

## **JDRF** Consultation

## **WRITTEN REPORT**

UMBRA Fall 2021 Project

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## **ABOUT UMBRA**

The University Management and Business Research Association (UMBRA) is a McCombs Associated Student Organization that represents the voice for the Department of Management. Founded in the 1960s, UMBRA has evolved over the years from a lecture-based club to its current incarnation: an organization that utilizes an industry-proven consulting methodology to develop tailored recommendations for local businesses during a semester-long project.

Through the course of a semester, UMBRA tackles a problem area for a given system, process, or product that can be improved. Our proprietary methodology is derived from IDEO's Design Thinking and 3M's Lead User Generation. This methodology has a creative focus with primary research centered around in-depth experience of users.

The UMBRA team for the JDRF project consists of two Project Managers and seven Associates. The Associates are divided into three teams tailored to this project:

Surveying Research, Partnership Opportunities, and Mentorship Program Development.



## **DESIGN THINKING**

## **Empathize**

Empathizing is the first stage of the design thinking process as it provides foundation for understanding the user and is essential when formulating recommendations. In this stage, our Surveying subteam released a robust survey and analyzed results to drive our recommendations to JDRF.

## **Define and Ideate**

The define and ideate stage involved defining which deliverables would be worth examining and exploring as possible solutions to JDRF's retention and engagement issues with college-age Type 1 individuals. From there, each team conducted in-depth research and ideated recommendations for increasing college-age engagement within JDRF.

## **Prototype and Test**

The final two stages of the design thinking process involve prototyping and testing. The UMBRA team continually refined and conducted research based on bi-weekly discussions with JDRF. Furthermore, the team was able to review and re-evaluate recommendations. These stages could be further developed in the future through conducting focus groups surrounding the Mentorship Program or pushing out further surveys specifically to predict the success of the Mentorship Program. However, due to the nature and timeframe of this project, it was not feasible. The rest of the report contains comprehensive research and refined recommendations organized by sub-teams.



## **EXECUTIVE SUMMARY**

## **Problem Statement**

JDRF would like to increase engagement and retention in its college-age Type 1 population. It is important both to consider the current resources at JDRF's disposal as well as the perspective of young adults with Type 1 Diabetes.

## **Purpose of the Report**

The purpose of this report is to condense the research UMBRA has conducted across various aspects of living with Type 1 Diabetes, the functions of JDRF, and the current resources available to T1 students on the University of Texas at Austin Campus to provide findings and actionable recommendations.

## **Sub-Team Research**

In order to cpmprehendisvley research the project's context, UMBRA conducted preliminary analysis of three topics: Type 1 Diabetes, JDRF/non-profits, and the current campus presence of diabetes-related organizations at UT Austin. Based on this research, three deliverable sub-teams were identified to conduct more tailored research: Surveying Research, Partnership Opportunities, and Mentorship Program Development.

#### Recommendations

Each section of the report contains recommendations to help JDRF better engage with its college-age population and understand its fit in the UT Austin community. Recommendations were drawn from direct survey research, partnership analysis, and understanding of mentorship programs and their functions.

## **Impact**

By implementing these recommendations, as well as further addressing insight found in relation to the T1D college-age population, JDRF will be able to establish a better relationship with its college-age audience and increase its engagement as their current participants transition into adulthood.



## **INITIAL RESEARCH**

To better understand the project's context and the needs and wants of college-age Type 1 individuals, the team conducted research in three areas identified from conversations with Mike and internal deliberations. The three areas initially researched were: Type 1 Diabetes, JDRF/non-profits, and the current campus presence of diabetes-related organizations. A summary of the findings is provided below.

## Type 1

The research on Type 1 Diabetes was broken down into three key components: general information on T1D, insight into what patients want and need, and, finally, some key aspects of the transition to adulthood.

## **GENERAL INFORMATION**

Type 1 Diabetes is a chronic condition in which one's pancreas produces little to no insulin. Often referred to as "juvenile diabetes", the condition often manifests itself during childhood or adolescence, though it can sometimes appear during adulthood. The most common peak of the condition manifesting is between the ages of 4 and 7, and the next common peak is between the ages of 10 and 14. Type 1 Diabetes is often a genetic condition, though it can sometimes be caused by certain viruses or the environment. For example, people living further from the equator are more prone to develop Type 1 Diabetes. Symptoms include thirst, bed-wetting, hunger, weight loss, mood changes, fatigue, blurry vision, and more. Though there is no cure for the condition, treatments include managing one's blood sugar with prescribed insulin as well as maintaining a proper diet and lifestyle.

