



Improving lives.
Curing type 1 diabetes.
annual report 2011-12

JDRF

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Our Mission

To find a cure for type 1 diabetes and its complications through the support of research.

Our Values

Integrity – Teamwork – Passion – Excellence –
Respect – Empathy – Commitment – Creativity



About type 1 diabetes

Type 1 diabetes is a lifelong autoimmune disease that destroys the body's ability to produce insulin, which is vital for life. People with type 1 diabetes need up to six insulin injections or a continuous infusion of insulin from a pump every single day.

Although the causes of the disease are not fully understood, scientists believe that a person's genes play a role as well as a variety of environmental factors. However, we do know that going on a diet or cutting down on sugar doesn't stop type 1 diabetes. It is not currently preventable, and as yet there is no cure.

People with type 1 diabetes have a heavy burden of a strict daily regime of blood glucose management.

Prior to the discovery of insulin in 1922, there was no treatment for type 1 diabetes. Today, times have changed. Major advances in JDRF-funded type 1 diabetes research in the past 40 years, as well as developments in improving day-to-day management of the disease means that people with type 1 diabetes currently have better management options than before.

But we still need to do more.

122,300 Australians live with type 1 diabetes,

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six new cases are diagnosed every day.

About JDRF

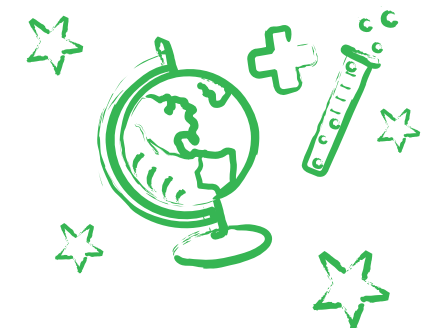
JDRF is the leading not-for-profit funder of type 1 diabetes research globally, investing over \$1.6 billion in the world's best diabetes research since 1970, including more than \$100m into Australian research. JDRF's support has been behind nearly every major advance in type 1 diabetes research in the last 40 years, resulting in an increased quality of life along the road to a cure.

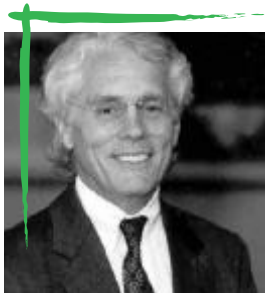
JDRF Australia is a strong part of our global organisation, and our local focus ensures that we can provide the best research, advocacy, and community results for people with type 1 diabetes in Australia.

Our strong local relationships and global knowledge allow us to translate research into locally accessible new technologies and management techniques for people with type 1 diabetes.

Through setting the scientific agenda, accelerating the pace of research, and engaging with our key stakeholders, we can deliver research progress directly to people with type 1 diabetes.

The international structure of JDRF, with links to government and regulatory agencies, allows us to increase the value of the research dollar, provide a tangible return on investment, and deliver real results that transform the lives of people with type 1 diabetes.





Chairman's message

JDRF is always innovating and working with the best and brightest partners to find new ways to fund and deliver research outcomes to our community.

These are indeed challenging times, perhaps the toughest I have witnessed. However, as those of us living under the shadow of type 1 diabetes know, the economic difficulties come and go but type 1 diabetes is always with us. That is why your Board and management are more determined than ever to do much more to improve the lives of those impacted by type 1 diabetes.

With the invaluable input of many volunteers and pro-bono advice from two leading consulting firms, JDRF has built a platform for greater progress into the future. We are targeting bigger and smarter partnerships with scientists, businesses and Government.

To enable our Chief Executive Officer to focus on these new partnerships, JDRF appointed Angela McKay as Chief Operating Officer. Already we are seeing improved results from our Research Update Roadshow and our main fundraising events. As JDRF becomes more widely known and respected, donations and bequests continue to grow strongly.

The growing strength of the Australian Type 1 Diabetes Clinical Research Network (CRN) is highly promising. The CRN was created as a result of working with Australia's leading scientists to agree the research road map to a cure for type 1 diabetes and its complications.

To our brilliant scientists, I say a heartfelt thank you. Your research progress and involvement with JDRF delivers hope for a cure.

Without the dedication and enormous contribution of staff and JDRF volunteers on boards and committees, we could not support our scientists. To you, I offer my sincere gratitude and that of the type 1 diabetes community.

Steve Higgs
Chairman



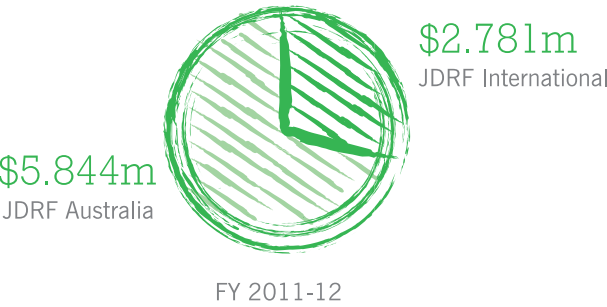
CEO's message

This year, JDRF delivered more of the progress that has been transforming the lives of those affected by type 1 diabetes for more than 40 years.

Research investment

In FY 2011-12, JDRF continued to fund the best and most promising Australian type 1 diabetes research as well as providing key support programs to the Australian type 1 diabetes community. JDRF Australia invested \$5.8m directly into funding for Australian research projects, grants and scholarships, management of Government-funded research and support initiatives, and a range of other support programs, with further funding provided by US-based JDRF International.

Research and support investment in FY 2011-12



Total funding \$8.625m

The JDRF-led Australian Type 1 Diabetes Clinical Research Network (CRN) grew significantly this year. In the first formal meeting of the CRN in November 2011, twenty key representatives from the type 1 diabetes research community met to discuss and agree on the core goals, activities, structure and operations of the network, allowing the CRN to start funding three projects across Australia with the support of the Australian Government.

Outside of the CRN, JDRF continued to fund the best Australian research and work in partnership with other Australian research and funding organisations. Local research breakthroughs combined with collective scientific knowledge about type 1 diabetes helped to pave the way to an eventual cure.

Financial performance and reserves

JDRF raised funds from a variety of sources to support our ability to invest in Australian type 1 diabetes research. Our fundraising capacity continues to grow with significant support from the Walk and Ride to Cure Diabetes in FY 2011-12. JDRF also concentrated efforts on growing fundraising initiatives such as Team Cure Diabetes and a national Research Update Roadshow.

Total Gross Revenue



Total increase 8%

Revenue from government grants increased to \$1.582m in FY 2011-12 from \$841k in the prior year. This increase was driven in part by the provision of more insulin pumps to eligible families through the federally-funded Insulin Pump Program. The payment of the first grants for the CRN also contributed to the increase in government funding.

JDRF aims to have cash reserves equivalent to at least six months of cover for fixed operating costs. In FY 2011-12, the average level of cash reserves was at 13.7 months of fixed operating costs.

In the year ended 30 June 2012, accounts show a deficit of \$364k from continuing operations, as a result of JDRF making voluntary and discretionary grants of research funds. The JDRF Board elected to fund, out of built-up accumulated reserves, additional Australian research deemed to add value to our efforts to cure, treat and prevent type 1 diabetes.

Community and government engagement

During the course of the year, the type 1 diabetes community benefited from changes to the Carer Allowance, after sustained advocacy from JDRF, families, and other organisations. Our advocacy work continues in our attempts to have islet transplantation funded through the mainstream health system.

JDRF grew its engagement with the type 1 diabetes community, reaching out through the Peer Support Program to 96% of newly diagnosed children and families known to JDRF. These individuals also received a KIDSAC or a t1d resources kit upon diagnosis. They were kept informed of key developments at JDRF and in the type 1 diabetes world through the Path to a Cure blog and redesigned monthly newsletter.

JDRF also recognised dedication and commitment in the type 1 diabetes community with the presentation of the second annual Diabetes Educator Awards and a revamped Volunteer Recognition Awards program.

In these ways and many more, JDRF engaged and interacted with a broad range of individuals in the type 1 diabetes community who support our mission.

Mike Wilson
Chief Executive Officer & Managing Director

Highlights of 2011-12: community

Supporting newly diagnosed individuals and families

The JDRF Resources Program supplies health care professionals with specially developed support packs and information to assist patients and families at the point of type 1 diabetes diagnosis, as well as materials for those already living with the disease. These free resources include the **KIDSAC kit**, the **t1d kit** and the **Straight to the Point (STTP) book**.

The **KIDSAC kit** offers support and information to newly diagnosed children and their families and includes either Rufus or Ruby, the teddy bears with diabetes. The **t1d kit** offers newly diagnosed adults critical information about carb-counting and a blood glucose meter. The **STTP book** is a comprehensive guidebook for adults living with type 1 diabetes, written by health care professionals and other adults who have been living with type 1 diabetes for some time.

In FY 2011-12, the Resources Program distributed resources nationally to nearly 1500 newly diagnosed children and adults and nearly 500 people already living with the disease. Over 400 clinics are now connected to the Resources Program, ensuring that more patients are receiving vital support materials from their trusted health care professionals.

The JDRF Resources Program is kindly supported by Roche Diabetes Care and Sanofi.

A helping hand from someone who understands

The JDRF Peer Support Program is a volunteer network that connects people who have been affected by type 1 diabetes. The Program provides the opportunity for individuals to talk to a volunteer who has had the same lived experience with type 1 diabetes and can give practical help and non-medical advice.

In FY 2011-12, the JDRF Peer Support Program reached out to over 96% of all newly diagnosed individuals and families known to JDRF, with 300 of those opting to be connected with one of the 100 active volunteers offering peer support.

The JDRF Peer Support Program is kindly supported by Lilly Diabetes.

