Coping with the challenges of cerebral palsy
Read Alice’s story

Plus
BORN TOO SOON campaign updates
New resources for teachers to help children born prematurely
From the editor

Dear Supporter,

Welcome to this latest issue of Touching Lives, filled with news about research that’s already underway, plus exciting fundraising updates and fun new ways to support us this autumn!

Last September we launched our BORN TOO SOON campaign and one year on it has raised an amazing £400,000 to save and change lives.

Thanks to your support, medical research can help make such a positive difference for children like Alice, our two-year-old cover star who has cerebral palsy. Being born prematurely puts children at greater risk of this disabling condition, and its impact can be very wide ranging. So we’re proud to be funding a number of projects to help children who are affected by cerebral palsy.

We also have great news to share about research that is already making an impact for school children who were born too soon. On page 12 you can read all about how a set of new online resources for teachers will help them provide better classroom support for pupils who were born prematurely, helping children to achieve their full potential.

There is, as ever, more we can do, so please help our BORN TOO SOON campaign hit the £1 million mark by joining in our 60,000 Reasons challenge (see back cover). Or for something less sporty, Go Purple and raise money this November! Thank you for all your support.

Clare Airey, Editor
Fighting back against premature birth

One year on, our BORN TOO SOON campaign has raised an amazing £400,000. Find out how you can help us reach the £1 million mark!

Last September we launched our BORN TOO SOON campaign, shining a spotlight on the devastation caused by premature birth. With around 60,000 babies born too soon each year in the UK, sadly premature birth is still taking lives.

Over the last year, parents, families and communities have been fighting back. We’re all working together to raise £1 million by the end of 2020 to fund vital medical research that could benefit millions. We’re really pleased to say that already more than £400,000 has been raised as a result of the campaign.

You can read all about just some of the amazing fundraising that has been going on across the UK on page 14 – from running and cycling to Facebook fundraisers. Find out why new supporters Marcy, Lucy and sisters Ashley and Alex have got behind the campaign.

There are so many different ways you can help us reach our £1 million target. Our new 60,000 Reasons event is just starting, running from now until the end of November – find out more on the back of this magazine.

Or if purple’s your colour, then find out more below about how you can help us mark World Prematurity Day this November by going purple and raising vital funds for Action.

This November, we’re going purple!

Purple is the official colour of World Prematurity Day – a special day to raise awareness of premature birth which is marked on 17 November each year.

So throughout November we’re asking you to Go Purple, raise money for Action and help stop babies being born too soon. You could hold a purple bake sale, put on a purple pamper party or a big purple quiz! We have lots of fun and easy ideas for fundraising with friends or colleagues.

Take a look at the link below for inspiration and help raise vital funds that really could save lives.

action.org.uk/gopurple
Predicting the long-term effects of brain injury at birth

Jacob is now a happy four-year-old who loves being outside – and especially loves bouncing on his trampoline. For his parents, Laura and Abbie, it is a sight they thought they would never see.

Jacob’s birth was incredibly traumatic. He was resuscitated for 22 minutes and diagnosed with a brain injury called hypoxic-ischaemic encephalopathy (HIE).

To give Jacob the best possible chance, doctors immediately started cooling therapy, deliberately lowering his body temperature for two days. This life-saving treatment is now routine in the UK for babies who’ve suffered a shortage of oxygen at or around birth – and was the product of a 20-year programme of research to which Action contributed more than £1 million.

When Jacob left hospital at three weeks old his future remained very uncertain. MRI scans had shown serious damage to his brain, and Laura and Abbie were told that he would almost certainly never walk or talk, and could be blind.

Amazingly Jacob proved everybody wrong. But although cooling saves many babies from death or severe disability, little is known about the long-term effects of early brain injury. Many who are spared the most serious physical impairment still go on to have some developmental problems, such as learning or behavioural issues.

This appears to be the case for Jacob too: “We’re certain the cooling really helped,” says Laura. “I don’t believe he would have survived without it. But given the damage he had, it seems unlikely he’d be completely unscathed. Physically he is ok but mentally we still don’t know. Trying to find out more for children like him is really important.”

Jacob has sensory processing disorder and is showing signs of autism. “We’ve noticed things that are a bit different, traits he has that most other children his age don’t,” says Laura.

With Action funding, Dr Brigitte Vollmer and her team, based at the University of Southampton, are carrying out a study to gain a better understanding of the long-term impact of HIE on children who initially benefited from cooling. They also hope to develop ways to identify those who may need additional support.

