

# Annual Report 2014–2015



### Chairman's report



#### Jacob Roy Kuriakose

It has been yet another year of great progress and, particularly, our advocacy efforts have presented the opportunities for ADI to become more visible than ever before. Involvement in the follow-up work by the G7 countries after the dementia summit

and the World Health Organization's Ministerial Conference on dementia are key examples.

As the importance of dementia becomes more obvious globally and in an increasing number of countries, we have seen remarkable innovation and creativity being used on national and local levels. The importance of this work on the ground is huge as the world's governments continue to face the consequences of the global financial crisis. Our role in this is to facilitate the sharing of knowledge and experiences so that we can all learn from one another.

I see our new, formalised relationship with Dementia Alliance International as being of great benefit in all areas of our work and our collaboration can only make both of our organisations stronger.

I am extremely grateful to the ADI staff and Board members for their hard work, sound guidance and support, in particular Lynda Hogg whose invaluable input over the past six years has made sure that we are always working for the benefit of people living with dementia and their carers. I also wish to thank all of those partners and individuals who have worked alongside us.

This year, I handed over the position of ADI Chair to Glenn Rees and I am confident that, under his leadership, ADI will move forward with strong strategic direction and long-term vision for the future.



#### Glenn Rees

I should like to thank Jacob Roy for his willingness to involve me in Board discussions over the last six months. It has been of enormous help in enabling me to better understand the many challenges that ADI has to deal with over the next few years.

It was very special for me to assume the Chair in Perth at the April 2015 ADI Conference.

At the June 2015 meeting of the Board we established a strategic planning committee with the objective of putting a new strategic planning process for the preparation of the 2016-2019 Plan in a way that involves all the stakeholders of ADI.

We also agreed that it was a priority to set up committees to look at options for strengthening the membership of ADI and our communication both internally and externally of the work ADI is doing.

I was delighted that the Board agreed by unanimous consent to co-opt Kate Swaffer as the person with dementia at the June meeting pending an election for the position at the next Council meeting in 2016.

During my time as Chair I have three personal objectives. First, to secure a Resolution by the WHO in 2017 to commit governments to make dementia a priority and to focus on the needs of low and middle income countries. Second, to pursue social action through dementia friendly communities and the Convention on the Rights of Persons with Disabilities to empower people with dementia to take decisions about their lives and to be socially engaged. Third, to focus on the quality of dementia care and quality of life outcomes.

### **Executive Director's report**



#### Marc Wortmann

Building upon past efforts, our 2013-2016 Strategic Plan, *Leading the Global Dementia Challenge*, continued to guide our work in the year July 2014 to June 2015.

#### **Objective 1:** ADI will continue to lead global advocacy efforts and support the national advocacy of member countries to make dementia a public health priority.

Each year we are seeing our advocacy workload increase as the United Nations (UN), World Health Organization (WHO) and more national governments recognise the importance of prioritising dementia on their agendas.

During the year, we attended the last three in the series of Global Dementia Legacy Events, a result of the G8 Dementia Summit, which took place in Ottawa in Canada, Tokyo in Japan and Bethesda, USA. The focus of the meetings was on academia-industry partnerships, strategies for risk reduction and ways to improve the provision of care, and improvements in dementia funding and research. We played an active role in the events, presenting on topics including dementia friendly communities and the importance of global collaboration. At the Tokyo event we organised a side event on dementia diagnosis and care with Alzheimer's Association Japan, supported by Eli Lilly.

Following the G8 Dementia Summit and legacy events, the WHO hosted their landmark First Ministerial Conference on Global Action Against Dementia in Geneva in March 2015. Ahead of the event, ADI member associations campaigned for their governments to send representatives and, at the conference, ministers and senior officials from 80 countries were in attendance. Discussions centred on what governments' priorities should be and how countries could work together. At the conference, we delivered a statement on behalf of 42 national member associations and NGOs, which outlined key areas for consideration. For a number of years, we have been working with, and advocating to, the WHO in an attempt to initiate an international push for dementia to be made a priority area, and this event was a big step towards this goal.



The World Health Organization's First Ministerial Conference on Global Action Against Dementia

We also continued to work closely with the NCD Alliance, most notably as part of the UN Non Communicable Disease Review Summit in July 2014, which reflected on the progress made in the three years since the original summit. At a civil society hearing before the summit we arranged for Jason Hatke, a young family carer from the USA, to address the United Nations. Discussions at the Review Summit itself reconfirmed the inclusion of dementia in the non communicable disease domain. The first meeting of the Global Alzheimer's and Dementia Action Alliance Steering Group, formed in May 2014, also took place during this event.

