



Alzheimer's Disease
International

Annual Report 2000/2001



Message from the president



Princess Yasmin Aga Khan, president

When my mother, Rita Hayworth, was diagnosed with Alzheimer's disease in 1981, I had no idea what it was or what to expect. Until I was introduced to the Alzheimer's Association (USA), I felt lost and confused. The knowledge and help I received from them during the years of caring for my mother until her death in 1987 were invaluable.

I decided that my mother's illness could be a catalyst for increasing public awareness about dementia. As president of Alzheimer's Disease

International (ADI) since its foundation in 1984, I am proud to be part of a tremendous effort to raise awareness of dementia and to reach out to the 18 million people with dementia and their families worldwide.

ADI is committed to building effective Alzheimer associations throughout the world, as effective Alzheimer associations are better able to meet the needs of people with dementia and their families. With your support ADI will continue to expand its global network.

Large photo on cover: The Star, Malaysia

What is dementia?

Dementia is a degenerative brain syndrome which affects memory, thinking, behaviour and emotion. As yet, there is no cure for dementia. Alzheimer's disease is the most common cause of dementia. Dementia knows no social, economic, ethnic or geographical boundaries. Eventually those affected are unable to care for themselves and need help with all aspects of daily life. Throughout the world most of this care is provided by the family.

Currently there are an estimated 18 million people worldwide with dementia. Of these, 12 million live in developing countries. The total number of people with dementia will nearly double to 34 million by 2025. Much of this increase will be in heavily populated regions such as China, India and Latin America.

Alzheimer's Disease International (ADI)

ADI was established in 1984. We are the umbrella organisation of national Alzheimer associations worldwide. Our 57 members work to improve the quality of life of people with dementia and their carers. ADI:

- supports members in their activities and encourages the formation of new associations
- disseminates information
- supports an annual international conference focused on carers and carer organisations
- collaborates with other organisations with similar interests
- encourages research
- stimulates public and political awareness at national and international level

Our members aim to

- provide information and advice
- run self-help/support groups
- advocate on behalf of people with dementia and carers
- raise public awareness
- assist in the development of public policy issues
- run training courses
- encourage research



**Alzheimer's Disease
International**

Report of the chairman and executive director



Dr Nori Graham, chairman

Nearly one hundred years have passed since Dr Alois Alzheimer first described Alzheimer's disease, the most common cause of dementia. It is remarkable to reflect on how far we have come from the days when there were no Alzheimer associations, no understanding of the causes of dementia, no treatment options and no hope for people with dementia and their families.

Since it was founded in 1984, ADI has grown into a truly international umbrella organisation of 57 Alzheimer associations throughout the world and a network of researchers studying the impact of dementia in developing countries. Worldwide, there are now tens of thousands of volunteers providing support to people with dementia and their families. But we need to do more.

Still in many countries, dementia is regarded as a normal part of ageing and is surrounded by taboo and myth. These barriers can prevent people with dementia and their families gaining access to support and information. Although there is no cure, there is much that can be done to improve the quality of life of people with dementia and their families, which was a key



Elizabeth Rimmer, executive director

message of our World Alzheimer's Day bulletin in 2000.

Raising awareness of dementia underlies all the work of ADI and our members. You will read in this annual report about the World Alzheimer Congress 2000, our annual conference which was hosted by the Alzheimer's Association (USA) in collaboration with the Alzheimer Society of Canada, in Washington DC, USA, and the tremendous media interest it generated.

Governments worldwide need to take measures to address the impact of dementia on social and healthcare systems, particularly in developing countries where most people with dementia live. This year the World Health Organization (WHO) selected mental health as the theme for World Health Day and chose dementia as one of six disorders to highlight. ADI was invited to deliver an official statement on the global impact of dementia at the launch of World Health Day on 6 April 2001 at the WHO's headquarters in Geneva.

Our relationship with WHO continues to strengthen and we are pleased to report that they have provided some funding over the last year for our 10/66 research network

by supporting dementia studies in 10/66 centres in the Dominican Republic, Russia, India and China. This work will lead to the development of a simple training and support programme for family carers of people with dementia that can be used in community settings in developing countries.

