the government to invest in proactive strategies—from screening and lifestyle programs to culturally relevant outreach in high-risk communities. Without early detection rising rates of Type 2 diabetes will continue to place unsustainable pressure on Australia's health system.



**Advocacy Action:** Push for government investment in diabetes prevention through expanded screening, prediabetes programs, and nationwide awareness campaigns. Advocate for culturally tailored approaches—especially in Indigenous communities—targeting modifiable risk factors before the burden grows further.



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## Policy Win in Singapore: CGM Subsidy Approved Thanks to Policy Advocacy

In a major milestone for diabetes care in Southeast Asia, Singapore's Ministry of Health officially approved public subsidies for Continuous Glucose Monitoring (CGM) systems for people with type 1 diabetes, effective May 2025. This breakthrough marked the country's first national policy step toward making diabetes technology more accessible and equitable.

The announcement, made jointly by the Ministry of Health and the Agency for Care Effectiveness (ACE), follows months of consultations, policy reviews, and a critical evaluation of the cost-effectiveness and health outcomes of CGMs. But what truly set this policy into motion was the lived experience data—collected directly from the type 1 diabetes community. Over 70% of the lived experience surveys submitted to ACE came from the global T1D network, despite the community making up a small portion of Singapore's overall diabetes population. The community voices—consistently highlighting the life-altering benefits of CGMs for safety, quality of life, and long-term health—provided the essential patient-centered perspective the review process needed.

**Advocacy Action:** What would it take for your country to recognize lived experience as credible evidence in shaping diabetes care policy—just like Singapore did?

## Malta Expands Insulin Pump Access for Children



In a milestone for diabetes care, Malta has begun rolling out insulin pumps for children living with diabetes, offering better blood glucose control and improved quality of life. This marks a positive step toward modernizing diabetes management. But questions remain about what happens after childhood. Without continued access into adulthood, many young people face disruptions in care just as they are transitioning to greater independence. For a lifelong condition like diabetes, continuity matters. Can Malta build on this momentum by ensuring that all people who depend on insulin—not just children—have access to the tools they need to thrive?

**Advocacy Action:** Advocate for expanding access to insulin pumps and continuous glucose monitors beyond age 18 by writing to health authorities or local representatives.

We thank Hon. Claudette Buttigieg, MP, for her advocacy in supporting the introduction of the new policy on insulin pumps.



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## Know the Risk: UK Health Minister Calls for Greater Public Awareness on Diabetes

The UK Health Minister has issued a public call to learn the risk factors for diabetes, urging early action to prevent the condition before complications arise. With rising prevalence and growing pressure on the NHS, greater public awareness is essential to shifting from crisis response to prevention. This moment presents an opportunity to embed diabetes risk education across everyday settings—from pharmacies to workplaces.

**Advocacy Action:** Mobilize community-based risk assessment and education campaigns. Leverage the Minister's statement to push for national screening days, integration of diabetes risk tools in clinics and pharmacies, and workplace wellness programs that empower people to know—and act on—their risk.



## Expanding Access, Improving Lives: Newfoundland and Labrador Adds Insulin Pumps and CGMs to Public Coverage

In a landmark move toward equitable diabetes care, the provincial Government of Newfoundland and Labrador in Canada has announced expanded public coverage for insulin pumps and continuous glucose monitors (CGMs). As of July 2025, residents with diabetes who are eligible under the provincial program will be able to access these life-saving technologies free of charge—regardless of age. The announcement marks a major milestone in the province's 2022 Diabetes Action Plan, which aims to reduce health disparities, improve chronic disease management, and enhance the quality of life for people living with diabetes. This policy change responds to years of advocacy and reflects a growing understanding that technology-enabled diabetes care is not a luxury, but a necessity. From a systems perspective, the expanded coverage supports: Health equity by removing cost barriers for CGMs and pumps. Improved outcomes through real-time monitoring and insulin delivery. Long-term cost savings by reducing hospitalizations and complications. Whole-of-life care that empowers individuals of all ages to manage their diabetes confidently. “This is a major step forward. These devices are not only clinically effective—they’re transformative in people’s day-to-day lives.”

— Tom Osborne, Minister of Health and Community Services

**Advocacy Action:** Can other provinces and governments follow Newfoundland and Labrador's lead? Urge policymakers to expand public coverage for diabetes technology, ensuring all people with diabetes—regardless of income or age—can access the tools they need to thrive.