“There is nothing like connecting with other parents who know first hand what it is like to have a child with type 1 diabetes”

Sam, father of Alessa, age 5



Highlights of 2011-12: community

Creating social networks

JDRF is connecting geographically diverse communities through a digital environment. The JDRF Path to a Cure blog and monthly newsletter now connects over 36,000 subscribers with regular updates from the type 1 diabetes research world, stories from the community, government and policy updates, and other essential news.

These connections are continued through JDRF Australia's strong social media networks, with thousands of people interacting regularly through Facebook and Twitter. The JDRF online community is vibrant and growing stronger every day – touching the lives of people all around Australia.

Path to a Cure is kindly supported by Novo Nordisk.

Increasing access to medical technology

The Type 1 Diabetes Insulin Pump Program (IPP) provides Australia's first government funded insulin pump subsidies for children with type 1 diabetes. Established in 2008, it is funded by the Commonwealth Department of Health and Ageing and administered by JDRF. It is designed to help make insulin pump therapy more affordable and accessible for families with children under 18 with type 1 diabetes.

In FY 2011-12 JDRF distributed 178 insulin pump subsidies nationally with a doubling in IPP applications as well as increases in the number of enquiries and webpage visits. This was assisted by a strong communications plan and co-payment partnership agreements with leading pump manufacturers.

Insulin pump subsidy recipients consistently report a higher quality of life and better management of their diabetes after receiving an insulin pump, with increases in independence, confidence and lifestyle freedom.

In May 2012, JDRF successfully secured further funding of the program.

“We have been really happy with the pump since Leon received it. It not only enables us to have better control over Leon's diabetes now which will hopefully give him better health later on in life, but also gives him a bit more freedom and independence with managing his diabetes”

Mel, mother of Leon, age 13

Highlights of 2011-12: fundraising

Walk to Cure Diabetes

40,000 Australians with a connection to type 1 diabetes came together in FY 2011-12 for the annual JDRF Walk to Cure Diabetes, the largest national fundraising event for type 1 diabetes research.

Children and adults affected by type 1 diabetes joined together in a record-breaking 28 locations around Australia, raising nearly \$1.6m for medical research to improve the lives of people with the disease and ultimately find a cure.

Beyond the opportunity to fundraise for a cause close to their hearts, the JDRF Walk to Cure Diabetes brings families with type 1 diabetes together, creating friendship and support networks that last beyond the event.

Ride to Cure Diabetes

In FY 2011-12, 302 participants raised over \$1m through the JDRF Ride to Cure Diabetes, an annual cycling event held in the Barossa Valley. The event is all about the teamwork, camaraderie, friendship and sense of adventure that connects all participants as they challenge themselves over one of three distances: 35km, 80km and 160km.

JDRF was proud to award the Weekend Rider Spirit Award to Charmaine Rendell, the Day Rider Spirit Award to Andrew Supple, and the Highest Corporate Team Fundraising Award jointly to Webb & Brown-Neaves and Team Macquarie. Congratulations to Riders Sarah Fisher and Andrew Bullen who chose to hold their wedding ceremony at the event, sharing their special day and celebrations with other Riders.

Thanks to our supporters for the event: Ride patron Stephen Hodge, Bernie Jones Cycles, Motorola, Rotary and Kiwanis Clubs of the Barossa Valley and St John's Ambulance.

Jump to Cure Diabetes

The JDRF Jump to Cure Diabetes was held nationally for the first time in 2012 in six sites across Australia in March. Over 100 participants took the ultimate leap of faith in the name of JDRF and the type 1 diabetes community when they jumped out of a plane and skydived to raise funds for type 1 diabetes research.

The campaign raised nearly \$200k nationally with participants jumping for a number of reasons, such as to fulfil a personal goal or to mark a milestone; but always with the ultimate goal of supporting type 1 diabetes research.

Spin to Cure Diabetes

The Spin to Cure Diabetes was held in Sydney and Melbourne in FY 2011-12, with corporate teams competing against each other to see which team could cover the most distance on spin bikes in forty minutes. Teams battled adverse weather conditions to fundraise over \$45k for type 1 diabetes research.

Thank you to Goodlife Health Clubs for their support through the provision of spin bikes at each event.



Highlights of 2011-12: fundraising

Special events

JDRF Gala Balls are famous for their glamour and style. 2012 was no different, with Gala Balls run by JDRF in Sydney, Brisbane and Perth themed around the Roaring Twenties. Over 1000 guests attended the three balls, raising \$720k in total through ticket sales, Fund A Cure donations, auction items, silent auction items and other initiatives such as the Wine Wall and raffles.

Other special events like Golf Days, the Susan Alberti Medical Research Foundation Gala Ball, and the Townsville Gala Ball also raised much needed funds to benefit JDRF and thousands of people with type 1 diabetes across Australia.

Many thanks to our event volunteers and corporate supporters who make these special events possible. Your contribution is vital to our mission.

Jelly Baby Month

Jasper the Jelly Baby has become a familiar symbol across Australia for Jelly Baby Month in May, helping to raise over \$864k in FY 2011-12. This year, Jasper also made an appearance on the Sunrise program on Channel 7, to help raise public awareness of type 1 diabetes research.

Thank you to our national partners Woolworths supermarkets, Amcal, MyChemist and Chemist Warehouse pharmacies for their ongoing support of Jelly Baby merchandise retail sales. Special thanks to our many Jelly Baby volunteers, who tirelessly dedicate their time and efforts in selling merchandise in shopping centres, schools, and other locations across Australia.

Team Cure Diabetes

In its second year, Team Cure Diabetes continues to attract hundreds of people across Australia to join a team of passionate supporters participating in mass fundraising events or using their own initiative to create their own fundraising events – all in the name of the JDRF mission to find a cure for type 1 diabetes.

In 2012, the online platform for Team Cure Diabetes was redesigned to facilitate easier access to fundraising support. This helped Team Cure Diabetes supporters to contribute over \$890k to type 1 diabetes research. With hundreds of events already planned for 2013, the potential for Team Cure Diabetes is growing.

Research Update: Transforming the Future

In 2012, JDRF embarked on a national research update campaign, “Transforming the Future for Type 1 Diabetes”, visiting Sydney, Melbourne, Brisbane, Adelaide and Perth to connect with our closest supporters.

The research update events allowed us to provide a compelling update on developments in the world of type 1 diabetes research with larger groups more frequently, amplifying our ability to deliver information to those supporters most able to help JDRF achieve progress to a cure for type 1 diabetes.

Thank you to our supporters who help us to transform the lives of people with type 1 diabetes.

Highlights of 2011-12: government

JDRF Government Advocates are the voice of the type 1 diabetes community – sharing their personal stories with Government decision-makers in order to raise awareness of type 1 diabetes. Their efforts make an important impact on Australia's politicians and the country's public policy agenda.

We thank all advocates and Youth Ambassadors for their dedication to our mission.

Carer Allowance

After strategic government lobbying and successful grassroots advocacy efforts in FY 2010-11, JDRF was pleased to attend the official announcement in August 2011 by Ministers Jenny Macklin and Nicola Roxon for a \$43m extension of the Carer Allowance payment for type 1 diabetes families.

The campaign involved dozens of dedicated parents and families around Australia writing letters and meeting with their MPs to explain why the Carer Allowance payment was important to their family. Combined with direct representations by JDRF to the Minister, a sustained local media campaign and our joint submission with the Australian Diabetes Council, family advocates played a lead role in this landmark policy win.

Many thanks to those JDRF advocates and Youth Ambassadors who met with the Minister and their local MPs to secure this important initiative.

Australian Type 1 Diabetes Policy Agenda

JDRF conducted a series of interviews, workshops and plenaries in FY 2011-12 with key stakeholders in the diabetes sector to gather information, feedback and insights for the creation of the first ever Australian Type 1 Diabetes Policy Agenda. These stakeholders included

other diabetes-focused not-for-profit organisations, health care professionals, individuals and families currently living with type 1 diabetes, community groups, medical researchers and politicians.

The Agenda will be the first to focus solely on type 1 diabetes policy in Australia, ranging from medical research and enhanced treatments through to education and family support initiatives. The list of policies will be promoted to governments and the wider population.

The Australian Type 1 Diabetes Policy Agenda will be published in late 2012.

Renewal of the Australian Type 1 Diabetes Insulin Pump Program

JDRF's advocacy to Government, supported by a detailed submission for a renewal of the Australian Type 1 Diabetes Insulin Pump Program for FY 2012-13, successfully secured an extension of the program that has changed the lives of many Australian families.

While the amount allocated by the Government was reduced from previous years, JDRF is working towards increased funding in future years.

Promise to Remember Me

The 2012 Promise to Remember Me campaign commenced in June 2012, with JDRF advocates starting to meet with their Federal MPs across the country. The goal of the 2012 campaign is to seek additional funding of \$35m for the CRN. The campaign culminates in the landmark JDRF Kids in the House event in Canberra, where 100 advocates will meet with Federal MPs in late November 2012.

Advocating for type 1 diabetes

My daughter Isabella was diagnosed with type 1 diabetes in April 2010 and my son Timothy was diagnosed seven months later, two weeks after he tested positive for type 1 diabetes antibodies. Our lives were changed forever.

From my personal experience and my conversations with other parents of children with type 1 diabetes via the JDRF Peer Support Program, I'm aware of the difficulties that many families face when it comes to lack of support, financial assistance, access to government services and benefits, and much more. That's why my family are all JDRF Government Advocates.

Through our involvement with the advocacy program, we have been involved with such important campaigns as the increase to Carer Allowance and the current request for further funding for the CRN.

“Our children face a unique 24/7 challenge so we want our voices heard. We are always ready to advocate on behalf of all Australians living with type 1 diabetes.”