If one's condition is not kept in check, complications that could occur include heart and blood vessel disease, nerve damage, kidney damage, eye damage, foot damage, skin and mouth conditions, pregnancy complications, and diabetic ketoacidosis. Around 1.6 million Americans are living with T1D, 200,000 of which are under the age of 20. 64,000 Americans are diagnosed each year, and it is estimated that five million Americans will have the condition by the year 2050.

## WHAT PATIENTS WANT + NEED

Patients with Type 1 Diabetes first and foremost want **support and empathy** from those around them. This includes acceptance, meaning that people should not exclude or ostracize them in any way and instead offer comfort during difficult times.



Another important factor is acknowledgement of the difficulties they encounter. Though many individuals do not want their condition to define their entire life, they appreciate knowing that those around them understand what they are dealing with.

Lastly, patients want **help making healthy lifestyle choices**. Many aspects of life can tempt people to go in the wrong direction, so having loved ones encourage and engage in healthy habits with patients can be very helpful.

In terms of what Type 1 patients medically need, it simply comes down to **insulin** and an affordable means of getting it. The high costs of insulin place a severe burden on these individuals and their families, as average annual insulin costs were approximately \$5,705 in 2016, up from \$2,864 in 2012.

## TRANSITION TO ADULTHOOD

The transition from one's teenage years to adulthood can be extremely challenging for someone with Type 1 Diabetes. Primary diabetes care is typically the responsibility of parents until teens move to college or out of the house, when they are suddenly put into situations with **far less structure**. Without that household structure, many issues arise, including unrestricted diet, inconsistent sleep and physical activity, different healthcare providers, lack of proper supplies, limited time and money, and risky behaviors such as drinking alcohol. These issues can quickly spiral out of control without parental oversight.

Additionally, the transition from a pediatrician to an adult healthcare provider can cause nervousness and frustration in terms of getting a referral, scheduling appointments, getting the new provider familiarized with the patient's history, and insurance complications.

Family support is the strongest predictor that teenagers will stick to their diabetes treatment plan. This support means that family members must respect the teen's independence, educate them about the healthcare system and good treatment management habits, provide emotional support for other aspects of their life, and encourage self-care.



## JDRF/Non-Profit

In order to provide background on JDRF, we looked into how JDRF functions both within Type 1 spheres and as a non-profit. From this we narrowed it down to a few main categories that provide a look into how JDRF interacts with members of the Type 1 community.

#### **BAG OF HOPE**

Bag of Hope is a Type 1 starter pack for children that have just been diagnosed with the condition. We identified the target demographic as children from ages 4-9 years old. This is reflected in the components of the bag which include a diabetic teddy bear and an educational diabetes kids book among other resources. The starter pack addresses the pain points of a child undergoing a large life change. It addresses both the fear of being alone in one's struggle and the feeling of uncertainty that would come with this diagnosis. Looking at the bag of hope on a larger scale, we found that it provides JDRF an opportunity to further interact with some of its main sponsors: Abbott, Eli Lilly, and Xeris Pharmaceuticals.

#### **ADULT BAG OF HOPE**

In our research, we saw that JDRF also offers an Adult Bag of Hope that targets an older demographic, which we estimate to be late teens and adults. This product would be relevant to our project as it targets college-age students. This could be a **resource for students who are introduced to JDRF through our proposed college program** as it provides additional suggestions for managing T1.

## YOUTH AMBASSADOR PROGRAM

The youth ambassador program allows young children and teens to get involved in the mission of JDRF. The program mainly helps them raise awareness for T1 and run fundraisers in their communities. Some examples of involvement in the program include running fundraisers through school, writing thank you notes to sponsors, and sharing one's notes with T1. The program seems to emphasize different ways to get involved as the ambassadors get older, such as spreading awareness through social media and advocating for policy change.

#### **FUNDRAISING EFFORTS**

JDRF has a variety of fundraising events throughout the year which target various demographics. Some of these groups include families or friends of kids with T1,



philanthropists, and corporate donors. Events such as the **One Walk**, **Game2Give**, and **Ride for the Cure** are good examples of events targeting families and small individual donors. The yearly **Gala and Golf Tournaments** are examples of events targeting corporate donors and philanthropists. Almost all events have large corporate sponsors including both pharmaceutical companies and non-pharmaceutical companies. Given the large number of donors, it is clear that these relationships are very important to JDRF's fundraising efforts. In the past, JDRF has also used celebrities to promote fundraising efforts.