Strengthening the work of our members and encouraging new Alzheimer associations is the fundamental role of ADI. We hosted our third successful Alzheimer University in February 2001, for representatives of nine emerging Alzheimer associations. Since we piloted the Alzheimer University in 1998, 24 Alzheimer associations have participated in this practical skill building programme. Over the last year we have seen the development of more partnerships between members and increased member and potential members participation in regional meetings. Alzheimer's Disease International has an important role in facilitating the active exchange of information, news, skills and experience within our network to assist Alzheimer associations worldwide to provide support for people with dementia and their families.

This annual report highlights our achievements over the last year and some of the work of our members. However, we must not forget the reality that 18 million people worldwide have dementia and, of these, two thirds live in developing countries. So, whilst recognising the progress we have made, the dedication of volunteers and staff throughout the world, and our generous supporters, it is crucial that we continue to make further progress in 2002 and in the years beyond, to build stronger Alzheimer associations throughout the world.

Strengthening Alzheimer associations

‘The Alzheimer University gave me a new look into the aims and objectives of Alzheimer’s Pakistan. We cannot do everything. I think for the moment we work towards raising awareness, education and training. I will go back with a better understanding of how to run my organisation’

Hussain Jafri, Alzheimer’s Pakistan

‘The workshops for the Alzheimer associations were excellent and really provided members with the opportunity to learn from

The Alzheimer University

ADI hosted the third ‘Alzheimer University’ training programme aimed at strengthening the work of emerging Alzheimer associations in London during February.

Participants came from Costa Rica, Cyprus, India, Indonesia, Nigeria, Pakistan, Peru, Philippines and the Ukraine.

The Alzheimer University focuses on the fundamentals of setting up an association – such as identifying aims, providing information, raising awareness and fundraising. The programme ended with a strategy day where participants set three realistic objectives for their association over the coming year. Participants are followed up at six months and one year and have been encouraged to keep in regular contact with ADI and each other via an email list.

Since attending the Alzheimer University, the representatives of the Peruvian Alzheimer Association have repeated the programme with the board of the national office based in Lima and with board members of the branch based in Arequipa – the second largest city in Peru. Having gained so much from the course, they wanted to share their knowledge and experiences so as to strengthen the work of the Alzheimer Association in Peru.



Group work is an integral part of the Alzheimer University programme, encouraging participants to share experiences with one another



The fundraising workshop set participants the task of writing and presenting a project proposal to a foundation: the winning group showed off their success!

Regional meetings

Regional networks enable members to share information and skills that may be more culture specific and sometimes in the same language. The Alzheimer’s Association of Uruguay hosted the 4th Latin American regional meeting in Montevideo during May, which also coincided with their 10th anniversary celebrations. Eleven of ADI’s members in the region participated in the meeting, using the opportunity of being together to run workshops in Spanish on the role of the board and coping with organisational growth.

Members of ADI and other groups and individuals from the Asia Pacific region met during ADI’s third regional meeting hosted by the Alzheimer’s Association of Singapore in September. Keynote presentations focused on three main topics: caregiver support, training professionals and increasing public education and awareness.

one another. I do hope you feel proud of what you achieved'

Participant Latin American regional meeting

'Visiting this Navaho community helped us approach our own indigenous groups with new eyes and ears. For the Americans, hearing the challenges of South Africa brought new perspectives to help them meet the needs of their indigenous people and growing Latino communities'

Kathy Beukes, Alzheimer's and Related Dementias Association of South Africa



Meeting within the culturally diverse region of Asia Pacific allowed delegates to explore their similarities and differences



Regional workshops, such as that in Uruguay, strengthened the work of our Latin American members by bringing together individuals whose first language is Spanish

Partnerships in ADI

Within our membership there is great expertise on how to develop and run Alzheimer associations and support people with dementia and their carers. ADI has encouraged members to develop partnerships to share skills and expertise. There are now partnerships between members in South Africa and New Mexico (USA), Scotland and Romania, UK and India, UK and South Africa, Los Angeles (USA) and Mexico, and Chile and Cuba. Many of these partnerships have developed at ADI conferences, which provide an opportunity for people to meet and discover just how much they really have in common.