Annemarie Branson
advocate and Kids in the House mum 2012



Research overview

JDRF has funded over \$1.6 billion globally since 1970. In FY 2011-12, JDRF invested more than \$110m globally, with over \$8m invested in Australia to fund 35 research and support projects – an indication of Australia's strength in the research world.



Research strategy

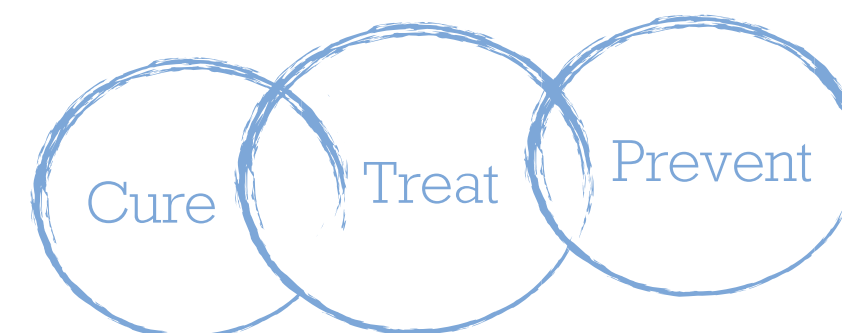
JDRF is continually striving to improve the lives of people with type 1 diabetes, with the ultimate goal of delivering a cure for type 1 diabetes and its complications.

JDRF's research strategy focuses on curing, treating and preventing type 1 diabetes.

Cure: For those who have been diagnosed with type 1 diabetes, replacing or renewing insulin-producing cells, and also stopping the body from attacking these cells.

Treat: For those who are living with type 1 diabetes, the creation of new devices and therapies to optimise glucose control and better manage and prevent the complications of diabetes.

Prevent: For those who are at risk of developing type 1 diabetes or are at the very early stages of disease progression, creating a viable vaccine or therapy to prevent the disease.



Cure

- Type 1 diabetes is associated with a progressive loss of insulin-producing beta cells in the pancreas. However, a small number of beta cells may still be present in people who have had type 1 diabetes for a long time. Curing type 1 diabetes may mean rescuing and expanding these remaining cells, or generating new sources of insulin production in the pancreas.

Five independent JDRF-funded studies around the world have together made a significant contribution to this field. These studies have discovered mechanisms that control the multiplication of beta cells and have identified molecular pathways that can turn on insulin production in non-beta cells within the pancreas.

- Since type 1 diabetes occurs due to the body's immune attack on its own pancreatic beta cells, drugs that target the immune system to reduce or reverse this attack are good candidates for a potential cure.

JDRF-funded TrialNet Study Group has reported the results of clinical trials using the drug Rituximab, which targets antibody-producing B-cells of the immune system. Over the course of a year, Rituximab had positive effects on the levels of C-peptide, a marker of insulin production, and numbers of 'attack' cells of the immune system. The researchers suggest that depleting the B-cells causes a temporary interruption in the immune attack on pancreatic beta cells.

- A JDRF-funded Australian study has identified a new molecule required for beta cell survival. The study showed that this factor, known as heparan sulphate, is essential for the growth of beta cells. The study also demonstrated that the enzyme that breaks down heparan sulphate contributed towards the development of type 1 diabetes. Replacing heparan sulphate with a compound that resists breakdown by the enzyme improved the longevity of beta cells.

What does this mean for people with type 1 diabetes?

Research progress towards curing type 1 diabetes is addressing both the immune attack and the provision of new insulin by replacing those that have been destroyed. Progress made in the regeneration of beta cells has provided methods to replenish depleting beta cells to prevent disease progression. Our growing understanding of the autoimmune attack in type 1 diabetes has resulted in clinical trials with drugs that target the immune system with promising results. The goal is to quickly take these results from clinical trials to people with type 1 diabetes.

Cure

Islet Transplantation

Islet transplantation, the transplantation of insulin producing cells from a donor pancreas into a person with type 1 diabetes, is showing increasing promise globally as a treatment for those with very brittle variants of the disease. In Australia, the JDRF Islet Transplantation Program has shown the safety and efficacy of the procedure, and in FY 2011-12 JDRF assisted in efforts to provide funding for this procedure through the mainstream health system to be available to all patients who qualify. This application is still under consideration.

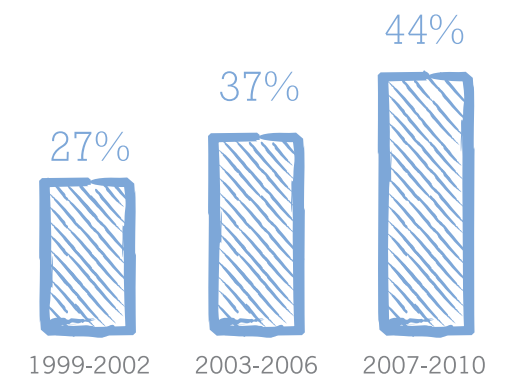
Australian researchers are also contributing data to the international Collaborative Islet Transplant Registry, helping produce a picture of the success of the procedure across Australia, the USA, Canada, and Europe.

A study published by members of this Registry, including JDRF-funded Australian researchers, analysed the effectiveness of islet transplantation between 1999 and 2010. The analysis included 677 cases and divided the outcomes into early, mid, and late stages in the development of the transplantation procedure. Trial outcomes showed that the length of insulin-independent phase and markers of good diabetes management improved significantly.

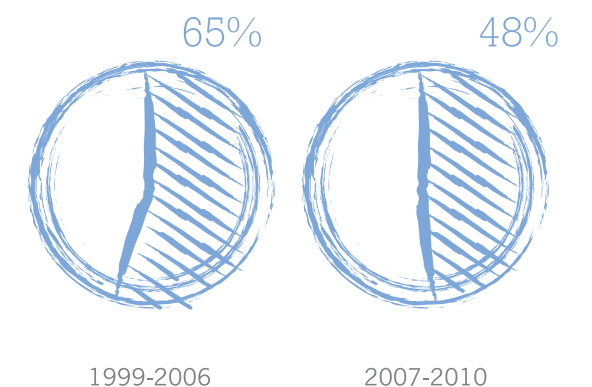
What does this mean for people with type 1 diabetes?

Islet transplantation can restore insulin independence in many recipients, and is the only procedure proven to reverse the complications of the disease. The advancement of islet transplantation procedures and reimbursement means that more patients can receive this therapy.

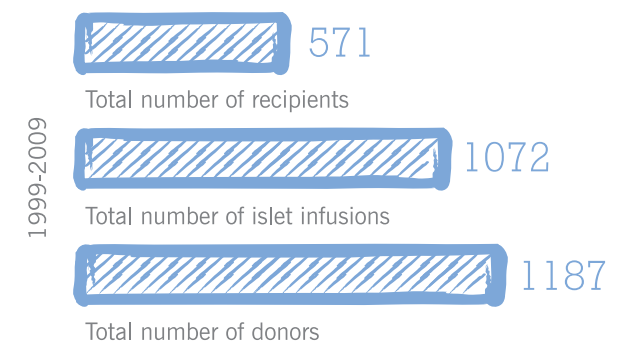
Percentage of patients who still showed insulin independence at 3 years after transplantation



Percentage of patients who required islet re-infusion within 1 year



Islet transplantation*



* as reported in the CITR Seventh Annual Data Report

Treat

- An Artificial Pancreas is an automated system that disperses insulin based on real-time changes in blood sugar levels, and is made up of an insulin pump and a continuous glucose monitor. This year, the first successful study of using an Artificial Pancreas in a real-world setting was reported. JDRF researchers in France and Italy tested the system on two trial participants over the course of three days. During this time, the participants ate their meals at restaurants, performed moderate exercise and spent one night outside the hospital. Their diabetes was managed by a prototype Artificial Pancreas throughout this time, without the need for any medical intervention. Patients only had to accept the recommended meal bolus predicted by the Artificial Pancreas. The results demonstrated that the system was feasible and safe to use outside the hospital.
- Kidney disease is a serious complication that can cause significant suffering in people with type 1 diabetes. However it is difficult to predict who will develop this complication and the level of severity of the kidney damage. JDRF-funded researchers have identified two proteins that are associated with a high risk of developing kidney disease. The detection of these proteins in the blood could facilitate early detection of the complication, and advise interventional treatment to delay the onset of kidney disease.
- JDRF-funded researchers in Australia have found a non-invasive technique to detect the vascular complications associated with type 1 diabetes. The study shows that the amount of fluorescence emitted by tissues such as the skin and the eye can

correlate to the risk of developing complications. Levels of fluorescence in patients with type 1 diabetes were shown to be higher than non-diabetic patients, and these levels are indicative of the risk factors associated with vascular disease.

- JDRF partnered with a number of companies and organisations to advance the pace of development of diabetes management technologies for people with type 1 diabetes. The JDRF partnership with BD will help accelerate the development of BD's glucose-sensing technology which has shown promise in providing accurate and reliable glucose information. JDRF's partnership with Medtronic aims to advance continuous glucose monitoring accuracy and reliability towards next generation Artificial Pancreas systems. JDRF's partnership with Novo Nordisk is helping to discover and develop novel immunotherapies to prevent, treat, and help cure type 1 diabetes.

What does this mean for people with type 1 diabetes?

Progress made towards treating type 1 diabetes is focusing on better glucose control and detecting diabetes-related complications in a non-invasive manner. While an Artificial Pancreas is now one step closer towards being accessible to patients, the discovery of early markers of complications will facilitate a better quality of life and treatment options for people with type 1 diabetes. JDRF's strategic alliances also allow for more targeted advancement of specific technologies that are likely to have the greatest impact.

