

Annual Report

2010–2011



**Alzheimer's Disease
International**



Chairman's report



Daisy Acosta

Reflecting back on the year July 2010 to June 2011 has provided a welcome opportunity to enjoy ADI's achievements. Although there is still a long way to go, the progress made has shown what can be accomplished over a 12-month period with strong strategic direction and a movement of hard-working individuals and organisations.

Great advances have been made in raising ADI's profile, most notably with the launch of the *World Alzheimer Report 2010*. We are indebted to Professor Anders Wimo and Professor Martin Prince for their efforts in the development of the report and its lasting impact on strengthening ADI's global advocacy efforts.

It has been a great encouragement to gain the support of so many likeminded international organisations during the year. Pooling efforts to work towards our common goals can only make us stronger and we hope these relationships will continue to grow and be of long-term benefit to our members and, as a result, to people with dementia and their carers in their countries.

I would like to thank all of those individuals and organisations that have supported us throughout the year and made it possible for ADI to expand its efforts. My sincere thanks also go to ADI's members, Vice Chairman, Treasurer, Elected Board and staff for their hard work and support throughout the year.

Finally, I wish to thank all of the people with dementia and carers who have guided and followed our work during the year and provided us with the feedback we need to continue working towards an improved quality of life for people with dementia and their carers across the world.



ADI member associations from 66 countries around the world marked World Alzheimer's Day 2010

Executive Director's report



Marc Wortmann

In 2010, ADI began implementing its new Strategic Plan, *Creating Capacity for Change*,

which identified four key objectives that would be the focus of the organisation's activities until 2013. The year 2010-2011 saw the start of this implementation, with a range of successful and capacity-building activities.

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.

ADI is in Official Working Relations with the World Health Organization (WHO). In order to maintain our strong relationship and promote dementia as a global health priority, ADI spokespeople were present at the meetings of the WHO regional offices in September and October 2010, as well as the World Health Assembly in May 2011. Additional meetings with the WHO took place during the year and, by June 2011, discussions were well underway for the development of a WHO report on dementia, due for release in 2012.

The launch of the landmark *World Alzheimer Report 2010* in September was a huge success, resulting in

the widest media coverage of ADI to date. The report detailed the global economic impact of dementia and estimated the worldwide annual cost of dementia to be US\$604 billion, exceeding 1% of global GDP.

Towards the end of the year, ADI extended the call for dementia to be added to the global health agenda, following the announcement of a United Nations High-Level Summit on non-communicable diseases (NCDs) to take place in September 2011. Talks were ongoing about ADI's involvement with the NCD Alliance in the lead-up to the event.

ADI's advocacy efforts throughout the year were overseen and guided by the advocacy working group, a collection of policy representatives from six national Alzheimer associations around the world.



ADI representatives approached Dr Margaret Chan, Director-General of the World Health Organization, during the World Health Assembly in May 2011

Objective 2

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

By June 2011, ADI's membership was made up of 76 national Alzheimer associations from across the world. Each association faces different challenges and ADI aims to support every member by organising a range of events and activities.

ADI's 26th annual International Conference took place in Toronto, Canada in March 2011. The event brought together representatives from member associations to share recent developments, build new partnerships and attend a series of ADI workshops on topics including advocacy, coping with growth and Alzheimer cafes, developed with members' needs in mind. The event was hosted in partnership with the Alzheimer Society of Canada, whose promotion and organisation efforts ensured it was a memorable event.

Regional meetings took place in Kuala Lumpur, Malaysia in October 2010 for the Asia Pacific region and Seville, Spain for ADI's Spanish-speaking member associations in the same month. The regional meetings provided members with the opportunity to address the key issues faced within the region and tell ADI how well their needs were being met.

Four of ADI's successful Alzheimer University programmes took place during the year. The first programme, for emerging associations, was held in London, UK in August 2010 and attended by association representatives from Indonesia, Nicaragua, Russia and Sint Maarten. These associations were asked to develop an action plan that formed the basis of their time on the two-year Membership Development Programme. Other Alzheimer University programmes included *Strengthening your Alzheimer association* in Seville, Spain and



Participants at the public policy Alzheimer University in Germany, June 2011

a workshop on fundraising in Kuala Lumpur, Malaysia, both in October 2010. A programme titled *Campaigning for change* took place in Berlin, Germany in June 2011, and was well received.

After their successful Twinning relationship with Alzheimer's Pakistan ended in 2009, Alzheimer's Australia WA formed a new partnership with the Alzheimer Society of Bangladesh. In 2011, after ending their Twinning relationship with Malta, Alzheimer Nederland (the Netherlands) began working alongside Asosiasi Alzheimer Indonesia. Lanka Alzheimer's Foundation in Sri Lanka and Alzheimer Scotland ended their formal partnership in 2010 and Alzheimer's Society in the UK and Alzheimer's and Related Disorders Society of India continued to work closely together after their formal Twinning relationship ended the previous year.