Cooling therapy helped save Jacob’s life after he was starved of oxygen at birth and suffered serious brain injury. With Action funding, researchers are now studying the long-term effects of this type of injury on children like Jacob.

Every year around 1,000 UK babies experience HIE brain injury at birth.
Preventing infections in critically ill children

Children in intensive care often receive life-saving antibiotics but heavy use of these medicines is a growing concern. Researchers are studying a new infection control treatment that aims to reduce the need for strong antibiotics in vulnerable young patients.

Most critically ill children will be given antibiotics to treat suspected infections that are either a cause or complication of their illness, and this undoubtedly saves lives. But high exposure to these drugs can also increase the risk of developing antibiotic-resistant infections.

“Some critically ill children have long-term or complex health problems and infection by antibiotic-resistant bacteria could make them much sicker and reduce their chances of survival,” explains Dr Nazima Pathan.

Dr Pathan is leading a pilot study involving children in six intensive care units across the UK. This research is comparing standard treatment with a new infection control treatment, called selective decontamination of the digestive tract, which in adults appears to reduce infections and improve survival.

Most infections that occur when a child is receiving intensive care arise from bacteria growing in the gut. The new treatment uses non-absorbable antibiotics to stop this.

The Action-funded part of this study will build crucial knowledge about if and how the treatment works in children.

Gene therapy for a life-threatening rare disease

Action funding is helping an expert team to develop a new approach that could transform treatment for boys suffering from a very rare immune system disorder.

X-linked inhibitor of apoptosis or XIAP deficiency is an inherited condition, usually affecting boys, that’s caused by a faulty gene. Symptoms can vary but most develop an extreme response to a common viral infection, which can be fatal.

Currently, a bone marrow transplant offers the only hope of a cure but the long-term outlook is often very uncertain – sadly fewer than half of children survive even after transplant.

Building on previous success in developing gene therapies for other immune system diseases, a team based at the UCL Great Ormond Street Institute of Child Health aims to use a similar approach to fight XIAP deficiency. It involves inserting a correct copy of the faulty gene into the child’s own blood stem cells in the laboratory, then transplanting these back into the body to seed the regeneration of a healthy immune system. Using the child’s own cells should reduce the risks associated with transplant and increase the chance of success.

The team is currently studying the best way to correct the faulty gene, and will then determine if their approach is both safe and effective. This crucial research could pave the way for a clinical trial in children in the future.

These are just some of the new research projects we’re funding thanks to your support. Read more at action.org.uk/research-we-fund
Pioneering new ways to fight ear infection

Middle ear infection is one of the most common diseases in childhood and can become a persistent problem. Treatment has remained largely unchanged for decades but surgeon Michael Mather is using cutting-edge techniques aimed at developing more effective new treatments.

The small space behind the eardrum, known as the middle ear, usually contains air. But it can become filled with fluid, typically when a child has a cold, and if this gets infected by germs it becomes inflamed and painful. Although most usually clear up within a few days, many children get repeated infections—some will develop long-term middle ear problems.

“Middle ear infections are not only painful and distressing for children, but they can also result in regular absences from school and hearing issues that impact on their social and educational development,” says Mr Mather.

Children with recurring bacterial infections or with long-term middle ear problems are usually treated with antibiotics and surgery. “But prolonged or repeated antibiotic treatment can lead to drug resistance,” says Mr Mather. “And surgery has risks, including the need for a general anaesthetic.”

With Action funding, he and his team aim to gain a better understanding of how ear infections develop.

They are using the latest technology to analyse infection-fighting cells from the ears of children with recurring or long-term ear infections, compared to samples from healthy ears. They hope to identify key differences between healthy and inflamed tissues that could be targeted with new treatments to stop an initial infection becoming a long-term problem.

The team is also creating a new and unique 3D laboratory model of middle ear cells—a so-called ‘disease in a dish’, which will provide an invaluable tool for studying ear infections and for testing potential new treatments.

“We hope to identify new treatments to stop an initial infection becoming a long-term problem”

Developing future leaders in children’s research

Surgeon Michael Mather is the latest to be awarded an Action Research Training Fellowship. This scheme supports some of the most gifted doctors and scientists early on in their research careers. He aims to become a world-leader in his field and to build a career that’s dedicated to improving the treatment of ear infections in children. “I see my Action Fellowship as being the vital next step,” he says.

