

Shallion Support

Where Compassion Peaks and Support Prevails



The Problem



1 in 10 people in the UK live with an autoimmune disorder



Up to 89 % report severe fatigue affecting everyday tasks



Existing support is medical-focused, costly, or generic



Isolation and mental-health challenges worsen outcomes



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Current Prevalence Data

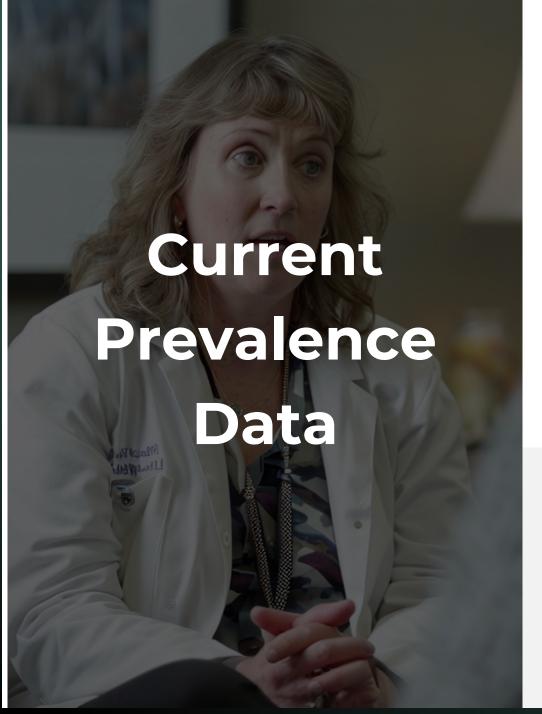


Table 1. Estimated prevalence of ME/CFS, Long Covid, and Fibromyalgia by city, with approximate number of affected individuals in each location

ME/CFS (≈0.4% of pop.)
~0.4% (≈2,500 people)
~0.4% (≈2,100 people)
~0.4% (≈900 people)
~0.4% (≈600 people)
~0.4% (≈190 people)
~0.4% (≈190 people)
~0.4% (≈90 people)

Long Covid (≈3.2% of pop.)
~3.2% (≈20,200 people)
~3.2% (≈16,700 people)
~3.2% (≈7,300 people)
~3.2% (≈4,700 people)
~3.2% (≈1,500 people)
~3.2% (≈1,500 people)
~3.2% (≈700 people)







Scottish Areas with Highest Autoimmune Disease Prevalence

- Orkney Islands Diagnosed MS rate: 402 per 100,000 people, the highest MS prevalence ever recorded worldwide. (One in 170 women on Orkney has MS.) This rate, from a major 2012 study, was more than double the Scottish national MS prevalence at that time.
 Overall prevalence: Approximately 0.4% of Orkney's population lives with MS (versus ~0.2% across Scotland). When considering all autoimmune disorders together, Orkney's total burden is likely elevated as well for context, about 10% of the UK population has some form of autoimmune disease, so a small community like Orkney (population ~22,000) might have on the order of a couple thousand people affected by autoimmune conditions in total. The extraordinarily high MS rate on Orkney (often dubbed the "MS capital" of the world) is a key contributor to its overall autoimmune disease prevalence.
- Shetland Islands Diagnosed MS rate: 295 per 100,000 people, the second-highest MS prevalence in Scotland (only behind Orkney). This equates to roughly 0.3% of Shetland's population having MS. Like Orkney, Shetland saw its MS rates rise over recent decades. Overall prevalence: Shetland's autoimmune disease burden per capita is among the highest in the country, driven largely by MS. Its MS prevalence is about 40% higher than Scotland's average. Although detailed data for all autoimmune diagnoses in Shetland are limited, the elevated MS frequency suggests environmental or genetic factors that might also influence other autoimmune conditions. (Scotland's northern isles have been a focus of research to understand these unusual clusters.) In sum, Shetland's small population (~23,000) includes a disproportionately large number of autoimmune disease patients relative to national norms, again chiefly due to MS.

