



FINAL CONFERENCE

CARE4DIABETES

Reducing the burden of non-communicable diseases by providing a multidisciplinary lifestyle treatment intervention for type 2 diabetes

19 January 2026
08:30–17:00h CET

[Register to the event](#)



**Co-funded by
the European Union**

The project CARE4DIABETES has received funding from the European Commission under GA 101082427.



AGENDA

8:30 – 09:00 **Welcome**

- Maria Vasile – Project Officer of CARE4DIABETES
- Yvette Azzopardi – Policy Officer of DG Sante
- Rocio Allande – General Director for Care and Social and Health, Ministry of Health of the Principality of Asturias (CSPA)
Marta Pisano – Scientific Coordinator of CARE4DIABETES, CSPA/SESPA/FICYT
- Olga Balaoura – CEO of 1st Health Region of Attica
- Elpiniki Tavianatou – CEO of General Alexandra Hospital
- Representative – Ministry of Health, Greece

09:00 – 09:30 **The CARE4DIABETES mission against type 2 Diabetes**

- Marta Pisano – Scientific Coordinator of CARE4DIABETES, CSPA/SESPA/FICYT
- Raquel Ochoa, CSPA/SESPA/FICYT – Coordinator of CARE4DIABETES

09:30 – 10:00 **Evaluation and Impact: Key findings from the CARE4DIABETES implementation**

- Jaana Lindström, Päivi Valve, Katja Wikström, Jemina Kivelä, Eeva Saarelainen – THL

10:00 – 10:30 **Morning coffee break**

10:30 – 11:00 **Preparatory actions: recruitment insights, delivery of the programme, materials, training of trainers and digital environments**

- Isabel Diez, María Escribano, CSPA/SESPA/FICYT – Coordinator of CARE4DIABETES
- Claudia Giacomozzi – ISS

11:00 – 12:45 **Implementing change: lessons from the intensive and aftercare phases (I)**

- Cristina Fernández, CSPA/SESPA/FICYT – Coordinator of CARE4DIABETES

Belgium. Charlotte Juton – Sciensano

Bulgaria. Kristiyan Hristov and Ekaterina Mitova – MoH BG/RHI/Southwestern University



Finland. Sari Koski – FDA/THL

Greece. Thedora Psaltopoulou and Stavroula Paschou – General Alexandra Hospital/1st Health Region of Attica

Hungary. Noémi Borbély – NNGYK

Italy. Claudia Giacomozzi and Marta Barbalace – ISS, ASLRoma2, FPG, AOUP

Malta. Glorianne Busuttil – MHA

13:00 – 14:00 Networking lunch

14:00 – 15:45 Implementing change: lessons from the intensive and aftercare phases (II)

- Isabel Diez, CSPA/SESPA/FICYT – Coordinator of CARE4DIABETES

Poland. Agata Szymczak, Joanna Ostrowska – NFZ/MUW

Portugal. José Dores – DGS/APDP

Slovakia. Natália Ballová – MoH SR

Slovenia. Denis Oprešnik – NIJZ/SB-NM

Spain. Elvira Llana – CSPA/SESPA/FICYT (Asturias), Paula Urones – SERGAS (Galicia), Luis Vázquez – SCS/IDIVAL (Cantabria), Silvia Teresa Torres – JUNTAEX (Extremadura), María Asunción Martínez –SAS/FPS (Andalucía)

15:45 – 16:00 Results from the assessment of Reverse Diabetes2 Now.

- Marion Devaux – OECD

16:00 – 16:45 Scaling up from a national to a European dimension: the CARE4DIABETES sustainability models (workshop).

- Denis Oprešnik, Anja Časar – NIJZ
- Emma Coles – Voeding Leeft

Health Representatives from pilot countries

16:45 – 17:00 Closing remarks

- Marta Pisano – Scientific Coordinator of CARE4DIABETES, CSPA/SESPA/FICYT

CARE4DIABETES JOINT ACTION

CARE4DIABETES aims at transferring and implementing an identified best practice across 12 Member States. The best practice is an evidence-based Dutch **lifestyle treatment programme for type 2 diabetes**, named "Reverse Diabetes2 Now" and developed by the Dutch NGO Voeding Leeft. This best practice lies in the promotion of lifestyle changes that can bring improved quality of life in people with type 2 diabetes and healthier blood glucose levels, with potential lower medication consumption.

To achieve this, CARE4DIABETES focusses on these specific objectives:

- a) Build the foundations for the project by conducting a comprehensive review and study of the Best Practice "Reverse Diabetes2 Now" to understand core features and models, identifying its core components, and examining national/regional contexts and stakeholders.
- b) Prepare an efficient pilot phase of the best practice in the 12 Member States, including recruitment strategies, selection criteria for participants, ethical considerations, digital tools for programme delivery and adaptation of the materials to local languages and contexts.
- c) Strengthen the skills of healthcare professionals involved in the project pilots by training multidisciplinary teams responsible for implementing and transferring the best practice.
- d) Develop monitoring and evaluation mechanisms and indicators to track progress throughout the project.
- e) Implement, monitor, and evaluate the Intensive Care Programme with participants (Phase I), followed by a continuation phase (Phase II) to support long-term lifestyle changes and conduct regular clinical assessments with the goal of reducing or discontinuing medication where possible.
- f) Conduct a final assessment of the health and socio-economic impact of the programme in the pilot Member States based on the outcomes of Phases I and II.
- g) Draw conclusions to inform a long-term vision for the project, develop Sustainability Action Plans to guide future implementation and assess the transferability of results to other EU countries.

CARE4DIABETES has strong policy relevance, offering Member States evidence-based insights to support patient empowerment, promote healthier lifestyles for people with type 2 diabetes, and improve the cost-effectiveness of diabetes management while ensuring more efficient use of health resources.

More information: <https://c4djointaction.eu/>



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C4D

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Joint Action

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