One of his research supervisors is also a previous Action Fellow, Muzlifah Haniffa. Now a Professor of Dermatology and Immunology, she runs her own lab within the Institute of Cellular Medicine at Newcastle University. She has received many high-profile accolades for her work, including the Lister Institute Research Prize, and is also a Wellcome Trust Senior Research Fellow.
A gift that will make a difference

The early birth of Winifred’s great, great niece last summer directly brought home the impact of our work. Here she explains why she’s leaving Action a gift in her will.

Winifred has been a loyal supporter of Action for more than 30 years. Back in the 1980s she enrolled her great nephew Christopher and his siblings in our Paddington’s Make it Grow Club, which later became the Paddington Action Club.

From this, Action became a part of Winifred’s life, and something she shared with her growing extended family of nieces and nephews.

“I continued to be involved with Action as I knew how important the work was,” explains Winifred. “I met Prince Philip at one of the charity’s Scottish receptions, and I’ve spoken to some wonderful professors and consultants.”

In the summer of 2018, as our BORN TOO SOON campaign was being launched, our work touched Winifred’s family much more personally. Her great, great niece Zoe, Christopher’s daughter, was born more than a month early and needed special care.

“Zoe’s mum was at work when she realised the baby was coming,” says Winifred. “They rushed to hospital and Zoe was born. It was just so quick, we had no idea what was happening.”

Thankfully Zoe is now a healthy one-year-old, but it was another reminder to Winifred about the importance of medical progress, and we are incredibly grateful that she’s planned to leave Action a gift in her will.

“Action is something that was in my heart. It makes me feel proud to know I’m doing some good. Some of the things that happen to children are just awful,” she says. “It’s so important that things are being discovered that can help. I think we owe it to the future benefit of the children to come that we do what we can to help.”

“We owe it to the future benefit of the children to come that we do what we can to help”

For more information about gifts in wills please contact Sharon at sgearing@action.org.uk or on 01403 327413

Make your next celebration one to remember!

Donating to charity in lieu of birthday or celebration presents is becoming an increasingly popular way to support a favourite cause – after all, you can’t beat the feeling of giving and how many boxes of chocolates do we all really need?

The funds you raise by asking for donations to Action will help provide a very special gift for thousands of children across the UK. And as a present from us, we’ll send you a pack of Action thank you cards!

Find out more at action.org.uk/CelebrationGiving

Photo: Jamie Williamson
“Alice is a bright and happy child – but she gets so frustrated because she can’t walk, crawl or even sit up without help”
Coping with the challenges of cerebral palsy

Like many two-and-a-half year olds, Alice loves to be the centre of attention. But sadly she faces a lifetime of difficulties as her movement is severely impaired by cerebral palsy.

When Alice was born two months early, her parents Jenny and Matthew had already once experienced the trauma of premature birth. Her older brother Jack had been born at just 25 weeks and two days, weighing less than 2lbs.

At 4lb 1 oz Alice was more than twice Jack’s birth weight and, although she initially needed some help with her feeding and breathing, she was well enough to go home within three weeks. An ultrasound scan had found no signs of brain damage, so Jenny and Matthew felt reassured.

But at Alice’s six-week check-up the consultant delivered devastating and unexpected news. Alice was found to have cystic masses on her brain, indicating severe and irreversible damage. She was diagnosed with a condition called periventricular leukomalacia. Cerebral palsy is the most common symptom and sadly Alice was severely affected.

The family were warned to consider the worst case scenario. “We were told that Alice might be unable to move at all. She might be unable to speak or eat, and could be dependent on us for her whole life,” recalls Jenny.

Reeling from the news, but aware of the benefits of early intervention and determined to give Alice as much support as possible, Jenny quickly set about organising physiotherapy – and, thankfully, this is greatly helping. “Without all of this help, she wouldn’t be where she is now,” says Jenny.

Despite initial fears that she wouldn’t, Alice has started to talk and her communication skills are not far away from the expected for her age. Every word is more than her parents dared hope for: “Her first word was ‘ack’, short for Jack,” says Jenny fondly.

Alice also does not suffer the pain, stiffness and muscle spasms that affect some children with cerebral palsy, and her intellect has not been affected. But her ability to move is severely impaired – and Alice is too young to understand why she cannot run about like other children.

“Alice is a bright and happy child – but she gets so frustrated because she can’t walk, crawl or even sit up without help. And, being a stubborn two-year-old, she doesn’t want to do the exercises that we know will help her,” says Jenny.

Alice’s daily routine involves several hours of physio to help develop her core strength and focus on key skills. She also has a special seat and a walking frame with wheels. “We call it her ‘red machine’,” says Jenny. “She uses it happily at nursery, where she has one-to-one support.”