City of Aberdeen (Northeast Scotland) – Diagnosed MS rate: 229 per 100,000 people, which is the highest MS prevalence recorded for any Scottish city and notably above the national average. Aberdeen was identified in the same study as having one of the top three MS rates in Scotland (after Orkney and Shetland). Overall prevalence: With a population of ~220,000, Aberdeen has a substantial absolute number of individuals with autoimmune diseases. An MS prevalence of 229/100k suggests roughly 500 individuals in the city living with MS. Beyond MS, if around 10% of people have any autoimmune condition (the UK-wide estimate), one could expect on the order of 20,000+ people in Aberdeen affected by autoimmune disorders (including common conditions like rheumatoid arthritis, type 1 diabetes, thyroid autoimmune diseases, etc.). While Aberdeen's percapita rate for MS and some other autoimmune illnesses is high (possibly influenced by its northern latitude and genetic factors), in terms of sheer numbers it also has one of the largest autoimmune disease populations in Scotland (given it is a major city). This dual distinction (high rate and a large patient population) makes Aberdeen a key area of focus for autoimmune health services in Scotland.

Current Prevalence Data



Scottish Areas with Highest Autoimmune Disease Prevalence

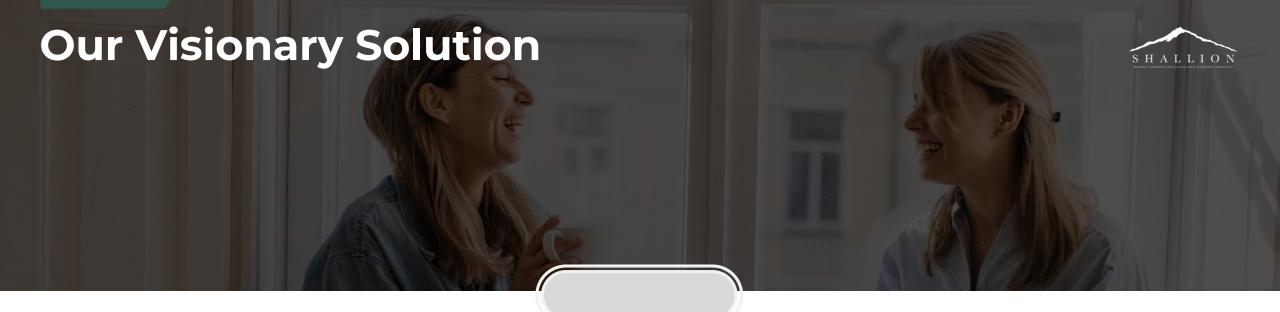


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Bespoke, non-medical home-support service



Specialised in M.E., Lupus, Fibromyalgia, PTSD & related conditions



Volunteer-powered model reducing isolation & building community



Hybrid paid + free services under social-enterprise mission







Referral or self-sign-up via web/app



Free needs assessment & tailored support plan



Al-assisted matching with trained volunteers



In-home or virtual assistance (meal prep, housekeeping, IT help, companionship)