Treat

Clinical trials for diabetic macular edema

Diabetic macular edema is an advanced complication of diabetic retinopathy. It can cause severe vision impairment and vision loss for people with type 1 diabetes.

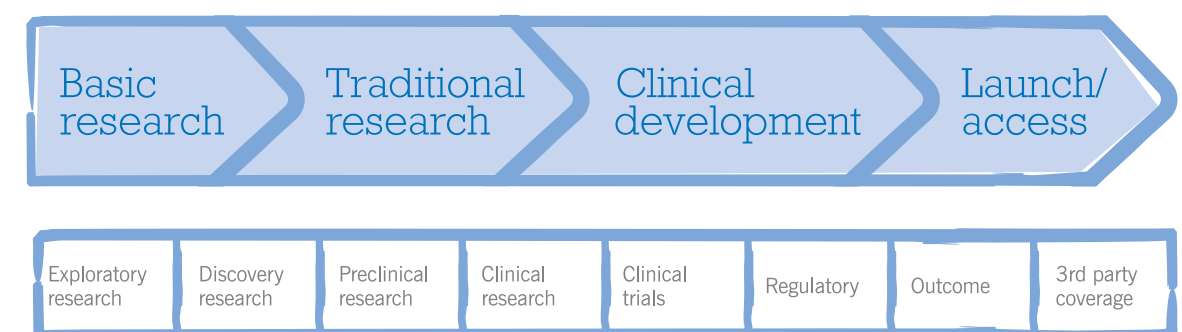
Previous research identified that increased levels of vascular endothelial growth factor were responsible for the progression of macular edema. This caused the blood vessels in the eye to leak fluid, leading to swelling in the retina. Blocking this growth factor with the drug Ranibizumab was shown to not only prevent, but also reverse the progression of the disease. JDRF-supported studies on the safety and effectiveness of the drug showed much more positive effects on disease progression than the traditional treatments using steroids and lasers.

Beginning at these pilot studies, the drug has progressed through the translational pipeline and has completed Phase III clinical trials. The results of this 24-month long trial have been exceptional, with participants noting significant improvements in their vision after only seven days of receiving the drug. These initial improvements were long-lasting and further improved during the course of the trial.

What does this mean for people with type 1 diabetes?

The results of this clinical trial present long-term evidence that vision loss associated with diabetic macular edema can be reversed. The fact that this reversal is also sustained over long periods of time will significantly improve quality of life for people with type 1 diabetes.

Clinical trial pipeline



Prevent

- JDRF-funded research has shown that the composition of microorganisms in the gut of children with type 1 diabetes varies significantly to those without the disease. The gut of children without type 1 diabetes contained bacteria that produced a significant amount of mucin, whereas the gut of children with type 1 diabetes harboured a different set of bacteria that produced lower amounts of mucin. These differences in microorganisms in the gut are presumed to contribute towards the development of type 1 diabetes.
- Two JDRF-funded studies are focused on developing vaccines that target the autoimmune response involved in type 1 diabetes. One vaccine contains multiple parts of the immune system (Multi pepT1De) to reset the system, while the other (Proinsulin Peptide) has the capability to re-train the immune system. Both vaccines are using different approaches to prevent the attack on pancreatic beta cells, thus preventing and reversing type 1 diabetes. The Proinsulin Peptide vaccine has already completed human safety trials and is ready to be tested for its effectiveness in reversing the immune response in humans.

- Advanced glycation end-products are formed through normal metabolic functions or can also be obtained from consumption of processed foods. JDRF-funded Australian researchers have determined a mechanism through which advanced glycation end-products can impair insulin production in the pancreas. The study showed that exposure to these end-products resulted in beta cell damage. However by blocking the advanced glycation end-products, the abnormality in insulin secretion and beta cell loss were reversed. The study also showed that patients in the high-risk population who eventually developed type 1 diabetes had higher levels of circulating advanced glycation end products.

What does this mean for people with type 1 diabetes?

Research progress towards disease prevention has identified factors that are associated with the onset of type 1 diabetes. By identifying these factors, researchers can then target them to prevent disease onset.

Prevent

Enteroviruses in the onset of type 1 diabetes

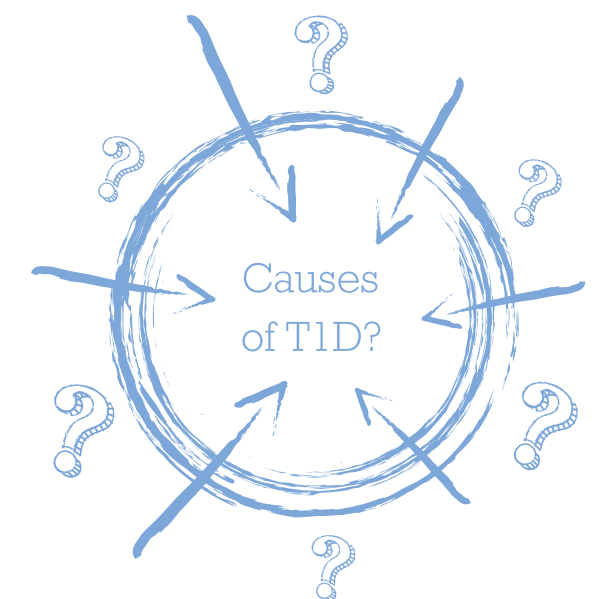
Enteroviruses can generally be defined as a class of viruses that replicate in the gut. These viruses cause mild infections that usually do not present any symptoms.

Studies dating back to the 1960s have shown an association between type 1 diabetes and enterovirus infection. Since then, several studies have investigated whether enterovirus infection could cause type 1 diabetes. However the results of these studies are not consistent, with reports varying from a strong association to no association between enterovirus infection and type 1 diabetes.

In order to clarify these conflicting reports, Australian researchers performed a detailed analysis to connect data from molecular-based studies across the world. The results showed that there was a strong association between type 1 diabetes and enterovirus infection, with more than nine times the likelihood of detecting enterovirus infections in patients with type 1 diabetes than in healthy individuals.

What does this mean for people with type 1 diabetes?

While research has shown a strong association between enterovirus infection and type 1 diabetes, several questions still need to be answered. Most importantly, the questions of how enterovirus infection leads to the autoimmune attack of beta cells, and whether this infection is a cause of type 1 diabetes remain unanswered. Once these questions are answered, we will be one step closer to understanding the causes of type 1 diabetes and therefore, one step closer to a cure.



Bringing research to life

The Australian Type 1 Diabetes Clinical Research Network (CRN)

The translation of laboratory research to human trials is an essential step before a new treatment can be available to the wider community. JDRF Australia, supported by funding through the Australian Government, launched the CRN in 2010. The CRN is now funding three initiatives across Australia.

metformin tablets added with insulin injections in type 1 diabetes can prevent the early blood vessel damage which leads to heart attacks and strokes, while helping to improve blood glucose and cholesterol levels, stabilise weight, and prevent other complications.

- The final CRN-funded initiative is to create a National Paediatric Database that will allow for efficient and agile support for clinical research, and a unique opportunity for systematic collection of clinical data on approximately 97% of children diagnosed with type 1 diabetes in Australia. This database will facilitate the recruitment of young people for clinical trials, especially for cross sectional and longitudinal research; and allow the long term monitoring of diabetes outcomes in the population.

What does this mean for people with type 1 diabetes?

The activities facilitated by the CRN are increasing patient access to the latest treatments and trials, improving interactions between patients, clinicians and trial sponsors, and is building on expertise to attract more clinical trials in type 1 diabetes to Australia.

- The study titled “Hypoglycaemia Prevention with the Predictive Suspension of Insulin Delivery” aims to prevent hypoglycaemia in those using insulin pumps by stopping insulin delivery when hypoglycaemia is anticipated. The availability of continuous glucose monitors has made it possible to monitor glucose levels around the clock. By analysing the patterns of glucose levels it is possible to predict when hypoglycaemia may occur. This research will study ways to improve this prediction and evaluate whether different causes of hypoglycaemia, for example too much insulin or exercise, lead to different changes in blood glucose levels.

- Another trial targets the complications associated with type 1 diabetes. Metformin is a popular oral medication used in treatment of type 2 diabetes. It has many of the properties desirable for an additional therapy to complement insulin. The objective of the trial, known as “Reducing with Metformin Vascular Adverse Lesions in type 1 diabetes (REMOVAL)”, is to test whether

Bringing research to life

Research is the pathway through which JDRF can find a cure for type 1 diabetes, and change the lives of thousands of people in Australia. For this reason, we invest heavily in the future of type 1 diabetes research, and support our best and brightest researchers to reach their full potential.

The investment that JDRF makes into the Australian research community include research support programs such as travel grants supported by the Macquarie Group Foundation, postgraduate scholarships, the conference support program, and top-up grants jointly awarded with the NHMRC.

Mentored Clinical Researcher Fellowship

The CRN offers a Mentored Clinical Researcher Fellowship to support clinicians establishing a research career in the field of type 1 diabetes. The Mentored Clinical Researcher Fellowship supports clinicians to have one day per week of dedicated research time for involvement in a clinical research project.

The inaugural recipient of this Fellowship in 2012 was Dr. Andrzej Januszewski, at the National Health and Medical Research Council Clinical Trials Centre affiliated with the Sydney Medical School. The Fellowship will not only allow Dr. Januszewski to pursue a Master of Clinical Trials Research but also focus on his research investigating the effects of using an insulin pump versus multiple daily insulin injections on long-term vascular health.

Diabetes Research Innovation Award

JDRF and the Macquarie Group Foundation support excellence and innovation in type 1 diabetes research through the Annual Diabetes Research Innovation Awards. The Award is presented to outstanding researchers in the field of type 1 diabetes for their publications or patents demonstrating the highest innovation, impact and importance.

