



Annual Report

2011–2012



**Alzheimer's Disease
International**

Chairman's report



Jacob Roy Kuriakose

Dear friends,

Warm greetings from Alzheimer's Disease International!

I am pleased to present to you this report on the work of Alzheimer's Disease International (ADI) from July 2011 to June 2012, a period which saw considerable progress in our activities.

We have created some strong networks which will help in developing our reputation as the global leader on dementia. Our involvement in the United Nations summit on Non-Communicable Diseases has placed us in a commendable position along with other international NGOs. The launch of the World Health Organization report on dementia reinforced and strengthened many of our key messages and helped to promote the development of national dementia plans worldwide.

We continued our efforts to improve lives of people with dementia and their carers through strengthening national Alzheimer associations worldwide and sharing information and knowledge between our current membership of 78 national associations. Throughout the year we have been pleased to witness the further growth and success of many of our members. Our efforts to address the current needs of the members throughout the year were under constant review as priorities changed.

Our efforts to include people with dementia were enhanced this year with the new *I Can! I Will!* website and the stream of sessions run by people with dementia at our annual conference. We have seen more and more people with dementia and carers speaking out about their experiences. This is a significant development and one that we hope will continue into the future.

There is still lot more to be done with many hurdles to overcome. In the process of our development, we should continue to grow as a global ADI family, as envisaged by our predecessors. We have a huge responsibility to initiate vital changes that need to be made in order for people with dementia and their carers to experience a good quality of life at all stages of the disease.

On behalf of ADI's Elected Board and staff I would like to thank all of those who have helped to make this year such a success. Let us continue the journey together to make this a better world for people with dementia and their carers.

Executive Director's report



Marc Wortmann

This year we continued a range of activities and events in line with the four key objectives of our 2010-13 Strategic Plan, *Creating Capacity for Change*. The year has seen some great developments, particularly in the field of advocacy and raising awareness, and other programmes, such as the Alzheimer University and World Alzheimer's Day, continue to go from strength to strength.

Objective 1: ADI will continue to advocate for dementia to be a global health priority of the World Health Organization and a national priority in more countries.

The launch of the *World Alzheimer Report 2011* took place in New York on 13 September 2011 to coincide with the lead-up to the United Nations Summit on Non-Communicable Diseases. The report, titled *The benefits of early diagnosis and intervention*, was the result of an assessment of 8039 papers and abstracts on the topic by Prof Martin Prince and his team at King's College London. Findings contained within the report made it clear that earlier diagnosis and intervention has economic benefits and that interventions do exist for people with dementia and carers that are effective in the early stages of the disease. The launch of the report gained 492 media mentions worldwide.

The week following the launch of the report, the United Nations hosted only the second meeting in its history on a global health issue, a *Summit on Non-Communicable Diseases* (NCDs). ADI joined the NCD Alliance Summit Partners Group in July 2011 to promote the inclusion of Alzheimer's disease and other dementias as a non-communicable disease. Ahead of the Summit, a statement was developed alongside ten age and care-related international organisations highlighting the necessity for ageing, dementia and caregiving to be included in the Summit's NCD recommendations for action.



Participants at the Alzheimer University for emerging associations in August 2011

‘The year has seen some great developments, particularly in advocacy and raising awareness’

At its annual conference in March 2012, ADI presented the 2nd ADI Award for outstanding contribution to improving the lives of people with dementia and their carers. The award was given to French President Nicolas Sarkozy for his efforts in the development of the French national Plan Alzheimer, which is now being replicated in countries around the world.

A huge step in ADI's advocacy efforts was taken on 11 April 2012 with the launch of the WHO report *Dementia: a public health priority*. The report provides the most authoritative overview of the impact of dementia worldwide today and was developed and released in partnership with ADI. A planning meeting took place in September 2011 attended by 26 professionals from 16 countries as part of the development of the report, which gained ADI 644 media mentions worldwide over a three-day period. The report also confirmed the WHO's support for the cause and the creation of national dementia plans. The launch also provided a platform for ADI member associations to call for a national plan in their country.

Presence at WHO events throughout the year continued with representatives attending 5 of the 6 WHO regional meetings from August to October 2011. ADI was also present at the WHO Executive Board meeting in January 2012 and the World Health Assembly in May 2012.

Objective 2: ADI will identify the needs of its members and provide the services that both emerging and established associations require.