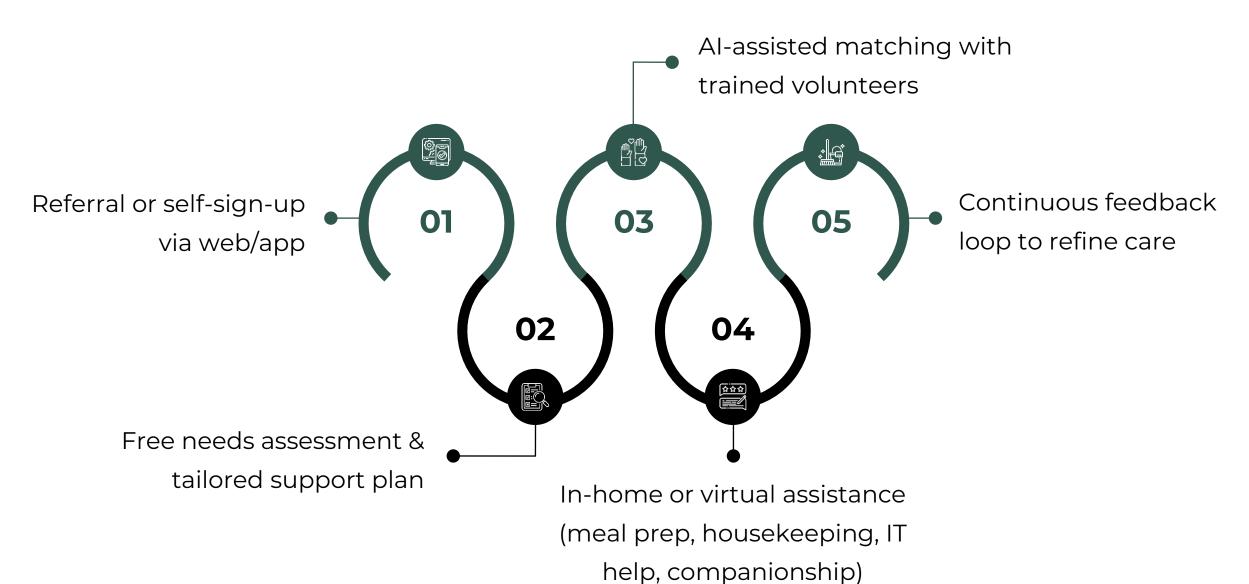


Continuous feedback loop to refine care



How It Works





Technology & Partnerships



Collaboration with University of Aberdeen computer-science department



Matching platform & mobile app launching August 2025



Data-driven volunteer-client matching and scheduling



Online shop for branded merchandise & nutrition products built by MSc students





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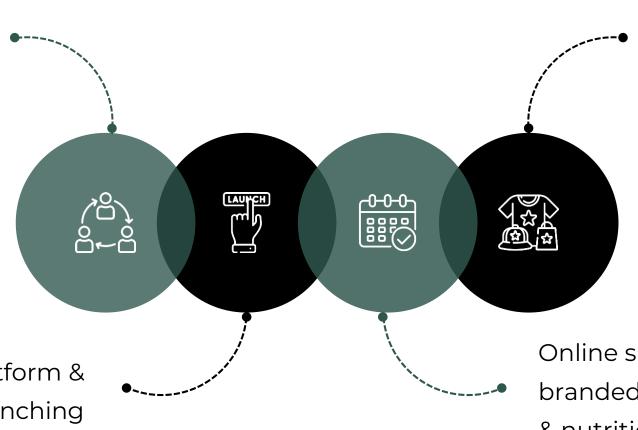


Online shop for branded merchandise & nutrition products built by MSc students

Technology & Partnerships



Collaboration with University of Aberdeen computer-science department



Data-driven
volunteer-client
matching and
scheduling

Matching platform & branded merchandise while app launching August 2025

Online shop for branded merchandise & nutrition products built by MSc students







4.6 million UK residents receive disability benefits for long-term conditions



£10 bn+ annual UK home-care spend and rising with ageing population



Shallion bridges the gap between clinical care and daily-living support



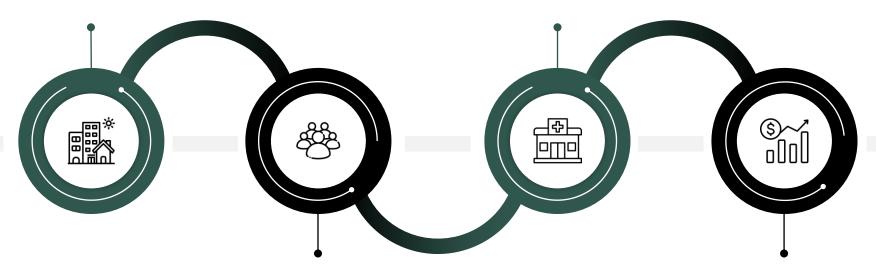
Dual revenue: service fees, merchandise & nutrition sales, grants & sponsorships