Under the care of a complex medical needs team, the family’s schedule revolves around appointments. “Alice had 10 in one month alone,” says Jenny. And this doesn’t include those needed by her brother Jack, who although doing remarkably well, also has ongoing problems related to his early birth and was recently diagnosed with mild cerebral palsy himself.

The bravery and stoicism needed to cope with two children with additional needs is immense.

“Sometimes I look to the future and that’s what upsets me,” says Jenny. “My main issue is that Alice is bright and she will have to deal with having a permanent physical impairment. How will she cope? How will we help her to cope?”

Aware of research Action is currently funding to help children like Alice, Jenny says: “Anything that gives us more ways to help our children, or new therapies, and which helps families to manage is really important. Cerebral palsy is so wide-ranging and resources are so limited – but they are so vital for families.”

Alice with big brother Jack

action.org.uk touchinglives
New research to help children like Alice

Cerebral palsy is the most common serious physical disability in children. With your support, Action is funding researchers who are developing new treatments and therapies to give affected children the best possible quality of life.

At Newcastle University, Action-funded researchers are developing and testing a child-friendly, wrist-worn device and smartphone app to help children with hemiplegic cerebral palsy, which affects one side of the body. As the hand and arm are often severely impaired, children favour their other limb, worsening the weakness. This device aims to increase activity in the affected arm to improve strength and movement.

Action is also funding a UK-wide study that aims to ensure children with bilateral cerebral palsy, affecting both legs, receive the best possible treatment. Led by a consultant orthopaedic surgeon, this team is assessing the effectiveness of an operation called single event multi-level surgery, used to correct muscle and bone deformities and help children’s walking.

And researchers at Queen Margaret University near Edinburgh and at Brunel University are testing ways to increase exercise for children and young people who cannot walk independently or propel a wheelchair. This research team is assessing the feasibility and benefits of RaceRunning, which uses custom-built running bikes. This work is funded together with the Chartered Society of Physiotherapy Charitable Trust.

Cerebral palsy is caused by brain damage that occurs before, during or soon after birth and affects around 2,000 babies born in the UK every year. In many cases, like Alice’s, the specific cause of the condition is unknown but babies born prematurely, or with a low birth weight, are known to be at increased risk.

“Anything that gives us more ways to help our children and helps families to manage is really important”

Alice’s mum, Jenny

At Action Medical Research we fight for children like Alice. Thank you for making this vital research happen.
Researchers have developed and tested a new ultrasound-based assessment to help children born with a cleft lip or palate to overcome speech problems. Their important findings pave the way for improving surgical decision-making in the future.

Babies born with hypoplastic left heart syndrome face a series of complex, life-saving operations – the first when they are less than two weeks old. This initial operation can be carried out using one of two techniques.

Dr Pablo Lamata and his team at King’s College London used advanced computer analysis to retrospectively compare MRI scans of babies treated using each surgical approach. Their new techniques allowed them to create 3D models of each heart. This revealed subtle changes that could not previously be seen, and they found that one of the surgical treatments was more likely to impair the growth and function of babies’ hearts.

Long-term follow up is needed to see if these findings are associated with differences in clinical outcomes but, says Dr Lamata: “This valuable knowledge could help surgeons choose the best surgical technique in future cases.”

The team also studied the aorta, the main blood vessel in the heart, and discovered a new ‘weak link’ affecting babies with hypoplastic left heart syndrome. This places additional burden on the hearts of these vulnerable babies – something that was detected thanks to new non-invasive methods for estimating central blood pressure within the heart.

The use of these new analysis techniques is an advance towards future non-invasive assessments for babies and children living with congenital heart conditions. This could reduce costs, reduce risks and allow closer monitoring, helping surgeons decide on the best approach for each child.

Action jointly funded this research with Great Ormond Street Hospital Children’s Charity.

Researchers have developed and tested a new ultrasound-based assessment to help children born with a cleft lip or palate to overcome speech problems.

Babies born with a cleft lip or palate have a gap or split in either their upper lip or the roof of their mouth, and some have both. Even after surgery, many children have ongoing problems with their speech.

Speech therapists usually assess children by ear, writing down issues they detect as they listen. But some problems are difficult to identify in this way, meaning important information can be missed.

Supported by Action and The Chief Scientist Office, Scotland, Dr Joanne Cleland, at the University of Strathclyde in Glasgow, has developed the use of ultrasound assessment. This gives a more accurate and detailed diagnosis, and has been found to identify speech errors that were not identified by listening alone and may affect treatment choices.