ADI gained two new member associations in March 2012, Help For Patients With Alzheimer's disease And Their Families in Russia and Sint Maarten Alzheimer Association, taking membership to 78 Alzheimer associations.

The 27th International Conference of Alzheimer's Disease International took place in London, UK from 7 to 10 March 2012. The event was attended by 1672 participants from 85 countries. A particularly noteworthy aspect of the conference was the involvement of people with dementia who developed and presented their own stream within the programme. A total of 21 people with dementia spoke during the conference. The lively exhibition was a popular gathering area with 303 poster presentations, a Memory Garden and exhibition stands showcasing the work of national Alzheimer associations in 22 countries. In addition, inspiring plenary presentations from Prof Peter Piot from the AIDS movement as well as British author Sir Terry Pratchett ensured it was a memorable event.

ADI also participated in a number of regional conferences throughout the year, including the 21st Alzheimer Europe conference, the V Congreso Iberoamericano sobre enfermedad de Alzheimer in October 2011, and the



ADI Executive Director Marc Wortmann, with Dr Tarun Dua and Dr Shekhar Saxena from the WHO at the launch of the WHO's report on dementia

14th Asia Pacific Regional Meeting of Alzheimer's Disease International in January 2012.

Forty-seven individuals from 26 national Alzheimer associations benefited from the Alzheimer University during the year. The annual three-day programme for emerging associations took place in London in August 2011 attended by representatives from Gibraltar, Macau and Tunisia as well as current ADI member associations in Egypt, India and Romania. Popular programmes focussed on advocacy were held in Spanish during the Alzheimer Iberoamerica conference in October 2011 and English in June 2012 in Tokyo, Japan.

Alzheimer Nederland and Asosiasi Alzheimer Indonesia began their formal relationship through ADI's Twinning Programme early in the year. The partnership continued to progress throughout the year.

Objective 3: ADI will continue to raise awareness about Alzheimer's disease and other dementias.

More than 65 countries participated in World Alzheimer's Day 2011 on 21 September. The theme for the campaign, decided by ADI's World Alzheimer's Day working group, was *Faces of dementia*, highlighting the warning signs whilst recognising the efforts of those who are committed to improving the lives of people with dementia. Following the successful campaign, the working group began planning for the first global World Alzheimer's Month, to take place in September 2012.

In early September 2011, ADI, in partnership with Richard Taylor from the USA, who is living with dementia, and Laura Bowley from Canada, launched a new website under the title *I Can! I Will!* The site has since become a popular forum for gathering ideas to encourage people with dementia to speak out about their experience and for other associations to involve people with dementia in their work. Almost 130 ideas had been submitted for inclusion on the website by the end of the end of June 2012.

Late in 2011, ADI was offered the opportunity to raise further awareness of dementia by contributing to the March 2012 issue of Help Age International's *Ageways* newsletter. The newsletter focussed specifically on dementia with contributions from ADI staff and representatives from national Alzheimer associations worldwide. The newsletter was circulated to HelpAge International's 7700 contacts around the world.

The beginning of 2012 saw the introduction of new additions to ADI's communications. A monthly e-newsletter highlighting the work carried out by ADI and its members was circulated from January on. New features were also added to the quarterly newsletter, *Global Perspective*, including a profile of a member association and a story from those who have benefitted from the work of their national Alzheimer association. By the end of the year, circulation of the newsletter was at 1500 in printed form and 650 by email.

In collaboration with photographer Cathy Greenblat ADI launched a new publication, *Love, Loss, and Laughter: Seeing Alzheimer's Differently*, in March 2012. The book, made up of photographs taken by Cathy of people with dementia around the world, presented a new image of dementia and was supported by exhibitions in France, Spain, Switzerland, the UK and USA throughout the year.

ADI continued to support research throughout the year, mainly through the 10/66 Dementia Research Group who continued to conduct research in 20 low and middle income countries through their 30 research groups. ADI also collaborated with Fondation Médéric Alzheimer for the fourth year on presenting Alzheimer Awards for psychosocial interventions. The prize for the best evidence-based intervention was awarded to Prof Lynn Chenoweth in Australia for her person-centred environment and care programme. The prize for the most promising intervention was presented to Dr Radha S Murthy from India for her culture based comprehension psychological care programme.