## **SPENDING ALLOCATION**

JDRF uses their resources to do a variety of things, which can be separated into three main categories: lobbying, public education, and research grants. JDRF's main mission is to find a cure for Type 1 which is reflected in how they spend the funds gained through fundraising. **Research grants** fund research that focus on areas such as screening, disease-modifying therapy, and cell therapies. This form of spending has the most direct correlation to the goal of curing T1 and improving the quality of life of those with T1. **Lobbying** also serves to support research as JDRF's main lobbying interest is to keep the NIH budget for the Special Diabetes Program. **Public education** is a large part of JDRF's spending. This is a potential risk for the company, because past studies have shown that roughly 60% of participants are unlikely to participate in JDRF's One Walk after seeing how much of JDRF's income was used for funding research.

#### PAIN POINT ASSESSMENT

JDRF seems to adequately address the pain points of young children and parents, but the pain points of adolescents are often not addressed. Sponsorships from large pharmaceutical companies like Eli Lilly and Novo Nordisk may breed ill will as children become old enough to understand that these companies control the majority of the world's insulin market. There is also heavy emphasis on children sharing a lot about their experience with T1 at a young age, which can be uncomfortable to a teenager looking back on those experiences. The emphasis on fundraising may also be tiring to a teenager that has been doing it since childhood. A larger emphasis on mental health and community may be able to remedy the concerns of adolescents with T1D.



## **Current Campus Presence**

In order to provide background on JDRF, we looked into how JDRF functions both within Type 1 spheres and as a non-profit. From this we narrowed it down to a few main categories that provide a look into how JDRF interacts with members of the Type 1 community.

## **COLLEGE DIABETES NETWORK/TYPE TEXAS**

JDRF has previously partnered with the UT chapter of **Type Texas**, which is part of the **College Diabetes Network (CDN)**. The purpose of Type Texas is to connect students affected with diabetes to a support network. In the past, they have had Back-to-School events in which members met at Moojos to eat ice cream sandwiches with other Type 1 diabetics. Unfortunately, Type Texas has been inactive on this website for 3 years. They have shown very little interaction/involvement on campus and on social media, perhaps due to the small size of the organization, as well as the confidentiality of members' identities. Type Texas is currently the only dedicated organization on campus to T1D or diabetes in general.

We then researched **opportunities from CDN Nationals** to get a better understanding of what they truly offer to college age students as an incentive and found that they offer the following:

- Opportunities to get an internship or get leadership experience
- Ability to attend conferences related to both updates in the diabetes world as well as getting involved in a medical career/networking in general
- Various mental health resources
- Seven available newsletters/pamphlets to assist in a college transition
- Access to Facebook group "Young Adults with T1D"
- o Information for parents on how to support children after they move out

| Organization | Links   |
|--------------|---|
| Type Texas   | Zoe Cook, President<br>typetexas@collegediabetesnetwork.org |

## UT COUNSELING AND MENTAL HEALTH CENTER (CMHC)

**UT's Counseling and Mental Health Center** is self-care focused. They currently provide both virtual and in-person counseling, psychiatric, consultation, and prevention services that facilitate students' academic and life goals and enhance their personal growth and well-being. Students with T1D could benefit from the counseling and



medication made available to students. There is currently group counseling available to discuss both emotional and/or physical issues that members are struggling with. This format involves meeting for 8-12 weeks, with conversations usually revolving around speaker lectures or chosen topics. This is a university resource and thus may be difficult to partner with, but this is a great resource to recommend to students who struggle with transitioning to college with T1D.

| Organization                           | Links                               |
|--|-------------------------------------|
| UT Counseling and Mental Health Center | https://cmhc.utexas.edu/groups.html |

#### **WECONNECTNOW**

WeConnectNow unites people interested in rights/issues affecting people with disabilities (i.e. autism, type one diabetes, etc.), helps these individuals succeed in studies, and overcome employment issues by providing resources and support.

WeConnectNow is a broad organization that does not only assist individuals with Type 1 Diabetes; it assists people with any and all disabilities.

| Organization | Links                               |
|--------------|-------------------------------------|
| WeConnectNow | https://weconnectnow.wordpress.com/ |

## GREEK/SPIRIT ORGANIZATIONS AND PAST VOLUNTEERISM

Another potential partnership that JDRF could establish is to look into newly established greek and spirit orgs such as the **Acacia Fraternity**; it is newly established this year and it is a service-oriented group who may be looking for a philanthropy such as JDRF's purpose of Type One Diabetes.