Dr. Helen Thomas from St. Vincent's Institute of Medical Research was the recipient of the Early Career Researcher Award in 2011. Her research highlighted the mechanisms through which glucose can cause the death of insulin-producing pancreatic beta cells. Her work also identified a class of proteins that are associated with beta cell death.

Dr. David O'Neal from the University of Melbourne was the recipient of the Established Researcher Award in 2011. He was recognised for the clinical trial that evaluated a new algorithm used to guide patients on insulin pump therapy on how to respond to real-time continuous glucose levels.



JDRF-funded Australian research 2011-12

JDRF Grants			
Grant Recipient	Institute	State	Project
Australia III: DVDC		NSW, VIC	Australia III - DVDC (Diabetes Vaccine Development Center)
Australia IV			Australia IV
Dr Balasubramanian Krishnamurthy	St Vincent's Institute of Medical Research	VIC	The role of proinsulin specific T cells after the onset of autoimmunity
Dr Vicki Bonke	Baker IDI Heart and Diabetes Institute	VIC	Synergistic actions of NADPH oxidase and PKC in diabetic nephropathy
Dr Tom Brodnicki	St Vincent's Institute of Medical Research	VIC	How does bacterial infection affect susceptibility to type 1 diabetes?
Dr Mark Chong	Walter and Eliza Hall Institute of Medical Research	VIC	The microRNAome of CD4+ T cells as a potential biomarker for autoreactivity
Prof Peter Colman	Walter and Eliza Hall Institute of Medical Research	VIC	Type 1 Diabetes TrialNet International Site – Australia/New Zealand
Prof Mark Cooper	Baker IDI Heart and Diabetes Institute	VIC	Set 7: a novel target for diabetic vascular complications
Prof Mark Cooper	Baker IDI Heart and Diabetes Institute	VIC	Targeting CDA1 to treat diabetic renal fibrosis
A/Prof Barbara Coulson	University of Melbourne	VIC	Rotavirus modulation of type 1 diabetes
Dr Nathan Efron	Queensland University of Technology (QUT)	QLD	A longitudinal study of ophthalmic markers of neuropathy in Type 1 diabetes
A/Prof Assam El-Osta	Baker IDI Heart and Diabetes Institute	VIC	Role of epigenetic persistence in diabetic vascular complications
A/Prof Assam El-Osta	Baker IDI Heart and Diabetes Institute	VIC	Suppression and reversal of diabetic complications mediated by hyperglycemia using epigenetic inhibitors
A/Prof Assam El-Osta	Baker IDI Heart and Diabetes Institute	VIC	Understanding the mediators of metabolic memory
A/Prof Josephine Forbes	Baker IDI Heart and Diabetes Institute	VIC	Synergistic methods for mitochondrial rescue in diabetic nephropathy
Dr Jenny Gunton	Garvan Institute of Medical Research	NSW	Neuromathix artificial pancreas computational proof-of-concept
Prof Leonard Harrison	Walter and Eliza Hall Institute of Medical Research	VIC	JDRF International Clinical Sites - TrialNet
Dr Daniel Hesselson	Garvan Institute of Medical Research	NSW	A loss-of-function approach for acinar to beta-cell transdifferentiation
Dr Mugdha Joglekar	University of Sydney	NSW	Inhibition of cytotoxic T lymphocyte-mediated beta cell killing
Prof Tom Kay	St Vincent's Institute of Medical Research	VIC	Identifying islet factors that stimulate effector capacity in CTLs
Dr Jan Kranich	Garvan Institute of Medical Research	NSW	Gut bacteria, short-chain fatty acids and Gpr43 in type 1 diabetes

JDRF-funded Australian research 2011-12

JDRF Grants			
Grant Recipient	Institute	State	Project
Dr Trang Ly	University of Western Australia	WA	Low Glucose Suspend Study
Dr Stuart Mannering	St Vincent's Institute of Medical Research	VIC	Analysis of human islet-infiltrating T cells in type 1 diabetes
Dr Antonia Miller	Monash University	VIC	The contribution of the (pro)renin receptor to diabetic retinopathy
Dr Mariyo Sakoda	Baker IDI Heart and Diabetes Institute	VIC	Diabetic nephropathy: role of ennin-angiotensin system and memory
Dr Charmaine Simeonovic	Australian National University	ACT	Heparan sulfate levels mark the health status of human islet beta cells
Prof Jonathan Sprent	Garvan Institute of Medical Research	NSW	Treg expansion for islet allotransplantation
Dr Martin Stebbing	Royal Melbourne Institute of Technology	VIC	Role of microglia in diabetic complications and autonomic neuropathy
Dr Sih Min Tan	Baker IDI Heart and Diabetes Institute	VIC	The effects of novel GPx1-mimetics in diabetic nephropathy
Prof Renjeny Thomas	University of Queensland	QLD	Pathological changes associated with chronic RelB activation in T1D
Prof Renjeny Thomas	University of Queensland	QLD	RelB response as a biomarker of diabetes susceptibility
Dr Chris Tikellis	Baker IDI Heart and Diabetes Institute	VIC	ACE2 in the vascular complications of type 1 diabetes
Dr Yuxia Zhang	Institute of Medical Research	VIC	Engineering antigen specific regulatory T cells
Dr Yuxing Zhao	St Vincent's Institute of Medical Research	VIC	Autoimmune Destruction of Beta Cells in type 1 Diabetes
National Health and Medical Research Council co-funded program grants			
Prof Anthony d'Apice	St Vincent's Health	VIC	Which transgenic pig will be used for islet transplantation in humans?
A/Prof Shane Grey	Garvan Institute of Medical Research	NSW	Beta cell mass and function in type 1 diabetes and islet transplantation
Prof Ed Stanley	Monash University	VIC	Derivation of pancreatic beta cells from embryonic stem cells
Prof Joseph Trapani	University of Melbourne	VIC	Cell death pathways and type 1 diabetes
Australian Type 1 Diabetes Clinical Research Network			
A/Prof Maria Craig	Westmead Hospital	NSW	The Australasian Pediatric Endocrine Group Clinical Trials Network
A/Prof Alicia Jenkins	University of Melbourne	VIC	Improving health outcomes in type 1 diabetes - REMOVAL substudy
Prof Timothy Jones	University of Western Australia	WA	Adolescent diabetes intervention trial: Australia (AdDIT)

Recognising passion and commitment

JDRF is made up of a passionate community of committed individuals who make a difference to the lives of people with type 1 diabetes. We honour these individuals with two different categories of awards.

Diabetes Educator of the Year Award

Healthcare professionals are the first point of contact for most people with type 1 diabetes. Through their passion, dedication, excellence and experiences they share with the type 1 diabetes community, their contribution changes lives every day.

These Awards help JDRF to recognise those Diabetes Educators who help steward their patients towards happier and healthier lives. Through the generous support of Abbott Diabetes Care, three Diabetes Educators received \$3000 each to be used towards resources in their diabetes clinic.

The recipients of the 2011 Diabetes Educator of the Year Awards were:

Excellence and Innovation Award	Wendy Martin	Coffs Harbour Base Hospital Community Health NSW
Impact and Relationships Award	Ann Morris	St John of God Hospital, Warrnambool VIC
People's Choice Award	Anne Marks	Nepean Hospital Diabetes Service, Penrith NSW

Volunteer Recognition Awards

JDRF is an organisation founded by a group of passionate volunteers more than forty years ago. These days, volunteers are still a key driving force of many of our activities, and their own personal connections to type 1 diabetes make them our strongest supporters and most passionate advocates.

These awards help JDRF recognise and thank those special people who help us in our mission to deliver a better life for people with type 1 diabetes. They have generously shared their time, services or skills for the benefit of the JDRF mission.

National Volunteer of the Year:

Christine Benjamin-Young (QLD)

National Young Volunteer of the Year:

Tess Macartney (VIC)

State Volunteer of the Year (Impact)

Paul Aitchison (SA), Leanne Bush (ACT), Cynthia Di Bartolo (QLD), Peter Forrest (NSW), Mick Harris (VIC), Webb & Brown-Neaves (WA)

State Volunteer of the Year (Contribution)

Rosie Appleton (VIC), Matthew Buckley (QLD), Janine Goyder (WA), Alison Kennedy (SA), Graeme Long (NSW), Rhianna Poole (ACT), Krystal Slapp (QLD), Vivienne Todd (NSW), Cathryn Urquhart (WA).

State Young Volunteer of the Year

Lucy Bedford (QLD), Jake Burton (WA), Will Cullen (NSW), Georgia Rose Hall (SA), Tess Macartney (VIC)

Contributing to a cause

On 10.34am 11th Feb. 2008, type 1 diabetes crashed into our lives when my daughter was diagnosed. JDRF gave us help and hope at a difficult time.

I wanted to join in the fight to defeat this disease so I started volunteering with JDRF in 2010. As a JDRF volunteer, I know that the time I give means that more staff can devote their efforts to raising more money to fund vital research.

As the coordinator for JDRF Peer Support Program in Queensland, I am privileged to work with the most amazing group of volunteers. The Peer Support Program connects those in need with those who understand and can help; I am very happy to play a small part in this. While type 1 diabetes exists, I know that Peer Support is needed.

The fact that JDRF is an efficient organisation that focuses only on type 1 diabetes is important to me, as it ensures that most funds raised go directly to fund research. JDRF also provides informed and reliable news and the advocacy work is vital, reminding the government of the needs of the type 1 diabetes community.

“For these reasons I believe JDRF is the organisation that best helps people like my daughter and our family live with type 1 diabetes. That is why I am a volunteer.”

Christine Benjamin-Young
National Volunteer of the Year 2012



Recognising those who are making a difference

There are many ways in which people and organisations can choose to make a contribution to JDRF.