Reciprocal visits between partners have been essential to understanding each other's challenges. Scotland visited the Romanian office, where staff wear house coats because of lack of heating



Having visited each other's region, New Mexico (USA) and South Africa strengthened their partnership at the World Alzheimer Congress

Raising awareness

'I had no idea this was such a worldwide problem, I don't feel quite so alone as when I first came here'

Carer from Virginia, USA

'We celebrated a marvellous World Alzheimer's Day this year; we took a novel step by moving to where the

Annual conference

ADI in collaboration with the Alzheimer's Association (USA) and the Alzheimer Society of Canada hosted the World Alzheimer Congress. Over 5000 scientists, family and professional caregivers, staff and volunteers of Alzheimer associations, people with dementia, clinicians and other interested professionals gathered in Washington DC during July 2000. In addition, it is estimated that there were 561 million media impressions generated by the ten-day congress.

The World Alzheimer Congress consisted of three events each targeting different audiences: Pivotal Research presented the latest dementia findings for scientists; Bridging Research and Care provided information about diagnosis, treatment and caring for physicians; and Creative Care encouraged delegates from different Alzheimer associations and care settings to learn from one another. The congress came to a close with Ed Truschke, president and CEO of the Alzheimer's Association (USA), reminding us that the 'global Alzheimer movement is all about ordinary people doing extraordinary things'.



An estimated 561 million media impressions were generated by World Alzheimer Congress



Maureen Reagan, daughter of former US president Ronald Reagan, urged Federal government to increase funds for Alzheimer research

World Alzheimer's Day 21 September

Last year saw the biggest participation in World Alzheimer's Day since its launch in 1994 with 46 countries organising events. Alzheimer associations from Iceland to Indonesia observed 21 September with a series of activities including leafleting campaigns, information displays, launching new branches, websites and day care facilities, education programmes, media releases, coffee breaks and tea days, addressing governments, conferences and seminars, walks and fun runs to name but a few.

The theme centred on quality of life and what this means to the person with dementia and their carer. Dr Gro Harlem Brundtland, Director General of the World Health Organization, supported the day by 'urging governments to recognise and assist carers in their task by improving services and provide financial as well as other types of support'.

Providing information

people are and were greatly assisted by the media. The success went beyond our wildest expectations'

Richard Uwakwe, Nigeria

'I want to express my warmest thanks for the information that I have received so far. It has made the world of difference and has reduced the anxiety that was felt over my father's recent deterioration in his health'

Carer from UK whose father lives in Jamaica



Over 1000 volunteers from the Alzheimer Association of Japan supported leafletting campaigns, like this one in Nagasaki, in 72 locations throughout the country



Alzheimer's Disease Association of the Philippines observed World Alzheimer's Day for the first time with a fun run through the streets of Manila

Expanded website and new publications

As the number of people visiting our website increases each year, so are the number of people contacting us by email. Consequently, we have revised our website so that visitors can easily find information about ADI, dementia, where to get help and the global impact of dementia. Links to materials available in other languages are a new feature of our website.

However, we are mindful that most people in the world do not have access to the internet and so we also print and distribute our material by post. This year, we have produced a new factsheet on risk factors for dementia and translated all our factsheets into Spanish. Our practical booklet 'Help for Caregivers' is now available in Tamil and Cantonese, in addition to seven other languages.



A presence in the exhibition hall at conferences is an important way of introducing people first hand to the work of ADI



Our information is used by a variety of people throughout the world: here a pharmacy in Poissy, France, organised a community display

Encouraging research

'They think he's not well. Most people do not know, he stays away when visitors come, so they think he's not well. Our neighbours don't know. We don't speak much to our relatives – they don't come often'

Carer from India, in response to a 10/66 study of care arrangements for people with dementia in developing countries

The 10/66 dementia research group

The 10/66 dementia research group, affiliated to and supported by ADI, brings together researchers mainly in developing countries who are quantifying the prevalence of dementia and describing care arrangements of people with dementia. So far, over 100 researchers in 36 research centres in 27 countries have been trained. Preliminary results from studies indicate that caregiving in developing countries is associated with high levels of perceived 'burden' and substantial economic disadvantage. Findings show that dementia is very much a hidden problem with little awareness at every level of society. 10/66 and the World Health Organization are currently collaborating on a study to evaluate and develop services for people with dementia in the Dominican Republic, the People's Republic of China, India and Russia.