One example of an organization that has previous volunteerism with Type 1
Diabetes is **Texas Zeta Tau Alpha Sorority**. Their involvement with Dell's Children
Medical Center of Central Texas was based on a diabetes prevention program. Zeta Tau
Alpha executive members maintain their website and actively respond to emails.

Another potential partnership is to join the **Central Texas Diabetes Coalition**, a grassroots organization with diverse membership that has a community calendar of diabetes education classes. Moreover, the Central Texas Diabetes Coalition has access to healthier eating options. It has healthy vending machines and restaurants which JDRF could utilize as a template to continue to eat.



Furthermore, a spirit organization within UT called **Texas Angels** is a service oriented organization that has worked with nonprofit organizations that work with disabilities; its broad range of options could potentially allow JDRF to work with its diabetes cause.

The purpose of any and all of these partnerships would be to create awareness and increase engagement in a multitude of manners. Students from spirit organizations could have mixers or host service events or banquets that would allow them to further connect with other students that have type one diabetes.

| Organization                     | Links   |
|----------------------------------|---|
| Acacia Fraternity                | http://www.texasacacia.org/about-us/  |
| Texas Zeta Tau Alpha Sorority    | https://utexas.zetataualpha.org/  |
| Central Texas Diabetes Coalition | https://www.austintexas.gov/department/central-<br>texas-diabetes-coalition |
| Texas Angels                     | txangels.exec@gmail.com   |

## SUPPORT GROUPS/RELATIONS TO EATING DISORDERS

From the initial research, our associates went through Type Texas' tagged posts on Instagram and found some potential students that could maybe be interviewed or surveyed (Miranda Tubilla, Raquel Baron, Ashley Raymond). Through this, we found that Lauren Newman runs a support group for diabetes and disordered eating; we could gain insights on how she manages engagement and the ages of her attendees.

Another example would be to look into **Center For Change**, which is an eating disorder treatment center but seemed to work with Type Texas. We suggest looking into that relationship as the two tend to go hand in hand.

We also suggest any **pre-medical society** or organization. By being able to work with a pre-med type org that volunteers at Dell or wants to work with Type Texas, it would allow us to gain a better understanding of Type 1 Diabetes. Furthermore, the two organizations could also partner up to spread awareness for the cause. The pre-med students providing facts or personal experiences would allow all individuals to flourish.

| Organization    | Links                                 |
|-----------------|---------------------------------------|
| Miranda Tubilla | https://www.instagram.com/type1cutie/ |



| Raquel Baron      | https://www.instagram.com/typeoneday/         |
|-------------------|---|
| Ashley Raymond    | https://www.instagram.com/runningwithtypeone/ |
| Lauren Newman     | https://www.instagram.com/laurennewman.rd/    |
| Center For Change | https://centerforchange.com/                  |



## **SURVEYING RESEARCH + RECOMMENDATIONS**

## **General Overview**

We designed a survey to be sent out over numerous social media platforms. When designing the survey we tried to make it as easy to complete and accessible as possible while still gaining insight into the T1 community. The questions in the survey were separated into two main focus areas, T1 experience and recommendations for a potential college mentorship program. Below is a more in-depth description of our process and results as well as our recommendations based on the insights we've gained.

### ACCESS SURVEY AND RESULTS HERE

## Methodology

When designing the survey, we brainstormed a few focus areas for our questions that would allow us to create well informed and accurate recommendations. We made sure that our categories were mutually exclusive and collectively exhaustive to ensure that we encompassed the collective sentiment of those within the T1 community and adjacent to it. The final groups we decided on included demographic information, general experience with T1, interest in a college mentorship program, and interaction with JDRF. We decided that these categories would help provide the necessary context needed when developing the program by identifying the pain points of the survey respondents and incorporating their proposed solutions.

The main demographics we targeted when distributing the survey were people with Type 1, college students, and people adjacent to Type 1, like parents. This was represented in the platforms we decided to post the survey on. In order to target college students, we posted the survey in large-scale group messaging platforms such as Reddit and GroupMe.

- Parents and family members of children with T1D → targeted via a Type 1 Facebook groups
- Medical professionals → targeted via a medical device subreddit
- T1D community → targeted via a T1-focused subreddit streams
- Texas residents → targeted via a Texas-specific T1 Facebook page

In order to mitigate survey participants being discouraged by a lengthy survey, we separated participants into three groups based on their answer to the question "Have you been diagnosed with Type 1 Diabetes?".