Through JDRF-led fundraising events, Australians connected to type 1 diabetes not only raise money for a cure but also come together as a community with a common goal.

Through organising their own fundraising events, Team Cure Diabetes participants display their passion and dedication to the JDRF mission.

By giving corporate gifts or providing pro-bono services, organisations help support JDRF to deliver better lives for people with type 1 diabetes.

By remembering JDRF in their will or giving generously in their lifetime, individuals are contributing to a better and brighter future for their friends, family, and loved ones.

The aim of all these groups is the same – raising as much money as possible for research to cure, treat and prevent type 1 diabetes.

Their contributions are changing the lives of all Australians living with type 1 diabetes.



Partnering with business

Many of Australia's most successful companies offer their time, skills, expertise and financial support to JDRF, to help us make a difference in the lives of people with type 1 diabetes. We thank our supporters for their commitment to a brighter future free of type 1 diabetes.

Macquarie Group and the Macquarie Group Foundation

Macquarie Group has been a fundraising supporter of JDRF for many years, raising well over \$1m for type 1 diabetes research with further significant support and matching donations from the Macquarie Group Foundation. In 2012, the Macquarie Group Foundation extended their 2008 commitment by another year and a further \$250k to increase the volume and impact of type 1 diabetes research and to support and recognise innovation in research.

Boral Ltd

With a partnership that has spanned more than ten years, Boral is a valued JDRF supporter. Their contributions to JDRF have reached in excess of \$2.5m, thanks to the efforts of their employees, customers and suppliers. Their support demonstrates the power of employee involvement and teamwork in achieving a common goal and the benefits of long-term community partnerships.

Westpac Banking Corporation

Over the past twelve years, Westpac has been a valued regular contributor to many JDRF initiatives, including the Walk to Cure Diabetes, Ride to Cure Diabetes and Jelly Baby Month. They volunteer to help on event days, help plan and organise gala balls, participate in general fundraising, and sponsor JDRF's well-known Jasper the Jelly Baby costumes.

City Beach

Since 2005, close to \$1m has been donated to JDRF by City Beach Australia. These funds have been raised through the sale of wristbands in their network of retail stores, and are a major contributor to JDRF revenue and wider awareness of type 1 diabetes in the general public. We thank them for their ongoing dedication to our cause.

QBD The Bookstore

QBD are a new supporter of JDRF, donating \$70k in eight months in FY 2011-12 through the sale of reusable envirobags in their retail stores. 100% of the proceeds from each bag sold comes directly to JDRF. We thank them for their dedication and commitment to supporting Australians with type 1 diabetes.

Pro-bono and in-kind support

Woolworths

The support of Woolworths Supermarkets is one of the key reasons for the continued success of the JDRF Jelly Baby campaign. Since they joined the campaign in 2003, sales of merchandise have increased by a staggering 70%. Since 2008, Woolworths customers have raised nearly \$500k annually for Australian diabetes research.

DNS IT

As an international IT services provider, DNS IT generously supports JDRF through the provision of desktop support, network development and the planning process for a long-term IT strategy for all JDRF's state offices. The personal attention and dedication of Jonathan Salmon, Managing Director, has been integral to the growth and success of this partnership.

Clipsal 500 Adelaide

As official charity of the 2012 Clipsal 500 racing event in Adelaide, JDRF had many opportunities to raise money for our mission through a few different avenues. Over \$17k was raised through a Billy Kart initiative at Prince Alfred College and \$39k was raised from the Ladies Lunch. Combined with donations at the event, nearly \$100k was raised, thanks to the generous support of Clipsal 500 Adelaide.

Toll

Toll Group is been a valued partner of JDRF's Jelly Baby Month, delivering fundraising merchandise throughout Australia to retail partners and volunteers. Their important contribution allows us to ensure that more of the revenue from Jelly Baby Month goes where it is needed – the support of research to cure type 1 diabetes.

Australian Grand Prix Corporation

JDRF was nominated as the official charity of the 2012 Qantas Formula 1 Australian Grand Prix in Melbourne. With thanks to the Australian Grand Prix Corporation, over 380 JDRF volunteers were able to raise nearly \$35k over the four days of the event, with more money raised through the sale of auction items obtained from the racing teams.

Amcal

Amcal, through their parent company Sigma Pharmaceuticals, have been valued partners of Jelly Baby Month since 2003. We thank them for their ongoing support, with tens of thousands of products sold through Amcal, raising over \$300k for type 1 diabetes research.

Donating professional skills

When our son Max was diagnosed at Easter 2010, it was a big shock to us and our daughter Kate. JDRF was there to help from the start, with the KIDSAC pack and Rufus, the teddy bear with diabetes.

We believe that JDRF is the organisation that can best help Max and other children living with type 1 diabetes. That's why we fundraise for the Walk to Cure Diabetes, advocate for research funding with Government, and offer our professional knowledge and services to help JDRF reach its full potential.

“The professional IT services of our global company DNS IT help JDRF become a more technologically efficient organisation, allowing them to dedicate as many resources as possible to fulfilling their mission to cure type 1 diabetes and its complications.”

Jonathan and Lee-Arne Salmon
parents to Max age 4 and Kate age 8



Recognising committed individuals

There are many different ways that people can give to JDRF to help fulfil the potential of type 1 diabetes research. With their help and generosity JDRF has already, and can continue to, make a difference in the lives of people with type 1 diabetes. To find out more, please visit www.jdrf.org.au/giving.

Individual donations

All donations, no matter how large or small, allow JDRF to continue funding all stages of research, from exploratory research to human clinical trials. Their contributions have helped us to fund more than \$1.6 billion into type 1 diabetes research in the past 40 years.

Regular giving

Giving a regular gift every month to JDRF allows us to invest in the best and most promising Australian diabetes research. The automatic monthly deduction is low-cost for JDRF to administer, meaning that more funds are available for research. Every month, our regular donors are bringing us closer to finding a cure for type 1 diabetes.

The Danielle Alberti Legacy Society

Leaving a bequest to JDRF ensures that vital research continues until a cure is found for all our loved ones.

The Danielle Alberti Legacy Society is named for Danielle Alberti, the only child of JDRF Australia President Sue Alberti AO and a talented artist who passed away in 2001 at the age of 32 due to complications from type 1 diabetes. The Society recognises those who have included a bequest to JDRF in their will, ensuring that the cause that matters most to them is supported beyond their lifetime.



Leaving a lasting legacy

I've lived with type 1 diabetes for over 35 years since the age of 12, and have been hoping for a cure ever since. I now have diabetic eye disease, and had a pancreas and kidney transplant five years ago after developing kidney disease. This means a lifetime of anti-rejection drugs.

Considering the psychological ramifications of having lived with the challenges of type 1 diabetes for so many years, I don't want others to experience the same as I have.

I don't want people who are being diagnosed with type 1 diabetes now, to go through what I have done. I want to give them hope, freedom, and a bright future.

I want to do my part to help fund research for a cure. That is why I've left a bequest to JDRF in my will.

"I'm leaving a legacy so that there's continued support for type 1 diabetes research into the future."

**Gina Pash
Member of the Danielle Alberti Legacy Society**



Gina Pash (left)

The people and organisations listed on these pages have made a significant investment towards the JDRF mission to find a cure for type 1 diabetes and its complications. We thank them for their contribution and commitment.

Major supporters

Anonymous Donors (9)
Susan Alberti AO
Rob and Sandra Antulov
Peter and Rosemary Appleton
Bob Bollen
Yvonne and Josh Butterfield
Peter and Wendy Bot
Tracey Broers
Matthew and Nickie Buckley
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Tom and Rebecca Wiley
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Ted and Mandy Yencken
Mark and Kimberly Robinson

Organisations

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Abbott Diabetes Care
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Australian Diabetes Council
Australian Grand Prix Corporation
Benz Industries Pty Ltd
Bielby Holdings Pty Ltd
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QBD The Bookshop
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Sanofi Australia New Zealand
Westpac Banking Corporation
Woolworths Limited
Wynnum Golf Club Inc
UBS

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Abey Family Foundation
The Born to Run Foundation
Emorgo Foundation
Freehills Foundation WA
The G W Vowell Foundation

Hacket Foundation
Harvey Foundation
James N Kirby Foundation
Macquarie Group Foundation
Maple-Brown Family Charitable Foundation
McCusker Charitable Foundation
Medibank Community Fund WA
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MLC Community Foundation
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Pierce Armstrong Foundation
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The Pratt Foundation
Rees Family Foundation
Say Family Foundation
SH Williams Foundation
The Trust Company
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Wilson HTM Foundation
Young Family Foundation

Danielle Alberti Legacy Society

Anonymous (8)
Catherine Adams
Susan Alberti AO
Edward Ashton
Jane Barron
Muriel Bayer
Kallie Blauhorn
Will C Bonney
Muriel Boyer
Barbara Brown
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Hugh McLelland
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Rory C Moore
Gregory Northey
Gina Pash
Rod Pearse
Stan Platis
Elizabeth A Rayward
Meaghan Read
Audrey Schultz
Jennifer Slogan
Aileen Smith
Harold Smith
Mike Wilson

Top Walk fundraisers

Geoff and Charlie Absolom
Susan Alberti AO
Billie Angelone
Matt Antulov

Rhonda Appleton
Jake Burton
Shannon Doody
Hannah Gordon
William Goyder
J Walkers
Mark Ross
Walkers of Merrett

Top Ride teams

Webb & Brown-Neaves
Team Macquarie
Westpac
Team ANZ
Fulton Hogan
Shadforth Financial Group
Western Flyers
VeloUnitas Pro Cycling
The KEM Dolls
Groundwork Plus

Top Team Cure Diabetes fundraisers

North Queensland Jelly Baby Gala Ball
Craig Pinn
Wynnum Golf Day
Michael Harris
Sandy Jones & Raeleen Lawrence
Brian Nasr
Tammy Boulton
Craig Alexander
Chris & Ashlea Watkins
Paul Nugent

JDRF corporate governance

JDRF Australia and its Board are committed to achieving and demonstrating the highest standards of corporate governance, with a framework based on best practice recommendations released by the Australian Securities Exchange Corporate Governance Council.