Describing care arrangements involved 10/66 researchers visiting and interviewing people with dementia and their carers in their homes

Medical and scientific panel (MSAP)

ADI has a medical and scientific panel who act as ambassadors and advisors. Over the last year a survey of availability of drugs for treatment of dementia in 43 ADI member countries was updated. The survey provides information on which drugs are available and whether or not they are subsidised. This has been useful in some countries for lobbying to increase access to drug treatments.

Collaboration

'The majority of people with dementia are doubly excluded both because they are old and because they have lost their memories and are regarded as a nuisance. This is no way for people to end their lives'

Nori Graham, Chairman of ADI

Stop exclusion. Dare to care

World Health Day
6 April 2001

The World Health Organization (WHO) selected mental health as the theme for this year's World Health Day. Six representative disorders, including Alzheimer's disease, were highlighted. Focusing on the stigma and discrimination surrounding brain disorders, WHO is daring governments, health professionals and people from all walks of life to stop exclusion of those affected. ADI was invited to deliver a statement at the official launch of World Health Day on 6 April in Geneva on the global impact of dementia.



Dr Bertolote (right), senior medical officer at WHO, celebrated the launch of World Health Day 2001 with ADI and the Swiss Alzheimer Association

Report from council

The council is the governing body of ADI. It consists of the delegates of the full members associations and individual members of the executive committee. The council is responsible for ADI's policy and overall direction and meets once a year.

The council met in Washington DC, USA, on 15 July 2000. Present at the meeting were Princess Yasmin Aga Khan (president), Jerry Stone and Brian Moss (honorary vice presidents), members of the executive committee, 35 voting members, three provisional members (non-voting), Elizabeth Rimmer, executive director, Susan Frade, membership officer, Michael Lefevre, finance and technology officer, and a large number of observers.

Elizabeth Rimmer outlined the activities of the year 1999/2000 as detailed in the annual report circulated at the meeting.

Strategy plan 2000-2002 and fundraising

Elizabeth Rimmer presented the plan and identified four strategic objectives for the next three years:

- Strengthening membership
- Exploring greater publicity for WAD
- Expanding the website
- Promoting the 10/66 research group.

In order to achieve these objectives a fundraising strategy needed to be developed and implemented as a priority. It was agreed by council that professional help should be taken on, subject to budget.

Reports from regions

Dr Jacob Roy, Roberto Garcia and Jeannot Krecke presented reports from the Asia-pacific region, Latin America, and Alzheimer Europe respectively.

Conference 2004

The council agreed the application submitted by the Alzheimer's Association of Japan to host the ADI annual international conference in Kyoto in 2004.

Membership

The Council confirmed provisional membership for Cyprus, Costa Rica, El Salvador, Pakistan, Peru, Trinidad and Tobago and the Ukraine.

Regional relationships and development

It was agreed that Verna Schofield (NZ) would chair a working group to address issues on regional co-operation.

Nominations

The council agreed the recommendations made by the nominations committee. Hennie de Clercq (South Africa) was approved as treasurer to succeed Mike Livni (South Africa). Orien Reid (USA) was approved as a new member of the executive committee. Daisy Acosta (Dominican Republic) and Stuart Roth (USA) were elected to the nominations committee. Ruth

Goldberg (Israel) was re-elected chairman of the nominations committee 2000-2001.

Discussion was held about the process for nominating the next chairman of ADI and chairman of MSAP. It was agreed that both these appointments would be made at the council meeting in New Zealand in October 2001 to take office in 2002.

The chairman concluded the meeting by thanking Mike Livni for his sterling work as ADI treasurer, Henry Brodaty for his loyal support and chairmanship of MSAP, and the vice chairmen and executive committee for all their work. She also thanked the staff in the ADI office, so ably led by the dedicated executive director Elizabeth Rimmer. She thanked ADI's generous donors for their contributions as detailed in the treasurer's report.

Nori Graham
Chairman
May 2001

Report of the treasurer

For the year end 31 December 1999

In July 2000 I became treasurer of ADI and I wish to thank Michael Livni, my predecessor, for his commitment to our cause. 2000 has been another successful year for ADI, including a highly acclaimed conference and well-supported World Alzheimer's Day.