- Type 1 Survey → The Type 1 survey included a variety of questions about their experience with Type 1 growing up, their interest in a mentorship program, and any recommendations they had for a hypothetical mentorship program.
- Non-Type 1 Survey → If participants answered that they didn't have type one they
  were sent to a second off shoot that asked questions about their perception of the
  Type 1 experience and gauged their interest in joining a college community that
  supports people with Type 1.
- No Answer Survey → Our third category was for participants that preferred not to answer the initial question. They were given a few general questions about their perception of the Type 1 experience, similar to the participants that have not been diagnosed with Type 1. All participants were required to provide demographic information and talk about their experience with JDRF.

## Results

In total, we received 322 responses to the survey.

## Demographic Information

- Age
  - 39% were between the ages of 18 and 22
  - 41% were between the ages of 22 and 30
  - o 20% were over the age of 30
- Education Level
  - 45% were current college students
  - 47% were college graduates
  - 7% were high school graduates
- T1 Diagnosis
  - 46% have not been diagnosed with Type 1
  - 53% have been diagnosed with Type 1

From this, we can assume that the conclusions we draw from this data are reliable, because the majority of participants have direct experience with Type 1 and the college experience.

The portion of the survey targeted specifically at members of the Type 1 community provided the most insight. When asked about the **largest challenges they faced growing up with Type 1**, the most common answers revolved around maintaining the proper diet, staying optimistic about their condition, and the health risks surrounding Type 1.



Useful insights also came from the questions that asked participants to describe how supported they felt growing up with Type 1 by ranking their experience on a scale of 1-10 and providing explanation. The majority of responses ranked their experience between a 7 or 8. The explanations associated with this question ranged significantly, with some of the most notable being "a lack of professional support," "I was provided physical support but not mental support," and "It is hard for those without Type 1 to understand our experience." Roughly 93% of these participants said that they had mentors growing up with type 1.

There was also significant interest when asked if they would be interested in joining a mentorship community that supports those with type 1. Participants were asked to rate their interest on a scale of 1-10, and 92% of participants answered 6 or above. 30% of participants rated their interest in a mentorship at a 10. When asked to give suggestions for a Type 1 specific mentorship program participants suggested emphasizing acceptance, optimism, proper dietary habits, and a professional development aspect. The information provided by the survey and the recurring themes and trends inspired our recommendations provided below.

#### Recommendations

## **RECOMMENDATION 1 → Focus on Diet & Exercise/ Housing & Dining Involvement**

When asked what their hardest challenge was when growing up with Type 1 Diabetes, 35% of patients mentioned a variation of diet, food, sugar, and weight. An on-campus program can work to ease concerns surrounding their ideas. The program should reach out to the University Housing and Dining Services to help add menu items that enable Type 1 patients to more easily maintain their blood sugar levels. These may include items that are low in amount of processing, added sugars, and trans fat. Additionally, the program should help guide students with Type 1 in their effort to maintain a healthy diet and lifestyle through dietary information sessions and provision of useful reading materials.

## RECOMMENDATION 2 → Potential Partnership with UHS

13% of Type 1 Diabetes patients mentioned struggling with illness as a significant challenge when growing up with the condition. We recommend that the on-campus program reaches out to University Health Services and coordinate an expedited and more efficient means for excused absences in the event that students with Type 1 diabetes fall ill.



## **RECOMMENDATION 3 → Professional Development Element**

91% of respondents with Type 1 Diabetes expressed interest in a professional development aspect within an on-campus program for students with Type 1, which we recommend. Such a program could include **resume workshops** (the program could potentially reach the University Career Engagement center to bring in a career development specialist to facilitate the workshop) and **speaker panels from industry professionals with Type 1 diabetes**. The speaker panels can serve as the encouragement and reminder that students with Type 1 need to understand that the opportunities for them to learn, grow, and become successful will always exist, no matter the obstacles they may face.

## **RECOMMENDATION 4 → Recommended Program Qualities**

Common themes that respondents desired to see in an on-campus program for students with Type 1 include understanding, optimism, and trust. We strongly recommend that **program facilitators work to instill these values** through means up to their discretion.