A full description of JDRF corporate governance practices can be requested from JDRF. All these practices, unless otherwise stated, were in place for the entire reporting period.

Organisational strategy

JDRF's past performance continually informs future strategy and organisational objectives. Using our knowledge of past experiences, we strive to continually improve our practices to better deliver research results to the Australian type 1 diabetes community.

Our organisational strategy for 2013 recognises three distinct pathways through which we can best deliver on our mission of curing, treating and preventing type 1 diabetes:

1. Funding Australian research directly
2. Managing the delivery of transformative research
3. Influencing the Australian research landscape

This broad approach allows us to take type 1 diabetes research from initial concept to delivery of results to the type 1 diabetes community.

Funding for mission

JDRF Australia is committed to ensuring that fundraising activities are carried out in an ethical manner. Fundraising activities are conducted by JDRF, and take place without the payment of success fee-based commission or any similar arrangements to external agencies.

We are proud to partner with members of our community who take the initiative to run their own fundraising events and campaigns, which we support via transparent online fundraising tools. Our online fundraising channels all use secure payment gateways and have nominal transaction fees.

International relationships

JDRF Australia is an affiliate of JDRF International, along with similar bodies in Canada, the UK, Israel, Denmark, Germany, Mexico and the Netherlands.

Funds raised by JDRF Australia are directed into the most promising type 1 diabetes research projects and pathways. Due to the strength of the Australian research environment, Australian researchers attract one of the highest per capita allocation of competitive research investment by JDRF International.

Financial management

JDRF is a registered charitable organisation. Its principal activities are to raise funds to support research to find a cure for type 1 diabetes, to raise awareness of the seriousness of diabetes and to offer practical support to people with diabetes and their families. JDRF financial activities are geared towards achieving this goal with minimal expenditure on company administration and financial risk.

A Finance & Audit Committee provides oversight and advice on the financial activities of the organisation. It is responsible for working with the CEO on developing and tracking budgets, monitoring forecasts, and reviewing management accounts and statutory accounts. Independent members and JDRF Directors sit on the Finance & Audit Committee, and reflect a diverse range of backgrounds and experience.

Members	
Trevor Allen (Treasurer)	Director of Peet Flagstone City Pty Ltd
Stephen Higgs	Director, Peet Ltd
Allison McMartin (until March 2012)	Executive Director, Telecom Media and Entertainment Group at ANZ Institutional Banking
Boris Musa	Managing Director & CEO, Mainstream Aquaculture Pty Ltd
Colin North (since September 2011)	Senior Consultant and Past Owner and Managing Director, Major Furnace Australia Pty Ltd
Peter Whyntie	Director & Principal Consultant Peter Whyntie Associates Pty Limited
Peter Wilson	Former Managing Director and Chief Executive Officer - Spotless Group Limited

JDRF has appointed PricewaterhouseCoopers as its external auditor.

Risk assessment and management

The Board is responsible for ensuring there are adequate policies in relation to risk management, compliance and internal control systems. Company policies are designed to ensure strategic, operational, legal, reputation and financial risks are identified, assessed, effectively and efficiently managed and monitored to enable achievement of the organisation's objectives.

In order to strengthen the company's position with respect to Risk Management, a full Risk Management Strategy incorporating a Risk Management Policy was adopted by directors. Subsequent to that approval the development of a risk management plan has commenced, including the appointment of a Risk Manager and the creation of a formal Risk Management Committee Charter to govern the operations of a Risk Management Committee.

Environment, health and safety

JDRF recognises the importance of Workplace Health & Safety (WHS) issues and has established and is further developing over time internal structures to assist in acquitting responsibilities in this area. The areas of WHS are government compliant and subject to the scrutiny of a WHS Committee with input from across the organisation. Reporting from the WHS Committee is reviewed and addressed by the Risk Management Committee on a regular basis.

Board of directors

The JDRF Australia Board of Directors operates in accordance with the principles set out in its Constitution as adopted by the company on 8 April 2000. Details of the officers and members of the Board, their experience, expertise, qualifications and term of office are represented below.

Directors Qualifications and Special Responsibilities	Experience
President Dr Susan Alberti , AO HonLLD MAICD Member of JDRFI Board of Chancellors Former Member of Major Donor Committee JDRFI Retired Member of Board of Directors JDRFI Retired Chairman of JDRFI International Development Committee	Managing Director, Dansu Group International Patron of JDRFI Director, Western Bulldogs Football Club Co-Chair, Western Bulldogs Forever Foundation Ltd Director, GoldAge Pty Ltd Foundation Chair, St Vincent's Institute of Medical Research Director, St Vincent's Institute of Medical Research Member of the Advisory Group for the Australian Community Centre for Diabetes in alliance with Victoria University, Western Health and the International Diabetes Institute Retired Director, Click Foundation (Epilepsy) Director, Victoria University Foundation Member of the Australia Day Committee (Victoria) Member of Australian Institute of Company Directors Chair of the Susan Alberti Medical Research Foundation Director, Western Health Foundation
Chairman Stephen Higgs , BEc Member of the Finance Committee Member of the Ad Hoc Lay Review Panel after 3 years on the full committee	Director, Peet Limited. Chairman, Glycemic Index Ltd. Past Chairman, Orlando Wines. Austoft Pty, Jasco Pty Ltd, NPL Ltd, Leigh Mardon Pty Ltd, Rural Press Ltd, IPAC Securities Ltd, So Natural Foods Ltd, Primary Health Care Ltd and UBS Warburg. Father of son with type 1 diabetes.
Vice-Chair Rebecca Davies , LLB (Hons), BEc, FAICD Member of the Board of JDRFI Chair of the International Affairs Committee, JDRFI Member of the JDRFI Research Committee	Member of the Private Health Insurance Administration Council and former Chair of its Audit and Compliance Committee, Former Member of the Executive Board for the Islet Transplantation Program Director of LCM Healthcare Limited and member of its Audit and Risk and Remuneration Committees. Director of Westpac/BT superannuation and financial services subsidiaries, Chair of its Investment Committee, member of Audit Committee Former Partner and Board member of a major national law firm. Former Chair of MLC Nominees Chair Gondwana Choirs Member Research Committee, National Health and Medical Research Council Mother of daughter with type 1 diabetes.

Board of directors continued

Directors Qualifications and Special Responsibilities	Experience
Vice-Chair Peter Wilson , Dip. Chem. BEc	Former Managing Director and Chief Executive Officer - Spotless Group Limited. Former Director of Spotless Group Limited. Director of Taylors Group Limited (a New Zealand company). Member of JDRFI Board of Chancellors. Retired member of Board of Directors JDRFI. Member of Finance Committee JDRFI (former Chairman). Member of Finance Committee JDRF. Member of International Development Committee JDRFI (former Chairman). Former President of Long Island, New York, Chapter of JDRFI. Managing Director PAGA Consulting Pty. Ltd. Director, Stanhope Eco Trade Pty. Ltd. Director, Mainstream Aquaculture Pty Ltd. Father of daughter with type 1 diabetes.
Treasurer Trevor Allen , BCom (Hons), CA, FF, MAICD Chair of the Finance & Audit Committee	Director Peet Limited and Peet Flagstone City Pty Ltd. Director of ICS Advisory Limited Former National Head of Mergers and Acquisitions, KPMG and now a consultant to KPMG. Member of the Corporate Finance Advisory Group of FINSIA Past Director of UBS Warburg. Sister has type 1 diabetes.
Robert Antulov , BE MBA MIEAust, MAICD	Corporate Advisor and Company Director Director, Medianext Pty Ltd Director of Sydney Film Festival, Director of Choice (Australian Consumers Association) Former Director of Strategy, Fairfax Media Ltd Father of son with type 1 diabetes.
Stuart Green , B.A. (Hons), MBA, FCA, ACMT	Executive Director, Head of Corporate Communications and Investor Relations, Macquarie Group Limited
Paul Heath (appointed 29 Mar 2012) Chair of Remuneration Committee	Chief Executive Officer, JBWere Pty Ltd Board Director, Beyond Empathy Member, Endowment Investment Committee of the Benevolent Society. Father of daughter with type 1 diabetes.