We appreciate the continued support of our members, whose dues accounted for 38% of our income in 2000, and also the donations from individuals and associate members, which increased in 2000 from the levels of the previous year. For the first time in our recent history, however, total income did not grow in 2000. Dues income was about equal to that of 1999, while the total of other support was somewhat reduced. We recognise that income from our existing supporters is unlikely to continue growing at the same rate as it has in the past and are now exploring new sources of revenue in order to expand our activities. Over the course of the year, we have also reviewed our planning and internal monitoring processes to allow us improved control of our finances.

In July, ADI collaborated with the Alzheimer's Association (USA) and the Alzheimer Society of Canada to host World Alzheimer Congress 2000. ADI gave a total of over \$50,000 in travel grants to bring people to the meeting, supported by grants from Pfizer and Eisai, Janssen Pharmaceutica and Aventis, and we are most grateful to them for their support.

2000 saw further expansion of ADI's information provision, with the production of Spanish versions of all of our factsheets and a new booklet. In 2000, we produced more World Alzheimer's Day materials than ever before, reaching a wider audience around the world.

Pfizer and Eisai gave us a grant to support our activities in 2000. We also received a grant from Janssen Pharmaceutica towards our work in support of the development of emerging Alzheimer associations. We are grateful to Pfizer, Eisai and Janssen for their contributions.

We are also very appreciative of the support we have had from Friends of ADI, the UK registered arm of ADI. Funds raised by Friends of ADI were used to support the 10/66 research network and Alzheimer University programme.

At the AGM in July, we decided to switch to a 'functional' presentation of our expenditure. The change means that it is awkward to present comparative figures for the previous year, so the accounts presented are for 2000 only. A column for comparison to 1999 is shown on the statement of functional expenses. By showing the expenditure clearly divided between our different activities, the accounts provide a more useful view of where our funds are being spent.

The accounts I present to you highlight the increase in our activities, and I am confident that in the future we will see room for further expansion. Our work is only possible because of the continuing support of our members and donors and we thank them for it.

Hennie de Clercq,
treasurer



Independent auditor's report

We have audited the accompanying statement of financial position of Alzheimer's Disease International as of 31 December 2000 and the related statement of activities and changes in net assets, statement of functional expenses and statement of cash flows for the year then ended. These financial statements are the responsibility of the organization's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with generally accepted auditing standards. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Alzheimer's Disease International as of 31 December 2000 and the results of its activities and changes in net assets, functional expenses and cash flows for the year then ended in conformity with generally accepted accounting principles.

Ruzicka & Associates, Ltd
certified public accountants
9 May 2001

Financial statements

Statements of financial position

31 December 2000

Assets	2000		
	TEMPORARILY UNRESTRICTED FUNDS \$	RESTRICTED FUNDS \$	TOTAL \$
Cash and cash equivalents	151,145		151,145
Dues receivable	2,900		2,900
Loan for conference	21,500		21,500
Grants receivable		3,750	3,750
Due from Friends of ADI		47,134	47,134
Prepaid expenses & other	1,435		1,435
Fixed assets, net of accumulated depreciation of \$20,850 in 2000	9,234		9,234
Total assets	186,214	50,884	237,098
Liabilities and net assets			
Liabilities			
Accounts payable	30,217		30,217
Total liabilities	30,217		30,217
Net assets			
Unrestricted	155,997		155,997
Temporarily restricted		50,884	50,884
Total net assets	155,997	50,884	206,881
Total liabilities and net assets	186,214	50,884	237,098

Statements of activities and changes in net assets

For the year ended 31 December 2000

	2000		
	TEMPORARILY UNRESTRICTED FUNDS \$	RESTRICTED FUNDS \$	TOTAL \$
Support and revenue			
Dues	170,514		170,514
Contributions and grants	128,395	117,217	245,612
In kind contributions - occupancy	21,335		21,335
Interest and other	8,265		8,265
Loss on currency exchange transactions	(209)		(209)
Net assets released from restriction: satisfaction of program restrictions	102,406	(102,406)	
Total support and revenue	430,706	14,811	445,517
Expenses			
Program services			
Conference	116,470		116,470
Information	95,566		95,566
Member Support and Development	107,359		107,359
Promotion and Awareness	70,831		70,831
Research	31,228		31,228
Total program services	421,454		421,454
Support services			
General administration	57,163		57,163
Fund raising	8,040		8,040
Total support services	65,202		65,202
Total expenses	486,656		486,656
Increase (decrease) in net assets	(55,950)	14,811	(41,139)
Net assets			
Beginning of year	211,947	36,073	248,020
End of year	155,997	50,884	206,881