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## Reimagining Mental Health Support in Diabetes: The Promise of LISTEN



A growing body of evidence highlights the urgent need to address the emotional and psychological burdens faced by people living with diabetes. In response, a pioneering Australian initiative known as LISTEN (Low-Intensity mental health Support via a Telehealth Enabled Network) is offering a transformative, scalable solution. Developed to bridge the widening gap between mental health needs and service availability, LISTEN equips diabetes educators and allied health professionals with structured tools to deliver evidence-based emotional support. By integrating this low-intensity mental health care into existing diabetes services, LISTEN proves both cost-effective and adaptable — especially in rural and underserved communities. From a policy standpoint, LISTEN supports key reforms: Workforce development by upskilling existing diabetes professionals. Integrated care models that treat the whole person. Improved equity through telehealth delivery. Prevention and early intervention to reduce long-term healthcare burdens. LISTEN shows that it is possible — and necessary — to reimagine how we support the emotional well-being of people living with diabetes.

## The Silent Threat: Recognizing the Subtle Onset of Type 1 Diabetes

According to Diabetes UK, many children and adults are still being diagnosed with Type 1 diabetes dangerously late—often after experiencing life-threatening complications like diabetic ketoacidosis. The early signs can be subtle: fatigue, weight loss, frequent urination, and excessive thirst are frequently missed or misattributed. The cost of late recognition is high, but it is also preventable.

**Advocacy Action:** Push for public awareness campaigns highlighting the early warning signs of Type 1 diabetes. Work with pediatricians and school health programs to promote education, and advocate for routine screening in families with autoimmune conditions—before the silent symptoms become a medical emergency.



## What's Your News?

**What's your news? Have you had any opportunities to raise issues relating to diabetes in your legislative chamber? Please let us know your successes, or lessons learnt?**



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## Abu Dhabi's Digital Health Revolution: AI at the Forefront of Chronic Care

Abu Dhabi is rapidly transforming its healthcare system through artificial intelligence and digital innovation—positioning itself as a global leader in tech-driven chronic disease management. From predictive algorithms to virtual care platforms, AI is becoming central to how the Emirate addresses rising rates of conditions like diabetes. But as digital tools scale, the challenge lies in making them ethical, equitable, and responsive to diverse needs.

**Advocacy Action:** Support the ethical integration of AI in diabetes care by advocating for pilot programs that include predictive tools for T1D management. Call for privacy protections, equitable access, and culturally relevant approaches in digital health strategies.



## Crossing Borders: Lessons from the NHS for Improving Diabetes Care in Canada

As Canada grapples with growing diabetes rates and system strain, experts are looking across the Atlantic to the UK's National Health Service (NHS) for solutions. With its integrated care pathways, investment in diabetes education, and expanding access to technologies like CGMs, the NHS offers a potential roadmap for reform. Adapting proven models to local contexts could help countries like Canada accelerate progress and avoid costly missteps.

**Advocacy Action:** Promote international knowledge exchange in diabetes care reform. Urge policymakers to study and adapt elements of successful systems—like the NHS's structured education programs and tech-enabled care pathways—into national strategies that meet local needs.



## Jamaica's Recipe for Health: Eating Well Without Breaking the Bank



As nutrition-related illnesses rise across Jamaica, holistic chef Kareema Muncey is proving that healthy eating can be both affordable and rooted in culture. Featured by the Jamaica Information Service, her tips focus on local, seasonal ingredients and simple, balanced meals—especially for families managing or at risk for diabetes. Her work reinforces national efforts to tackle non-communicable diseases through food literacy, cultural relevance, and community empowerment. “Start with what you have in your kitchen and build from there,” she says. “Eating healthy doesn’t have to be complicated or expensive.”

**Advocacy Action:** Can health and agriculture ministries invest in culturally grounded nutrition education? Call for support for community-led programs that make healthy eating accessible, practical, and empowering.

## Is It Time to Rethink How We Diagnose Diabetes?

New evidence is stirring debate over whether current diagnostic thresholds are missing opportunities for early intervention. Lowering the HbA1c cut-off for a diabetes diagnosis could help identify people at risk earlier—potentially preventing complications before they start. A recent study in *The Lancet Diabetes & Endocrinology* suggests that thousands of people currently fall into a “pre-diagnosis” limbo where care is delayed. But the question is complex. Lower thresholds may strain already overburdened health systems and raise concerns about overdiagnosis, particularly in low-resource settings. Now is the time for countries to ask: What would more inclusive and proactive diabetes screening mean for our health systems—and for people at risk?

**Advocacy Action:** Convene expert panels, patient representatives, and health economists to assess the implications of revising diabetes diagnostic thresholds—ensuring reforms improve early detection without contributing to overdiagnosis or resource strain.