Throughout the year ADI's Medical and Scientific Advisory Panel continued to share information and the latest research findings. The discussions of the Panel's prevention working group are on-going and presentations given by members of this group during the year were particularly popular.

Objective 4: ADI will establish stable income through membership dues and fundraising.

See the Treasurer's report.

Treasurer's report



Martin Else

I am pleased to report that ADI has achieved another successful year financially, having delivered on an increasingly wide range of operational service objectives. For the financial year July 2011 to June 2012 there was an operating surplus of \$50,000 in unrestricted funds on a turnover exceeding \$2 million. This is a continuation of a positive trend now established over a number of years built around increasing fundraising and strong expenditure management. The surplus again adds to the security of underlying resources, although this does not mean that the organisation cannot remain vigilant in its financial control. However, the general picture is one of financial stability at this stage that is reassuring given the more challenging circumstances a few years ago.

It should be noted again that increasingly the work of ADI is based around specific externally funded projects. In effect this means that ADI has a high proportion of restricted funds. It remains important that these projects are tightly controlled but also that we continue to seek appropriate contributions to central services and overheads.

During the financial year ADI held another successful annual conference, this time in London, UK. There was a small financial surplus at the end for the event. However, the accounting arrangements are becoming increasingly complex and ADI established a temporary subsidiary company for the key financial transactions associated with the conference that contributed to the overall consolidated accounts. In future we are looking to improve financial arrangements to reduce the burden on the central office and improve efficiency.

Central office expenses continue to be carefully managed and this containment has meant that our funds can be largely directed to front line services for the benefit of the membership and in meeting the collective strategic objectives of ADI.

We are, as ever, deeply indebted to those trusts, foundations, corporations and individuals that support the work of ADI. In particular we would like to thank those donors listed below. We are also very grateful for the continuing support of all our member associations.

Finally I would like to thank the Chairman, Council, Board, Executive Committee and especially the staff who continue to deliver the ambitious strategic programme of activities for ADI within the strict financial constraint of the organisation.

Thank you

Harry Enderlein Trust	Lundbeck	Mailability
MetLife Foundation	Bristol-Myers Squibb	High Lantern Group
Pfizer	PhRMA	Fondation Médéric Alzheimer
Eli Lilly & Company	Helen Bader Foundation	Home Instead
Bupa	Globetech Logistics	GE Healthcare
Janssen Alzheimer Immunotherapy	Meetings Industry Meeting Needs	Jerome H. Stone Family Foundation
Bayer Pharma	Vradenburg Foundation	Mark Krueger & Associates, Inc.
Nutricia		
Novartis Pharma		

Financial statements

Statement of financial position

June 30, 2012. Consolidated

	Unrestricted Funds \$	Temporarily Restricted Funds \$	Total \$
Assets			
Cash and cash equivalents	353,497		353,497
Accounts receivable	96,598		96,598
Due from conference	261,092		261,092
VAT receivable from conference	33,668		33,668
Prepaid expenses & other	93,001		93,001
Fixed assets, net of accumulated depreciation of \$36,405 in 2012	11,008		11,008
Interfund balance	(138,472)	138,472	0
Total assets	710,392	138,472	848,864
Liabilities and net assets			
Liabilities			
Accounts payable	231,554		231,554
Total liabilities	231,554	0	231,554
Net assets			
Unrestricted	478,838		478,838
Temporarily restricted		138,472	138,472
Total net assets	478,838	138,472	617,310
Total liabilities and net assets	710,392	138,472	848,864

Statement of activities and changes in net assets

Year ended June 30, 2012. Consolidated

	Unrestricted Funds \$	Temporarily Restricted Funds \$	Total \$
Support and revenue			
Dues	390,383		390,383
Contributions and grants	325,649	297,150	622,799
Conference revenue	1,277,735		1,277,735
Interest and other	248		248
Gain (loss) on currency exchange transactions	(45,938)		(45,938)
Net assets released from restriction: Satisfaction of program restrictions	695,740	(695,740)	0
Total support and revenue	2,643,817	(398,590)	2,245,227
Expenses			
Program services			
Conference	1,373,594		1,373,594
Information	60,745		60,745
Member support and development	188,365		188,365
Promotion and awareness	731,043		731,043
Research	16,866		16,866
Total program services	2,370,612	0	2,370,612
Support services			
General administration	150,725		150,725
Fund raising	72,459		72,459
Total support services	223,184	0	223,184
Total expenses	2,593,796	0	2,593,796
Increase (decrease) in net assets	50,021	(398,590)	(348,569)
Net assets			
Beginning of year	428,818	537,062	965,880
End of year	478,838	138,472	617,310

Income

ADI is a 501(c)(3) non-profit organisation, incorporated in the state of Illinois, USA.