Some children are also able to use images on the screen as a feedback tool, showing them how to move their tongues to produce more accurate speech.

The new assessment method is already being used in four clinics across the UK with children who have a wider variety of speech disorders, and it is hoped it will be rolled out further in the future.
Supporting premature-born children at school

We’re delighted that with your support Action has funded the development of an important new online resource for teachers, specifically designed to help them better understand and support children who were born too soon.

In a typical UK primary school class there will be, on average, two or three children who were born prematurely. But research carried out by Professor Samantha Johnson and her team at the University of Leicester found that despite the fact that almost all education professionals will be responsible for supporting children who were born preterm, many teachers are not aware of the issues these particular pupils may face. They also have very limited training on how they can help.

Children born early are known to have a higher risk of experiencing learning difficulties or special educational needs as they grow up. While children born extremely prematurely, before 28 weeks of pregnancy, are most likely to need extra support, those born just a few weeks early can still face difficulties. And sometimes the challenges these children face may go unnoticed, as Professor Johnson explains.

“Although most preterm babies won’t have severe disabilities, many might have subtle cognitive, social or emotional difficulties that impact on their learning and which can be quite difficult to detect in the classroom,” she says.

“That’s why it’s so important to be able to understand the kinds of difficulties that preterm children might have, to be able to identify those problems early and provide the most appropriate support to help these vulnerable children achieve their full potential.”

How we helped

With Action funding awarded in 2015, Professor Johnson has developed an interactive online learning resource, working with colleagues from the University of Nottingham, Loughborough University, Ulster University and University College London.

This tool explains the impact preterm birth can have on a child’s development and learning, and includes practical strategies that teachers can use to support children. One of the key areas looked at is maths, the subject that children born early are most likely to find more difficult.

The resource has been trialled by teachers and after using it there was a big increase in their knowledge of preterm birth and in their confidence in supporting preterm children. So much so that 97% of teachers in the study said they would recommend it to others.

This exciting new resource has the potential to make a difference to thousands of young lives. It is now freely available to schools, teachers and parents across the world and can be downloaded at pretermbirth.info
Due to be born in October 2012, Jago arrived a shocking 15 weeks early in June along with his identical twin brother, Sam, who tragically did not survive. Tiny and very fragile, Jago spent his first four months in hospital.

Jago thankfully recovered well from his traumatic start in life, but he does have mild hearing loss. It’s known that children born extremely prematurely are more likely to need extra support at school — and this has been very much the case for Jago, who’s now seven.

“Jago was catapulted into an earlier school year by default,” explains his mum, Georgie. “So after seeking a lot of advice, we decided to keep him back to the year that he was intended to be in.

“Despite starting later, Jago’s first year at school was still much harder than I’d expected,” she adds. “Making friends with his peers has always been slow as he was quite isolated in his earliest years of life. Two years in he is much more confident, and has a lovely set of friends.”

Jago has struggled with maths but finds writing and reading the hardest. “He is in the lowest set but is praised highest for trying. He finds school very tiring, as he has to work harder to overcome the problems associated with background noise,” says Georgie.

Research has shown that even children born just a few weeks early may need some extra support — and children born prematurely tend not to present as disruptive, meaning difficulties might not be spotted so quickly.

“We actively sought support for Jago, and continue to do so, providing his carers and teachers with as much information as possible,” says Georgie.

“The new online resource is excellent and one that I would hope every teacher around the world can learn from. It’s a great tool that should be seen by all new and existing teaching professionals.”

“Some teachers have an awareness of the issues that prematurity can present but we feel that any additional information and support for all teachers is invaluable,” she adds.

“As extremely premature babies mature further, evidence of issues relating to their prematurity is emerging, including educational needs. It’s so important to invest in research on behalf of these children’s futures.”

Helping school children like Jago

“The online resource is excellent and one that I would hope every teacher around the world can learn from”

Jago’s mum, Georgie

Thank you!

Your support has helped to create a much-needed new resource that will help teachers understand the social, emotional and academic needs of children born prematurely.
Fundraisers fight back against premature birth

We’re so grateful to everybody who has supported our BORN TOO SOON campaign, in whatever way they’ve chosen. Here are just a few of our fantastic fundraisers.

Running for tiny lives – Marcy’s story

Driven by the loss of one of her tiny granddaughters, Marcy took on the challenge of running the Vitality London 10,000 in May, with support from son Keith. Together they raised more than £500.