Statement of functional expenses

For the year ended 31 December 2000 (with comparative totals for 1999)

	Program Services						Fund Raising	Total	Total 1999
	Conference	Information	Member Support and Development	Promotion and Awareness	Research	General Administration			
	\$	\$	\$	\$	\$	\$	\$	\$	
Salaries and related expenses	29,866	29,921	35,246	8,929	3,689	30,116	5,978	143,745	101,173
Grants to members	49,506		33,396	754	23,054			106,710	83,385
Occupancy including donated space	5,683	5,694	6,707	1,699	702	5,731	1,138	27,353	18,870
Printing	387	42,254	373	38,432	690	5,050		87,186	73,378
Postage and delivery	7,637	10,625	5,424	17,181	115	1,284		42,266	26,712
Office expense and miscellaneous	3,021	2,489	3,658	737	305	2,486	685	13,380	7,761
Telephone	420	417	420	420	420	922		3,019	3,336
Internet	472	1,176	472	472	472	472		3,536	52,320
Professional fees		1,791	8,624			7,184		17,599	17,375
Conferences and meetings, including travel and accommodations	18,281		11,627	1,849	1,634	2,711		36,102	19,670
Total expenses before depreciation	115,273	94,367	105,947	70,473	31,081	55,956	7,800	480,896	403,980
Depreciation	1,197	1,199	1,412	358	148	1,207	240	5,760	5,285
Total 2000	116,470	95,566	107,359	70,831	31,228	57,163	8,040	486,656	409,265

Statement of cash flows

For the year ended 31 December 2000

	2000		TOTAL
	UNRESTRICTED FUNDS	TEMPORARILY RESTRICTED FUNDS	
	\$	\$	\$
Cash flows from operating activities			
Change in net assets	(55,950)	14,811	(41,139)
Adjustments to reconcile change in net assets to net cash used in operating activities:			
Depreciation	5,760		5,760
Change in interfund balance	(36,073)	36,073	
Increase in dues receivable	(2,900)		(2,900)
Increase in loan for conference	(21,500)		(21,500)
Decrease (increase) in grant receivable	5,746	(3,750)	1,996
Increase in due from Friends of ADI		(47,134)	(47,134)
Increase in prepaid expenses	(682)		(682)
Increase in accounts payable	9,659		9,659
Decrease in deferred revenue	(30,000)		(30,000)
Net cash flow used in operations	(125,940)		(125,940)
Investing activities			
Purchase of fixed assets	(7,407)		(7,407)
Increase (decrease) in cash	(133,347)		(133,347)
Cash and cash equivalents			
Beginning of year	284,492		284,492
End of year	151,145		151,145

Notes to financial statements

31 December 2000

1 Summary of significant accounting policies

Purpose of the organization

Alzheimer's Disease International: The International Federation of Alzheimer's Disease and Related Disorders Societies, Inc. (ADI) was incorporated in 1985 as a world wide organization to: advance the well-being of people with dementia, their families and caregivers; provide a world wide forum to foster discussion, research, education and public policy about dementia; foster the development of voluntary associations; and facilitate cooperation among international organizations.

Basis of accounting

The accompanying financial statements are prepared in accordance with generally accepted accounting principles as set forth in the Financial Accounting Standards Board Statements 116 and 117. Revenue and expenses are recorded on the accrual basis of accounting. All contributions are considered available for unrestricted use, unless specifically restricted by the donor. Restricted grants are recognized as temporarily restricted revenue when received and transferred to the unrestricted fund when expended.

Dues are computed as a percentage of members' unrestricted revenues. Minimum dues are \$1000. Dues are payable 31 July for the calendar year end and are based on the prior year end financial statements. All computations are performed by the member organizations. Candidates for membership pay a \$50 application fee which is applied to their first year's dues if they are approved for full membership.

Fixed assets

Furniture and equipment is recorded at cost and depreciation is provided on a straight-line basis over the estimated useful lives of three to five years.