The figures in this report are for the 2011-12 year, which ended on 30 June 2012.

ADI member Alzheimer associations pay dues according to their own income, which in 2011-12 made up 17% of the total income. ADI also receives contributions and grants from corporations, foundations, trusts and individuals.

ADI also receives support from Friends of ADI, a UK-registered charity. Friends of ADI does not run any programmes of its own – it exists to support the work of ADI.

Expenses

ADI's expenses are classified into seven functions: the five main areas of programme work, management and administration, and fundraising.

'Membership support and development' includes the Alzheimer University training programmes and other support and advice provided to Alzheimer associations. 'Information' covers the Global Perspective newsletter, website, factsheets and booklets. The key event for 'Promotion and awareness' is World Alzheimer's Day, but ADI staff and Elected Board members also take part in other conferences and meetings to promote our work and our cause. This also includes ADI's public policy work, including the *World Alzheimer Report*. The spending on 'Research' is through support of the 10/66 Dementia Research Group, and there is a heading for the ADI International 'Conference'.

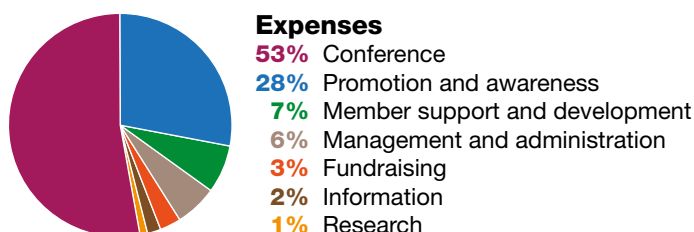
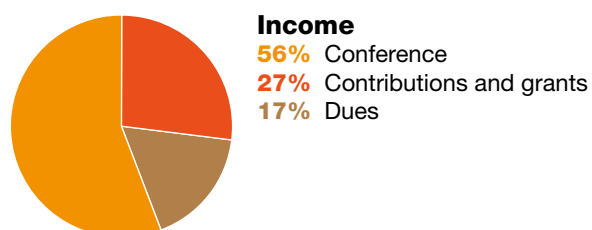
In 2011-12, ADI received grants to support specific projects managed by member associations, in addition to core activities run by the ADI staff.

Reserves policy

The Elected Board has determined that a reserve of approximately 6 to 8 months of core functions of the organisation is desirable. Core functions include maintenance of a central office, a buffer to sustain the conference and travel and activities with essential international commitments including a modest contingency. Based on current expenses, core functions are approximately \$750,000 per year resulting in a desired reserve of \$375,000 to \$500,000.

Consolidation

The 2012 financial statements have been prepared on a consolidated basis to include the accounts of ADI London Conference Ltd, a wholly owned subsidiary registered in England and Wales for the 2012 conference.



Alzheimer's Disease International

Vision An improved quality of life for people with dementia and their families throughout the world.

Mission To strengthen and support Alzheimer associations and raise awareness about dementia worldwide, particularly to improve the knowledge of and information on risk factors, and to make dementia a global health priority. ADI seeks sustainable funding to carry out its work.

Elected Board

AS AT JUNE 2012

Princess Yasmin Aga Khan, USA,
President

Dr Jacob Roy Kuriakose, India, Chairman
Mrs Wendy Fleming, New Zealand, Vice
Chairman

Mr Martin Else, UK, Treasurer

Prof Bengt Winblad, Sweden, Chairman
of Medical and Scientific Advisory Panel

Mr Dale Goldhawk, Canada

Ms Lynda Hogg, UK

Mr Markus Löfström, Finland

Mrs Carolyn Popham, UK

Prof Yasmin Raashid, Pakistan

Mr Lonnie Wollin, USA

Dr Robert Yeoh, Australia

Alzheimer's Family Support Group
(Bermuda)

FEBRAZ (Brazil)

Compassion Alzheimer Bulgaria

Alzheimer Society of Canada

Corporacion Alzheimer Chile

Asociacion Colombiana de Alzheimer
(Colombia)