Board of directors continued

Directors Qualifications and Special Responsibilities	Experience
Frank Jackson Life member of JDRF Founding Chapter and president for JDRF - Western Australia Founding committee member for Walk to Cure Diabetes - WA	Managing Director, Frank Jackson Holdings Pty Ltd Chairman of The Jackson Family Foundation Father of daughter with type 1 diabetes
Ross Kennan , FIEA and AICD and RACI Member of the Remuneration Committee	Former Global SBU Vice-President of Honeywell Inc. Chairman, Neptune Marine Services Ltd. Chairman, Dadanco P/L
Natasha Mandie , B Comm (Hons), LLB (Hons), GAICD Member of Remuneration Committee	Managing Director of Mandie Consulting Former Director, Corporate Advisory Solutions, Credit Suisse Has type 1 diabetes.
Kristen Mason , MBA Chair of the NSW Ball Committee	Manager, Travel Partner Networks JAPA, American Express. Former Director of Foundation – Kambala. Mother of daughter with type 1 diabetes.
Helen McCombie Member of NSW Corporate Committee	Partner, Citadel PR, a corporate communications consultancy. Formerly Business Editor at Sky News and reporter on Channel 9’s Business Sunday program.
Timothy Morphy , BA, LLB, Grad. Dip. Legal Prac., MBA	Managing Director, Healthways Australia Pty Ltd Former General Manager Marketing, I-Med Network Limited Former National Head of Marketing, Medibank Private Limited
Mark van Dyck , BA (Hons) ; GAICD (appointed 29 Mar 2012) Member of the Board of JDRF Member of NSW Corporate Committee Member of Remuneration Committee	Former COO of LG Electronics Former Managing Director Coca-Cola Australia Former Managing Director Coca-Cola Ireland Director, Glycemic Index Foundation Member of the NSW Council for Reach Foundation Father of daughter with type 1 diabetes.
Michael L. White , BA in History, MBA Member JDRFI Board of Chancellors	President and owner RBW Companies. Chair of JDRFI Strategic Alliance Committee. Member JDRFI Research Executive Committee Father of son with type 1 diabetes.
Mike Wilson , BSc, BEc (Hons), GAICD Chief Executive Officer/Managing Director Company Secretary	Director, Glycemic Index Foundation Director, Labstamp International CEO of JDRF since 2004

JDRF Advisory Board

The Advisory Board meets to provide JDRF with guidance and advice from Australia's most knowledgeable business people. JDRF would like to thank the following members for their support and involvement throughout the year.

Co-chairs	
Richard Goyder	Chief Executive Officer & Managing Director, Wesfarmers
Sir Ralph Norris	Director, Origin Energy and Fonterra, ex-Chief Executive Officer, Commonwealth Bank
Members	
Tim Bednall	Chairman, King & Wood Mallesons
Jeff Browne	Managing Director, Nine Network Australia
Chris Corrigan	Former Managing Director, Patrick Corporation
Rebecca Davies*	Ex-Partner and Board Member, Freehills
Christopher Figgis	Partner, Egon Zehnder International
Professor Ian Frazer	Chief Executive Officer and Director of Research, Translational Research Institute
Matthew Grounds	Chief Executive Officer, UBS
Paul Heath*	Chief Executive Officer, JBWere
Stephen Higgs*	Director, Peet Ltd
Shawn Larkin	Managing Director, HCF
Peter Mason	Chairman, AMP
Howard McDonald	Ex-Executive Chairman, Myer
Nicolas Moore	Chief Executive Officer, Macquarie Group
Rod Pearse	Ex-Chief Executive Officer and Managing Director, Boral
Andy Penn	Chief Financial Officer, Telstra
Brendan Riley	Chief Operating Officer, Telstra
Mark van Dyck*	Former Chief Operating Officer of LG Electronics
Bill Wavish	Ex-Executive Chairman, Myer
Mike Wilson*	Chief Executive Officer and Managing Director, JDRF
Peter Wilson*	Ex-Chief Executive Officer, Spotless Group

*Also a director of JDRF

JDRF Australia leadership team

Photographs:
Mike Wilson,
Angela McKay



Leadership team	
Chief Executive Officer	Mike Wilson, BSc, BEc (Hons), GAICD
Chief Operating Officer	Angela McKay, BBus (Since May 2012)
Head of Development	James Clampett, BEc
Head of Marketing	Carl Ireland, BBus (Mktg), Grad.Dip (Mktg) (Until June 2012)
Head of Government	Tanya Stoianoff, B Agr.Ec, MPS
Head of Research Development	Dorota Pawlak, MSc, PhD
National Philanthropic Giving Manager	Carrie Burhop Keller, BSc, MBA, MAICD



Photographs:
James Clampett,
Carl Ireland,
Tanya Stoianoff

Photographs:
Dorota Pawlak,
Carrie Burhop Keller



Advisory panels

JDRF advisory panels incorporate input from Australia’s leading scientists and people who understand day to day life with type 1 diabetes. With their input, we ensure that JDRF research investment is directed towards those research projects that show the most scientific promise and potential for improving lives for people with type 1 diabetes.

Professional Advisory Panel

The JDRF Professional Advisory Panel is composed of leading scientists from around Australia. Panel members help ensure that JDRF investment in research is directed towards high quality projects with the greatest potential for advancement of scientific knowledge.

Chair	
Professor Phillip O’Connell	Centre for Transplant and Renal Research
Members	
Dr Stuart Mannering	St. Vincent’s Institute of Medical Research
A/Professor Trevor Biden	Garvan Institute of Medical Research
Professor Timothy Jones	School of Paediatrics and Child Health, University of Western Australia
Dr Tom Brodnicki	St. Vincent’s Institute of Medical Research
Dr Bernie Tuch	Riverside Life Sciences Centre (until January 2012)

Lay Review Panel

JDRF’s Lay Review Panel is composed of people who have a personal connection to type 1 diabetes to ensure that JDRF research is directed towards projects with the greatest potential to transform the lives of those with type 1 diabetes.

Chair	
Christine Garberg	Parent of a child with type 1 diabetes
Members	
Tony Blanch	Has type 1 diabetes (Until April 2012)
Jo Crosby	Parent of a child with type 1 diabetes
Dr Gerard Cudmore	Relative with type 1 diabetes
Rebecca Davies	Parent of a child with type 1 diabetes
Ed Davis	Parent of a child with type 1 diabetes
Marilyn Harrington	Parent of a child with type 1 diabetes (Until May 2012)
Rhonda Harrup	Parent of a child with type 1 diabetes (Until June 2012)
Stephen Higgs	Parent of a child with type 1 diabetes
Dianne Kerr	Parent of a child with type 1 diabetes
Natasha Mandie	Has type 1 diabetes
Tim Porter	Has type 1 diabetes

Allied Health and Nursing Professionals Advisory Panel

Allied health professionals are part of the diabetes management team and include nurses, dieticians, psychologists, social workers, podiatrists.

Chair	
Ms Deb Foote	Royal Prince Alfred Hospital
Members	
Dr Jane Overland	Royal Prince Alfred Hospital
Ms Erica Wright	Diabetes Service ACT Community Care

JDRF Australia financial report

The following summarised financial report presents a true and fair view, in all material respects, of the financial condition and operational results of the company and are in accordance with relevant accounting standards.

Statement of comprehensive income for year ended 30 June 2012

	Year to 30 June 2012	Year to 30 June 2011
	\$	\$
Revenue from continuing operations – fundraising & other income	9,173,089	9,121,409
Revenue from continuing operations – government grants	1,581,643	840,600
Total revenue from continuing operations	10,754,732	9,962,009
Employee benefits expenses	(2,496,797)	(2,389,558)
Fundraising campaign expenses	(781,599)	(653,145)
Communications & technology expenses*	(195,831)	(176,764)
Advertising, promotion and printing expenses	(158,546)	(208,746)
Other expenses	(1,487,249)	(1,335,546)
Surplus from continuing operations	5,634,710	5,198,250
Research, pumps and travel awards	(5,844,319)	(5,082,901)
Education and support	(154,024)	(148,177)
Surplus / (deficit) before tax	(363,633)	(32,828)
Income tax expense	–	–
Surplus / (deficit) from continuing operations	(363,633)	(32,828)
Other comprehensive income		
Other comprehensive income / (expense) for the period, net of tax	–	–
Total comprehensive income / (expense) for the period	(363,633)	(32,828)

*2012 - \$128,000 in-kind technology support (2011 - \$27,090). Note that this is a non-cash expenditure item, with a matching amount recorded as non-cash income.

JDRF Australia financial report continued

Statement of financial position as at 30 June 2012

Assets	As at 30 June 2012	As at 30 June 2011
	\$	\$
Current assets		
Cash and cash equivalents	8,180,170	9,136,882
Trade and other receivables	843,502	779,745
Inventories	145,621	194,152
Total current assets	9,169,293	10,110,779
Non-current assets		
Plant and equipment	135,653	180,193
Intangibles	5,467	6,302
Total non-current assets	141,120	186,495
Total assets	9,310,413	10,297,274
Liabilities		
Current liabilities		
Trade and other payables	5,329,334	5,979,870
Provision for long service leave	35,047	25,635
Total current liabilities	5,364,381	6,005,505
Non-current liabilities		
Provision for long service leave	83,016	65,120
Total non-current liabilities	83,016	65,120
Total liabilities	5,447,396	6,070,625
Net assets	3,863,016	4,226,649
Equity		
Retained surplus	3,863,016	4,226,649
Total equity	3,863,016	4,226,649

JDRF Australia financial report continued

Statement of cash flows for year ended 30 June 2012

	Year to 30 June 2012	Year to 30 June 2011
	\$	\$
Cash flows from operating activities		
Fundraising income	8,519,006	8,299,187
Government grants (Insulin Pump Program)	802,000	610,000
Interest received	451,925	379,571
Payments for operating activities	(6,297,254)	(5,667,028)
Grants and travel awards paid	(4,417,783)	(6,088,344)
Net cash inflow / (outflow) from operating activities	(942,106)	(2,466,614)
Cash flows from investing activities		
Payments for plant, equipment & software	(14,606)	(37,582)
Net cash (outflow) from investing activities	(14,606)	(37,582)
Net decrease in cash and cash equivalents	(956,712)	(2,504,196)
Cash and cash equivalents at the beginning of the financial year	9,136,882	11,641,078
Cash and cash equivalents at the end of the financial year	8,180,170	9,136,882

Statement of changes in equity for year ended 30 June 2012

	Year to 30 June 2012	Year to 30 June 2011
	\$	\$
Retained surplus at the beginning of the financial year	4,226,649	4,259,477
Net deficit attributable to members of the company	(363,633)	(32,828)
Retained surplus at the end of the financial year	3,863,016	4,226,649

Directory of JDRF offices

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