Income taxes

Alzheimer's Disease International is a nonprofit organization exempt from

federal income taxes under Section 501(c)(3) of the Internal Revenue Code.

Functional expense allocation

Expenses have been allocated to program and supporting services based on estimates made by management.

Accounting estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

2 Net assets

ADI classifies its net assets into two categories:

Unrestricted net assets include all of the unrestricted support and revenue of ADI, all of the expenses of the organization and transfers from temporarily restricted net assets.

Temporarily restricted net assets

include all the restricted support and revenue of ADI. Transfers are made from this fund to unrestricted net assets as expenditures are incurred which meet the restrictions of the donors.

3 Major support

ADI received approximately 75% of its dues revenues from three member organizations. Major contributions were received from three sources in 2000.

4 In kind contributions

In 2000 ADI received \$21,335 of in-kind contributions from the Alzheimer's Society (England, Wales and Northern Ireland) in the form of rent and office support. This gift has been recorded as a contribution and as occupancy expense in the accompanying financial statements.

5 Program activities:

The major activities of ADI include the Alzheimer University – a program designed to strengthen the work of Alzheimer associations; an annual international conference; printing of educational materials (newsletter, fact sheets and booklets); assistance to members; development of new Alzheimer associations and World Alzheimer's Day. The conference is coordinated and planned by a member country upon the ADI board approval of a conference proposal. The 2000 conference was held in the United States of America. The conference expenses are primarily for the registration and travel assistance for people to attend the conference and printing of conference materials. The Alzheimer's Association of the United States made a grant of \$30,000 to ADI representing profits from the annual conference.

6 Friends of ADI

Friends of ADI was created in 1999 as a United Kingdom charity to raise money for ADI. These funds are temporarily restricted and are to be spent in accordance with the restrictions of the Friends of ADI trustees.

7 Reclassification of prior year numbers

Certain amounts in the comparative totals for 1999 have been reclassified to conform with the 2000 presentation.

Where next?

Within ADI we always look to the future and reflect on how we can improve and develop new programmes to strengthen the work of our members. Our existing activities do support the work of Alzheimer associations: World Alzheimer's Day has grown into a truly international event, our website and materials are accessible to many, and our 10/66 network is growing rapidly.



Photo: The Star, Malaysia

Stronger Alzheimer Associations are better able to meet the needs of people like Catherine and her mother, who has Alzheimer's disease

Achievements

ADI has many achievements to look back on during the past year. These include:

- Distributing 63,000 Spanish bulletins, 53,000 English bulletins, 18,000 posters, 62,000 postcards, 20,000 badges, 50,500 bookmarks and 28,000 stickers for World Alzheimer's Day
- Joint hosts of the World Alzheimer Congress 2000 – the largest dementia research, education and networking event ever held
- 33% increase in the number of enquiries, 25% increase in number of visits to our website
- Invited by the World Health Organization to deliver a statement at the launch of World Health Day
- Joint initiative with the World Health Organization for development and evaluation of services for people with dementia in the Dominican Republic, Peoples Republic of China, Russia and India
- Completion of three dementia diagnosis and caregiver pilot studies in the People's Republic of China and SE Asia, six in India, one in Nigeria and 14 in Latin America and the Caribbean
- Supported 52 individuals from 28 countries to attend the World Alzheimer Congress 2000
- Third Alzheimer University programme
- Seven new members

Looking forward

We look forward to the future and this year we are committed to:

- Further expansion of our Alzheimer University programme
- Increasing the impact of World Alzheimer's Day
- Improved networking between members particularly on the ADI intranet site
- Increased support and visibility for our 10/66 network
- Exploring new sources of funding for our activities

We thank all our existing donors and supporters for their ongoing and loyal commitment to our work and thank all those who will join us to help our work go forward.

Alzheimer's Disease International

Officers

As at 1 August 2000

President Princess Yasmin Aga Khan, USA

Chairman Nori Graham, UK

Vice chairmen

Henry Brodaty,* Australia

Jacob Roy, India

Roberto Garcia, Mexico

Stuart Roth, USA

Treasurer Hennie De Clercq, South Africa

Honorary vice president Brian Moss, Australia

Founder and honorary vice president Jerome Stone, USA

* also chairman of the medical and scientific panel

Executive committee

As at 1 August 2000

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