Asociación Costarricense de Alzheimer
y otras Demencias Asociadas (Costa
Rica)

Alzheimer Croatia

SCUAL (Cuba)

Stichting Alzheimer Curaçao

Pancyprian Association of Alzheimer's
Disease (Cyprus)

Ceska Alzheimerovska Spolecnost
(Czech Republic)

Alzheimerforeningen (Denmark)

Asociacion Dominicana de Alzheimer
(Dominican Republic)

Egyptian Alzheimer Society

Asociacion de Familiares Alzheimer de
El Salvador

Muistiliitto ry (Finland)

Association France Alzheimer

Deutsche Alzheimer Gesellschaft
(Germany)

Greek Association of Alzheimer's
Disease and Related Disorders

ERMITA (Guatemala)

Asociación Hondureña de Alzheimer
(Honduras)

Hong Kong Alzheimer's Disease
Association

Hungarian Alzheimer Society (Hungary)

Alzheimer's and Related Disorders
Society of India

Asosiasi Alzheimer Indonesia

Iran Alzheimer Association

The Alzheimer Society of Ireland

Alzheimer's Association of Israel

Federazione Alzheimer Italia (Italy)

Alzheimer's Jamaica

Alzheimer's Association Japan

Alzheimer's Association Korea (South
Korea)

Alzheimer's Association Lebanon

Association of Alzheimer Disease -
Skopje Macedonia

Alzheimer's Disease Foundation
Malaysia

Malta Dementia Society

Alzheimer Association Mauritius

Federacion Mexicana de Alzheimer
(Mexico)

Alzheimer Nederland (Netherlands)

Alzheimers New Zealand

Alzheimer's Disease Association of
Nigeria

Alzheimer's Pakistan

AFA PADEA (Panama)

Asociacion Peruana de la Enfermedad y
Otras Demencias (Peru)

Alzheimer's Disease Association
Philippines

Polish Alzheimer's Association (Poland)

Alzheimer's Disease Chinese (PR China)

Asociacion de Alzheimer y Desordenes
Relacionados de Puerto Rico

Romanian Alzheimer Society

Help For Patients With Alzheimer's
Disease And Their Families, Russia

Alzheimer Scotland

Alzheimer's Disease Association
Singapore

Sint Maarten Alzheimer Association

Slovak Alzheimer's Association (Slovak
Republic)

Alzheimer's South Africa

CEAFA (Spain)

Lanka Alzheimer's Foundation (Sri
Lanka)

Alzheimerforeningen i Sverige (Sweden)

Association Alzheimer Suisse
(Switzerland)

Syrian Alzheimer and Memory Diseases
Society (Syria)

TADA (Chinese Taipei)

Alzheimer's and Related Disorders
Association of Thailand

Alzheimer's Association of Trinidad and
Tobago

Turkish Alzheimer Society and
Foundation (Turkey)

Alzheimer's Society (England, Wales and
Northern Ireland)

Alzheimer's Association (USA)

Asociación Uruguaya de Alzheimer y
Similares (Uruguay)

Fundacion Alzheimer de Venezuela

Zimbabwe Alzheimer's and Related
Disorders Association

Honorary Vice Presidents

AS AT JUNE 2012

Dr Daisy Acosta, Dominican Republic

Prof Henry Brodaty, Australia

Dr Nori Graham, UK

Mr Brian Moss, Australia

Mr Jerome Stone, USA

Staff

AS AT JUNE 2012

Marc Wortmann, Executive Director

Jane Cziborra, Membership and Events
Manager

Michael Lefevre, Finance and
Technology Manager

Sarah Smith, Communications and
Administration Officer

Johan Vos, Director of Development

Members

AS AT JUNE 2012

Asociación de Lucha contra el Mal de
Alzheimer (Argentina)

Alzheimer's Disease Armenian
Association

Fundacion Alzheimer Aruba

Alzheimer's Australia

Alzheimer Angehörige Austria

Alzheimer Society of Bangladesh

Barbados Alzheimer's Association Inc

Ligue Nationale Alzheimer Liga (Belgium)

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Alzheimer's Disease International:
The International Federation of
Alzheimer's Disease and Related
Disorders Societies, Inc. is
incorporated in Illinois, USA, and is a
501(c)(3) not-for-profit organization