Objective 3

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

World Alzheimer's Day, on 21 September, ADI's largest global awareness-raising effort, saw 66 national Alzheimer associations hosting their own events around the theme *Dementia. It's time for action!* In response to requests from members, a successful pilot World Alzheimer's Month took place in

12 countries during September 2010 and will be fully introduced in the coming years. ADI produced printed and digital materials for member associations to use and adapt for their activities and events. The theme and materials for World Alzheimer's Day were developed with the support of the World Alzheimer's Day working group made up of representatives from seven member associations.

Providing information continued to play a vital role in the work of ADI with numerous member and general enquiries being answered each day. In 2010, ADI's newsletter, *Global Perspective*, increased from three to four issues per year in response to the growth in ADI and members' activities. A re-design of the ADI website was completed in April 2011 with new



ADI's annual International Conference in Toronto, Canada, attracted more than 1000 delegates from across the world. Photo: Irene Borins-Ash

Treasurer's report

pages for tracking national Alzheimer plans and strategies, an international news feed and improved navigation. ADI's presence on social media sites Facebook and Twitter increased during the year with stronger promotion of the ADI conference and member activities.

Recognising the importance and value of involving people with dementia and carers in raising awareness, ADI ensured that they played an active role in key programmes, including the annual International Conference and Alzheimer University, and contributed to the ADI newsletter. ADI also responded to requests from people with dementia to develop a website for people with dementia, carers, and medical professionals to share their stories and awareness-raising ideas. By the end of the year final preparations were being made to launch the *I Can! I Will!* ideas library online.

The promotion of new research was an ongoing priority for ADI throughout the year with the new data for the *World Alzheimer Report 2010* and support of the 10/66 Dementia Research Group's research in the developing world. The Medical and Scientific Advisory Panel provided up-to-date information for ADI staff and members and guidance for ADI events. A group of the Panel's members continued discussions on the topic of prevention. In March 2011, ADI and Fondation M d ric Alzheimer presented the annual Alzheimer's Award for psychosocial interventions to Prof Sube Banerjee for his project, *The Croydon Memory Service Model – early and effective diagnosis and intervention for all*.

Objective 4

ADI will establish stable income through membership dues and fundraising.

See the Treasurer's report.



Martin Else

I am pleased to report that ADI has achieved another successful year in achieving its demanding strategic and operational objectives within the resources available. Overall ADI was able to record a small surplus of \$55,800 against unrestricted funds for the accounting year July 2010 to June 2011.

There has necessarily been a fundamental shift in emphasis in recent years to raise funds to meet the expanded programme of activities undertaken by ADI on behalf of its member organisations. Appropriately these external funds have been targeted upon specific projects that are consistent with ADI plans. From an accounting perspective these are regarded as restricted funds in that they are retained for a particular defined purpose. As projects are delivered, expenditure is met from the release of these funds. One consequence of this increasing proportion of project-related funding is that ADI has been moving away from a consistent and predictable annual budgetary cycle based primarily on core membership dues. This means that financial management and control requires particularly close scrutiny to facilitate and match an activity rather than time-based organisation.

During the financial year ADI held another successful annual conference - this time in Toronto, Canada. Although the primary purpose of the event is for the benefit of participants, it is welcome to note there was a small financial surplus, and there are still some potential tax benefits (not included in these accounts) that could add to this overall positive outcome.

Expenditure continues to be tightly controlled and the key element of central staffing overheads has remained stable. Similarly other central expenses have not increased in any significant way and these factors have allowed the maximum application of new funds to frontline project delivery.

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

Organisations that supported ADI and Friends of ADI in 2010-2011:

Pfizer
Eisai
MetLife Foundation
Eli Lilly
Janssen Alzheimer Immunotherapy
Novartis Pharma
Danone Nutricia
PhRMA
Bayer Pharma
Helen Bader Foundation
Elan Pharma International
Fondation M d ric Alzheimer
Lundbeck
Stichting Pot Family Foundation
Reuben Foundation
Jerome H. Stone Family Foundation
Mark Krueger & Associates



ADI offers a range of materials to support members and promote increased awareness

Financial statements

Statement of financial position JUNE 30, 2011

	Unrestricted Funds \$	Temporarily Restricted Funds \$	Total \$
Assets			
Cash and cash equivalents	858,070		858,070
Accounts receivable	7,674		7,674
Due from conference	218,008		218,008
Grants & contributions receivable		163,120	163,120
Due from Friends of ADI	0		0
Investments	0		0
Prepaid expenses & other	107,761		107,761
Fixed assets, net of accumulated depreciation of \$44,971 in 2011 and \$43,918 in 2010	3,575		3,575
Interfund balance	-373,942	373,942	0
Total assets	821,146	537,062	1,358,208
Liabilities and net assets			
Liabilities			
Accounts payable	392,328		392,328
Total liabilities	392,328	0	392,328
Net assets			
Unrestricted	428,818		428,818
Temporarily restricted		537,062	537,062
Total net assets	428,818	537,062	965,880
Total liabilities and net assets	821,146	537,062	1,358,208