## PARTNERSHIP OPPORTUNITIES + RECOMMENDATIONS

## **General Overview**

When keeping in mind partnership opportunities, we want JDRF to maintain high visibility across potential candidates and to create a mutually beneficial relationship to forward the JDRF mission.

## **Partnership Research**

In beginning our research, we began to think about what college kids in general like and would want to be engaged in. Students are looking for a community and, most likely, they want something casual they can get involved in; like any other student organization, and they want to meet people going through similar things. After coming to this understanding, our next step was then discussing realistic expectations of successful engagement.

At this stage, we narrowed our research down to two main focuses, Type Texas and WeConnectNow. These two groups seemed the most promising and in line with our ideas.

Type Texas currently holds diabetes & mental health panels, diabetes awareness month events, Taco Tuesdays, a bake sale, and typically gets involved in the OneWalk walkathon. All of these events and more have the potential for a partnership with JDRF. JDRF's resources would allow Type Texas to expand their events and further educate our community. In addition, there is another CDN chapter nearby that JDRF could bring together for increased exposure. Our associates reached out via Instagram as well as email. We made initial contact but never heard back after attempting to schedule a meeting. This is not as promising as we hoped but due to their initial excitement at our ideas, we believe this could still be a valid partnership.

**WeConnectNow** was the second organization we researched further. Upon more digging, we found the potential of a partnership to be quite bleak. Their website was last updated in 2015 and their Facebook page in 2017. After reaching out to them, we received no response. At this point, WeConnectNow is not a focus but could be reevaluated in the future if they were to start up again actively.



#### Recommendations

## **RECOMMENDATION 1 → Type Texas Partnership**

We recommend that JDRF partner with Type Texas and raise fundraising to create awareness for diabetes through a social bake sale fundraiser. Through the partnership with Type Texas, it is estimated that JDRF could raise anywhere between \$500 and \$2,000 based on previous bake sales of various chapters of the College Diabetes Network that have been hosted.

Type Texas has held previous bake sales on campus, including prime locations such as the Speedway tables and the intersection of 21st and Guadalupe Street. By creating a bake sale, JDRF would be able to increase student involvement while raising funds for Type 1 Diabetes research, thus increasing overall student engagement and targeting college campus students.

In suggesting partnering with Type Texas, we analyzed the **possible appeals and downsides** to this partnership for both Type Texas and JDRF, displayed below:

#### TYPE TEXAS PERSPECTIVE

## **PROS**

- Strengthen Type Texas Initiatives Type Texas would be able to utilize
  JDRF to further its initiatives in
  expanding to diversify its target
  audiences of different age groups,
  particularly children and adults
- Innovation Type Texas would be able to raise funds to fund further research for new methods of coping with Type One Diabetes

## **CONS**

- Focus on only T1D and not general diabetes awareness - by partnering with JDRF, Type Texas would have to focus on Type One diabetes rather than being able to focus on both types of diabetes
- Liability all Type Texas partnerships would rely on JDRF goals and furthering the JDRF mission



#### JDRF PERSPECTIVE

## **PROS**

- Raise T1D Awareness partnership would increase its target audience's goals to college students
- Reduce Costs by creating a partnership with Type Texas, JDRF would reduce costs to fund its research

#### CONS

- Lack of stability leadership with Type Texas could change, which could create issues
- Sharing funds sharing funds with Type Texas would ensure that funds are generated for both types of diabetes

## RECOMMENDATION 2 → Type Texas One Walk

We recommend that JDRF work with Type Texas to host a One Walk annually. Through this partnership, JDRF would be able to create community engagement that would target not simply students affected directly by Type 1 diabetes, but to also target students that want to volunteer and be involved within the community.

Overall, it would **create** a **positive impact**, **as its purpose is served through volunteerism**, as well as a **direct tangible impact that students could see**. Furthermore, Type Texas would be able to market the One Walk to college students, thus increasing further engagement for JDRF's Type 1 diabetes research.

## RECOMMENDATION 3 → Type Texas + St. Ed's Partnership

We recommend that JDRF partners with both the UT CDN Chapter (Type Texas) as well as the chapter at Saint Edward's. With this strong partnership, a large presence and community could be created in the Austin area. With these chapters and JDRF, a larger scale event, similar to the dance marathons put on by THON, could be achieved. This would aid fundraising efforts as well as spreading awareness to a larger group.