Market Opportunity & Social Impact



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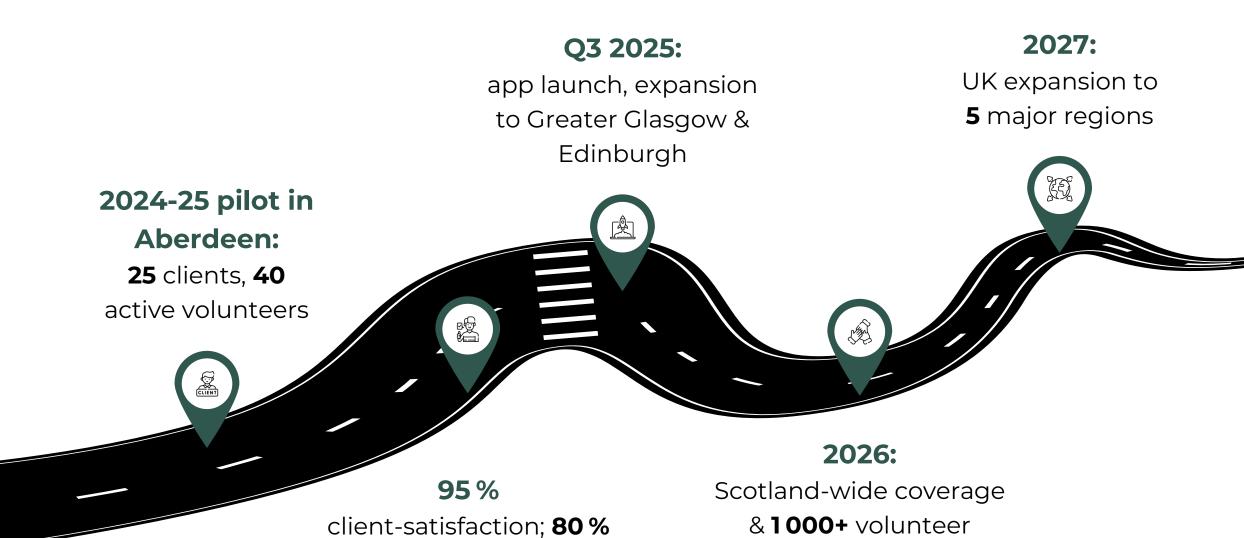


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home-care spend and rising
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Traction & Roadmap





report reduced isolation

hours/month

Traction & Roadmap



2024-25 pilot in Aberdeen:

25 clients, **40** active volunteers

95%

client-satisfaction; **80** % report

reduced isolation

Q3 2025:

app launch, expansion to

Greater Glasgow

& Edinburgh

<u>_</u>____

2026:

Scotland-wide

coverage & **1000+**

volunteer

hours/month







UK expansion to **5** major regions



Competitive Landscape



Traditional home-care agencies – medical & costly



Volunteer bureaux – limited structure & training



Gig platforms – transactional, short-term focus



Shallion – specialised, communitydriven, tech-enabled hybrid model



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Business Model & Sustainability



Merchandise & nutritious meal-kit sales

Government & NHS referrals with funded care packages

Sliding-scale service fees for private clients



Grants, corporate sponsorships, community fundraising

Target **45**% gross margin on paid services by **2027**

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Team & Contact



Founders: lived experience + socialenterprise leadership



Clinical advisor: Occupational therapist specialising in fatigue management



Technology lead: MSc Computer-Science cohort, University of Aberdeen



Design & marketing: local creative-industry volunteers

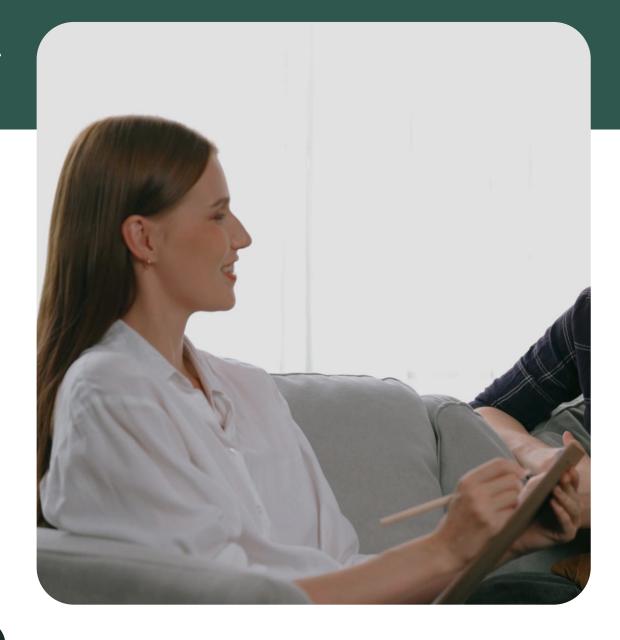
Contact



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Team & Contact





Founders:

lived experience + social-enterprise leadership



Clinical advisor:

Occupational therapist specialising in fatigue management



Technology lead:

MSc Computer-Science cohort, University of Aberdeen



Design & marketing:

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Thank You

Join us in empowering lives touched by autoimmune conditions





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