Statement of activities and changes in net assets

FOR THE YEAR ENDED JUNE 30, 2011

	Unrestricted Funds \$	Temporarily Restricted Funds \$	Total \$
Support and revenue			
Dues	354,728		354,728
Contributions and grants	215,699	813,261	1,028,960
Conference revenue	1,097,978		1,097,978
Interest and other	2,031		2,031
Realized gain on investments	11,924		11,924
Unrealized gain (loss) on investments	-10,203		-10,203
Gain (loss) on currency exchange transactions	66,958		66,958
Net assets released from restriction:			
Satisfaction of program restrictions	495,135	-495,135	0
Total support and revenue	2,234,250	318,126	2,552,376
Expenses			
Program services			
Conference	1,207,745		1,207,745
Information	82,388		82,388
Member support and development	255,761		255,761
Promotion	314,155		314,155
Research	78,649		78,649
Total program services	1,938,697	0	1,938,697
Support services			
General administration	154,602		154,602
Fund raising	85,158		85,158
Total support services	239,760	0	239,760
Total expenses	2,178,457	0	2,178,457
Increase (decrease) in net assets	55,793	318,126	373,919
Net assets			
Beginning of year	373,025	218,936	591,961
End of year	428,818	537,062	965,880

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 2010-11 year, which ended on 30 June 2011.

ADI member Alzheimer associations pay dues according to their own income, which in 2010-11 made up 14% 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, the ADI Twinning Programme 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. The spending on 'Research' is through support of the 10/66 Dementia Research Group, and there is a heading for the ADI International 'Conference'.

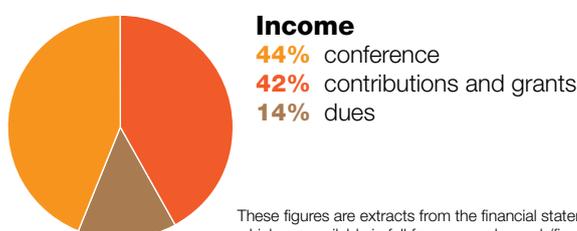
In 2010-11, ADI received grants to support specific projects managed by member associations, in addition to core activities run by the ADI staff.

Investment policy

ADI aims to effectively invest funds that are held in reserve or for planned future use. ADI seeks to maximise the long-term growth of funds while maintaining a level of income necessary for current programmes. Investments will be a mix of low and medium risk, so as to maximise return without unduly risking invested capital. Direct investments in companies that have a significant interest in the tobacco, alcohol and pharmaceutical industries will be avoided.

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.



These figures are extracts from the financial statements, which are available in full from www.alz.co.uk/financials

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 2011

Princess Yasmin Aga Khan, USA,
President
Dr Daisy Acosta, Dominican Republic,
Chairman
Mrs Wendy Fleming, New Zealand, Vice
Chairman
Mr Martin Else, UK, Treasurer
Prof Bengt Winblad, Sweden, Chairman
of MSAP
Mr Dale Goldhawk, Canada
Ms Lynda Hogg, UK
Mrs Norma Inniss, Trinidad and Tobago
Ms Riitta Korhonen, Finland
Mrs Carolyn Popham, UK
Prof Yasmin Raashid, Pakistan
Ms Li-Yu Tang, TADA Chinese Taipei
Mr Lonnie Wollin, USA
Dr Jimmy Wu, Hong Kong SAR China
Dr Robert Yeoh, Australia

Honorary Vice Presidents

AS AT JUNE 2011

Prof Henry Brodaty, Australia
Dr Nori Graham, UK
Mr Brian Moss, Australia
Mr Jerome Stone, USA

ADI staff

AS AT JUNE 2011

Marc Wortmann, Executive Director
Michael Lefevre, Finance and
Technology Manager
Jane Cziborra, Membership and Events
Manager
Sarah Smith, Communications and
Administration Officer

ADI members

AS AT JUNE 2011

Asociación de Lucha contra el Mal de
Alzheimer (Argentina)
Alzheimer's Disease Armenian
Association
Fundacion Alzheimer Aruba
Alzheimer's Australia
Alzheimer Angehorige Austria

Alzheimer Society of Bangladesh
Barbados Alzheimer's Association Inc
Ligue Nationale Alzheimer Liga (Belgium)
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
Asociacion de Alzheimer y Desordenes
Relacionados de Puerto Rico
Romanian Alzheimer Society
Alzheimer Scotland
Alzheimer's Disease Association
Singapore
Slovak Alzheimer's Association
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



**Alzheimer's Disease
International**

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