## **SUGGESTED STEPS**

If JDRF decides to move forward with the partnership, these are the **initiating** steps we suggest JDRF take to get the partnership up and running:

- Contact the executive board → contact the executive board of Type Texas and set up a call to connect with goals in mind
- 2) <u>Establish a Partnership Agreement</u> → create a partnership agreement to align specific goals of both organizations (i.e. how you will decide to move forward, who will be responsible for communication, preferred communication methods, etc.)



| 3) | Organize a social | → create a socia | al for the me | embers of b | ooth organi  | zation to | get to |
|----|-------------------|------------------|---------------|-------------|--------------|-----------|--------|
|    | know one another  | and to foster a  | friendly en   | vironment   | for future c | ommunica  | ation  |



# MENTORSHIP PROGRAM DEVELOPMENT + RECOMMENDATIONS

#### **General Overview**

Mentorship programs offer an actionable, long-term event that can increase touch points between JDRF and college students. By implementing a specific, year-long mentorship program that focuses on college life with diabetes and increasing activities between T1D students, JDRF can increase awareness and participation in JDRF events.

#### Research

Our research consisted of a three-pronged approach: mentorship programs to model, how to find potential mentors, and how to find potential mentees. Through personal experiences, one-on-one interviews with other college students, as well as various articles, we were able to come up with a few different mentorship models. These include the "Big-Little" model, group mentoring, multiple mentoring, and peer mentoring.

To evaluate these options, we brainstormed **positives and negatives of each model**, as displayed below:

#### "BIG-LITTLE" MODEL

one older mentor with one younger mentor

#### **PROS**

- One-on-one relationship
- Could create a close-knit community as Littles get older and become Bigs to others
- Most people are familiar with this model because of sororities and many other organizations on campus

#### **CONS**

 Received feedback that many Bigs don't make enough effort to keep in touch with their Little



## **GROUP MENTORING**

one mentor with several mentees

## **PROS**

- Useful if we do not have enough mentors
- Mentees can get to know each other
- Easier to interact in a group setting

## **CONS**

 Each mentee gets less individual attention

## **MULTIPLE MENTORING**

one mentee with several mentors

## **PROS**

- Mentee gets many different perspectives
- Useful if we do not have enough mentees

## **CONS**

Mentees may feel overwhelmed

#### PEER MENTORING

one mentor and one mentee, both of the same age

## **PROS**

 Participants can build friendships and connections easily because they are the same age

## CONS

 Lack of guidance from an older and more experienced mentor

This comprehensive research gave us greater insight into how JDRF can structure their mentorship program to maximize continued participation. We next researched **how to recruit potential mentors**, and we came up with three possible approaches:

- Current Organizations → First, JDRF could work with current organizations such as
  Type Texas to find students who would be interested in a program like this.
- 2) <u>University Health Services</u> → Second, JDRF could work with the University Health Services to find students who have Type I Diabetes and reach out to gauge their



- interest. However, this may not be as feasible due to potential issues with medical confidentiality laws.
- 3) Social Media + Tabling → Lastly, JDRF could recruit mentors via social media campaigns or setting up informational booths around campus, a process known as "tabling" at UT Austin. This could be especially beneficial as it would reach students who are not yet involved in the Type I Diabetes community at UT.

Finally, we looked into how to find potential mentees.

- Involved Students → Firstly, we realized that the best way would be to reach out to students who are already involved with JDRF at a high school level, so that they can continue their experience in college.
- 2) <u>Social Media + Tabling</u> → Secondly, just like with finding potential mentors, mentees could be recruited through social media campaigns and tabling as well.
- 3) <u>Freshman Events</u> → Lastly, there is always a big rush of freshmen signing up for organizations during their first few weeks on campus; if JDRF could set up booths during events for freshmen, this could be beneficial as well.

After reaching out to people and interviewing them on their **favorite and least favorite aspects of mentorship programs** that they are involved in, we found a few key takeaways to ensure that the JDRF mentorship program is successful.

- Mentor Initiation → We found that it is crucial that the mentor initiates conversations and plans events with their mentee so that the mentee does not feel overwhelmed or intimidated.
- Personal + Professional Connection → It is also important for the mentor to strive to create a personal connection with the mentee by getting to know them outside of the intended curriculum. However, mentors should not stray too far from the intended purpose; creating a balance of meaningful guidance and casual interactions is key.
- <u>Larger Events</u> → Mentees also like to have bigger events with different mentors and mentees in the program so that they get a sense of a broader community.