Twins Isla and Paige were born at just 26 weeks. “The girls were perfect – tiny and fragile – but beautiful,” says Marcy. “For four weeks they went from strength to strength. Then Paige became ill. She developed necrotising enterocolitis (NEC), a truly devastating illness, and despite an operation and a battle for life she died in her mummy and daddy’s arms.”

“I would climb a mountain today to bring Paige back. I can’t do that, but I can help raise funds for Action”

First-time mum turned fundraiser – Lucy’s story

Lucy shared her story with us when BORN TOO SOON first launched. Baby Luka arrived suddenly, 10 weeks too soon, in May last year. With his traumatic start thankfully behind them, Lucy’s thoughts turned to helping others. She’s been playing our weekly lottery and as a social media champion has encouraged friends and family to support us via Facebook and Instagram. Luka’s helped too as the face of our recent NEC appeal! And as this magazine went to press, Lucy was about to hold her first fundraising event.

“Premature birth can happen to anyone – there’s just not enough research”

Luka’s mum, Lucy

Thank you to everyone who has supported BORN TOO SOON so far. Together we are unstoppable!
Amazing support from Price Bailey

Our fight to help the most vulnerable babies has also won the hearts of staff at accountancy firm Price Bailey. We’re delighted to be their chosen charity until 2020. Offices in Cambridge, Bishops Stortford, Ely, Norwich, Sawston, Guernsey and London have thrown themselves into fundraising. There have been charity days, scavenger hunts, quizzes and bake sales. There have also been personal and team challenges. Staff have got on their bikes, walked, jogged and run, and even held a netball tournament. Their amazing efforts have so far raised over £70,000.

Pedalling to Paris – Alex and Ashley’s story

Twins Alex and Ashley took on our London to Paris cycle challenge, riding in memory of their mum, Jayne, who sadly died shortly after their early birth.

“The expert care we received as babies might not have been possible without the help of charities like Action”

Jayne had developed pre-eclampsia during her pregnancy and, when her condition dangerously deteriorated, the girls had to be delivered under controlled conditions. They were born weighing just 2lb and spent several months in hospital.

“Pregnancy complications and premature births happen daily and it breaks our hearts – the thought of others having to go through such a difficult time,” says Ashley.

Business supporters’ fundraising feats

Richard and Heidi Skerritt, of Skerritts Consultants, really put themselves to the test this summer: Richard entered the ring for the second Skerritts’ Fight Night, which raised more than £50,000. While Heidi took to the stage for a fantastic dance performance of Madonna’s Material Girl as part of Brighton’s Midsummer Ball, an event which raised over £77,000 to be split between Action and three other charities.

New supporters Alliance Healthcare fielded five teams in our multi-discipline challenge event, Race the Sun, held in the beautiful Welsh hills around Offa’s Dyke. Teams battled bravely through unseasonal wind and rain, with their fantastic achievement raising £14,000. A further £6,000 was raised by three members of staff completing the Virgin Money London Marathon in April.

And staff from Arun Estates have also again risen admirably to the challenge of fundraising. Different divisions of the company, which operates under four estate agent brands, did battle on exercise bikes, fighting it out to see who could clock up the most miles and claim the title of fittest firm! Their efforts raised almost £3,500, with more activity yet to come.

A big thank you to all the businesses that support us and make our vital research happen. To find out more about how your business can support us visit action.org.uk/support-us
Jog on for Action!

Are you looking to take your first tentative steps into running, or upping your distance and pushing towards the ultimate marathon challenge? Action has access to hundreds of running events up and down the country (as well as overseas). From a Dog Jog in Derby to an obstacle run in Oxfordshire, or a 10k in Tenby to a marathon in Manchester, we’ll have something for you!

Check out our website for more details, call our helpful events team on 01403 327444 or email events@action.org.uk to find a run near you.

action.org.uk/running

60,000 Reasons to join our new event

This autumn sees the launch of our brand new BORN TOO SOON event, 60,000 Reasons. We challenge you to run, walk, plod or even skip 60 miles in 60 days to raise £60 or more to help babies born too soon. Around 60,000 babies are born prematurely each year in the UK. Tragically more than 1,000 babies lose their lives due to premature birth. But we’re fighting back. Will you join us?

Cover 60 miles wherever you like and at your own pace between 1 October and 29 November 2019. However you choose to complete the challenge, the money you raise will help fund vital research for some of the toughest fights our children face.

Sign up today and take your first step!

60kreasons.action.org.uk

RUN WALK PLOD