## Blame and Blood Sugar: The Hidden Harm of Diabetes Stigma



Despite decades of progress in diabetes treatment, one of the most damaging barriers to effective care remains invisible: stigma. In a compelling article on, health psychologist Dr. Michael Vallis sheds light on the emotional toll of living with diabetes in a world that too often blames and shames. Drawing on new Canadian research, Vallis underscores how misjudgments—such as assuming diabetes results solely from poor lifestyle choices—undermine the mental health, motivation, and quality of life of those managing the condition. The stigma isn't just social; it's institutional. People with diabetes frequently report feeling judged by healthcare providers, misunderstood by peers, and blamed by the public for their condition. This culture of blame fosters silence, anxiety, and disengagement from self-care—at a time when support and empowerment are most needed. Dr. Vallis points out that these harmful narratives often stem from outdated or oversimplified understandings of diabetes. Type 1 and Type 2 diabetes, while sharing a name, have distinct causes, pathways, and challenges—yet both are swept up in a cultural discourse that moralizes illness and assigns guilt. Eliminating stigma isn't just about being kinder—it's about saving lives. People with diabetes are more likely to thrive when they feel respected, supported, and understood. This requires a collective shift: from a model of blame to one of compassion and evidence-based understanding.

**Advocacy Action:** Encourage medical educators, public health professionals, and advocates to support the integration of anti-stigma training into healthcare curricula and public health initiatives. By engaging in this process, you can contribute to the development of awareness efforts that foster understanding, humanize chronic disease management, and challenge prevailing stigmatizing narratives around diabetes. Creating space for empathy and inclusion—within clinical settings, educational environments, and the broader community—requires collective commitment and proactive engagement.



## Kenya – Lawmakers Push for Sugar Levy to Combat NCDs

In an effort to curb rising rates of diabetes and lifestyle-related diseases, Kenyan parliamentarians have introduced a bill proposing a sugar levy on sodas and fruit juices. The proposed excise tax would increase the price of sugary beverages and generate revenue to support public health programs. The move comes amid growing concern about diet-related illnesses in both urban and rural communities, especially among young people. From a policy standpoint, the proposal contributes to: Fiscal policy for health, linking taxation to disease prevention. Behavioral change through pricing, discouraging excessive sugar intake. Revenue streams for NCD prevention, including diabetes education and screening. Regional leadership, following global examples like Mexico and the UK. “We must take action to protect our youth and future generations from preventable illness.” — Kenyan MP

**Advocacy Action:** Support evidence-based taxation policies to reduce sugar consumption. Urge lawmakers to link sugar levies with funding for community-based health initiatives, ensuring that fiscal measures translate into improved health equity.



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## Mexico – Junk Food Banned in Schools to Combat NCDs



In a bold step to address the obesity and diabetes crisis, Mexico has officially banned junk food sales in schools, including sugary snacks and sodas. The federal measure, announced in March 2025, applies to all educational institutions and builds on state-level initiatives already in place in regions like Oaxaca. The policy aims to protect children from ultra-processed foods that fuel long-term health risks and create habits that persist into adulthood. From a policy standpoint, this move advances: Prevention-focused interventions starting early in life. Environmental change by removing unhealthy options from schools. Support for healthy school meals and food literacy. Regulatory leadership in the fight against NCDs in Latin America. "This is about protecting our children and giving them the foundation for healthier lives."

— Federal Health Official

**Advocacy Action:** Can your legislature take similar action to regulate school food environments in your country? Advocate with the education and health ministries to align on banning junk food in schools and fostering settings where nutritious choices become the norm.

## France Gives the Green Light to Plant-Based Diets

France's national health agency (ANSES) has confirmed that well-balanced vegetarian and vegan diets are safe and healthy across all life stages. The review challenges long-held skepticism and paves the way for more inclusive, sustainable food policies. With proper planning—emphasizing whole foods, B12 supplementation, and nutritional education—plant-based eating can support health while aligning with environmental goals. "With the right nutritional planning, plant-based diets can support healthy growth and development at any age," the ANSES report concludes.

**Advocacy Action:** Urge fellow policymakers to revise national food guidelines and school meal plans to include sustainable, evidence-based plant-based options that support both health and inclusion.



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**Sodium and Obesity Study :** <https://www.news-medical.net/news/20250326/Study-links-high-sodium-intake-to-increased-risk-of-general-and-abdominal-obesity.aspx>

**New Study Links Type 1 Diabetes to Structural Brain Changes Over Time:**  
<https://www.nature.com/articles/s41598-025-07675-2>



**AI Use in Glucose Monitoring:** <https://newsroom.ibm.com/2025-06-02-ibm-and-roche-co-created-an-innovative-solution-to-support-people-with-diabetes-in-their-daily-lives-with-ai-enabled-glucose-predictions>

**ADA Panel Backs Long-Awaited Screening Guidelines for Type 1 Diabetes in Children:**  
<https://www.medpagetoday.com/endocrinology/diabetes/115458>

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