## Recommendations

## **RECOMMENDATION 1 → Create a Group Mentoring Program**

We recommend that JDRF uses the group mentoring style for the program. This is because of two main reasons. First, it will be useful if JDRF cannot get enough mentors



to sign up. As long as there are enough mentors to support a group of mentees, then there will be no need to expend additional resources to gather more mentors. Second, according to our surveyed information, it will be easier for group members to interact and form bonds in a group setting. Compared to a one-on-one mentoring relationship, the mentee will not be able to socialize with as many people.

## **RECOMMENDATION 2** → Recruit Mentors from JDRF + Campus Organizations

In order to recruit mentors, we recommend that JDRF recruits **internally and from within college organizations**. For example, interested JDRF employees can sign up to become mentors for a specific college; an incentive could be provided, but through surveying results, we gathered that most mentors for these programs do it for an intrinsic reason.

Additionally, there are many campus organizations that could provide mentors for the program; in UT Austin specifically, there are organizations such as Type Texas. College students currently involved in JDRF could be motivated to start their own T1D organizations, and JDRF could promote the mentorship program from within those organizations. Although UT Austin would provide a great starting point for the program, we believe that the process could be duplicated and spread across other campuses.

## **RECOMMENDATION 3 → Follow Specific Timeline of Curriculum + Events**

To keep an organized and structured program, the mentorship program should follow a specific timeline of events. We recommended that the main types of events be separated by the two semesters of school. In the Fall Semester, there would mainly be a focus on informational lessons taught by the mentor of each group. The PowerPoints would be provided to these mentors to present, but they should have their own creativity to provide an engaging activity to be paired along with the lesson. In the spring, there would be more of a focus on group activities with multiple mentoring groups, such as going hiking together. We have provided a sample timeline for the fall semester on the following page.



# **JDRF Mentorship Timeline: Fall Semester** PROJECT BY UMBRA week 01: Kickoff **Introducing structure and groups** week 02: Lesson "Transitioning to College Life" week 04: Lesson "Eating Disorders" week 06: Lesson "Type 1 Technology" week 08-10: Events Halloween Bash, JDRF Walk



#### ANTICIPATED PROGRAM COSTS

In terms of evaluating costs, we wanted to offer a general overview of what JDRF can expect to spend on implementing this program. In relation to Step 3, **finding spaces**, we found that a rented venue for a formal gathering that could be used for an end-of-year banquet or other such event would cost approximately \$1,000 for one event. However, this would only be for a formal gathering, as other events could be held in spaces on campus. **Catering food** for events would cost approximately \$500 per event. Costs of **fun socials** like Bowling Night would cost about \$100. Lastly, even though our research shows that many mentors are willing to participate without compensation since they simply want to give back to others, if JDRF wants to pay **mentors** around \$10 per hour, the cost would amount to around \$10,000 per semester, for a total of 20 mentors.

All of these costs are approximated based on general research into food and events around Austin, but we are unable to give exact figures without knowing the true scope of the program. Additionally, calculations were made based on the assumption that we would have 20 mentors and 40 mentees.

## **SUGGESTED STEPS**

If JDRF decides to move forward with the partnership, these are the **initiating** steps we suggest JDRF take to get the mentorship program up and running:

- 1) Evaluate Costs → develop a budget for events and mentor incentives
- 2) <u>Develop Curriculum</u> → create comprehensive plans for mentors to use each week
- 3) Find Spaces → seek out rooms/areas for meetings and events
- 4) Find Participants → reach out to potential mentors and mentees



## CONCLUSION

In order for JDRF to increase its college-age retention and engagement, we recommend implementing a group mentorship program with mentors from JDRF and campus organizations first and foremost. A specific timeline of events and curriculum should be followed to ensure the program stays organized and structured. Furthermore, we recommend establishing partnerships with the TypeTexas chapters at both UT and St. Ed's; one main activity that should be conducted is an annual OneWalk. This work can lead in to support and supplement the mentorship program, and can also be a source for potential mentors and mentees. Based on the data collected from surveying individuals (some of whom have Type 1 Diabetes), we recommend focusing on diet/exercise/housing and dining involvement, potentially partnering with UHS, including a professional development aspect in programs geared to college-age individuals, and implementing the values of understanding, optimism, and trust into these programs. With the information gathered by the surveying team, the work of the mentorship program can be more accurately tailored to target the needs of college-age Type 1 individuals.

Hopefully, by testing the waters for these new solutions at the University of Texas at Austin, JDRF will be able to find local success that could then be expanded to other campuses or organizations nationwide using JDRF's large reach as a non-profit.