#### **Objective 2:** ADI will meet the needs of emerging and established members and provide services that will enable members to best support people affected by dementia in their country.

We continued to run our key member activities this year, including the Alzheimer University, Twinning Programme and our annual International Conference as well as providing dayto-day support to our member associations.

We welcomed representatives from emerging associations in Bolivia, Kenya and Oman, alongside existing member associations in Bangladesh and Belgium, to our Alzheimer University programme in December 2014. The programme enabled participants to learn from the experiences of their counterparts from more developed Alzheimer associations and the expertise of international organisations. Each association set three objectives based on the knowledge gained and will report back routinely on their progress over a period of twelve months.

Our 30th International Conference took place this year in Perth, Australia with more than 1100 delegates in attendance, including a record number of people living with dementia. The occasion also provided an opportunity to mark our 30th anniversary.

This year our Asia Pacific Regional Office has overseen a new Twinning Programme partnership between Alzheimer's Australia Victoria and Alzheimer and Related Dementia Society Nepal (ARDSN). Progress during the year included a symposium on dementia awareness in Nepal, a train the trainer programme for professional care workers and first steps towards establishing a dementia alliance in the country. A global call for support for ARDSN followed the devastating earthquakes in 2015. The Regional Office is also supporting the creation of a dementia alliance in Bangladesh.

In November 2014, a new report, *Dementia in the Asia Pacific Region*, was released to provide details of the social and economic impact of dementia in the region. The report was launched at the 17th Asia Pacific Regional Conference, which took place in New Delhi, India.

Another regional meeting held during the year was in Willemstad, Curaçao in February 2015 for the non-Latin Caribbean countries and an Alzheimer University programme was tied to this event for Alzheimer associations in the region. We were also present at the Alzheimer Europe conference in Glasgow, Scotland in October 2014.

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

Our annual awareness-raising event, World Alzheimer's Month, proved a great success again in 2014. Under the theme *Dementia: Can we reduce the risk?*, we produced a range of promotional materials which were made available online and sent out worldwide to support activities run by national Alzheimer associations. The focus of this year's campaign was on helping to reduce the risk of developing dementia by looking after your heart, leading a healthy lifestyle, and maintaining and challenging your brain.

In January 2015, we began a formal partnership with Dementia Alliance International (DAI), a non-profit group of people with dementia worldwide. This mutually beneficial agreement guarantees a greater presence of people with dementia in our work and strengthening of our efforts to raise awareness of dementia. As part of this arrangement, DAI contribute reports and opinion pieces for our regular publications, the *Global Perspective* newsletter and monthly email update.

Alongside these publications, we also released a report on the increasingly popular concept of 'dementia friendly communities'. The report detailed the common principles and tactics used in dementia friendly initiatives and provided examples from across the world. Following on from the report, we co-hosted an event on dementia friendly communities with Alzheimer Nederland in The Hague in June 2015. Speakers from Belgium, Canada, India, the Netherlands and the UK shared news of their work to date.

To raise awareness of those who dedicate their time to caring for a loved one with dementia, this year we ran the second ADI-Home Instead Award for Family Carer of the Year. The award was presented to Keiko Matsushima from Japan whose journey with dementia went from denial and concealment of her husband's diagnosis by the whole family to becoming an active campaigner for improvements to services and support. Keiko, alongside her husband Kenji, attended our International Conference in Australia to receive her award.



Marc and Jacob celebrate our 30th anniversary in Perth, Australia

### **Objective 4: ADI** will facilitate and/or encourage research for both interventions and to find a cure

Alongside the World Health Organization, we launched a new factsheet in July 2014 examining current knowledge on the links between dementia and smoking. *The Tobacco use and dementia* document also reviewed literature around smokeless tobacco use and the risks posed by second-hand smoke.

We continued our close partnership with the Global Observatory for Ageing and Dementia Care, hosted at King's College London, and together launched the *World Alzheimer Report 2014. Dementia and Risk Reduction: An analysis of protective and modifiable factors.* This report, the sixth of its kind, revealed persuasive evidence for dementia risk reduction and called for dementia to be integrated into global and national public health programmes on other non communicable diseases (NCDs). At the launch of the report, a panel discussion which took place in London, author Prof Martin Prince and ADI were joined by the session chair Angela Rippon OBE and representatives from Bupa and the NCD Alliance.

Collaboration with the Association of Dementia Studies at the University of Worcester, UK, resulted in the launch of *Women and Dementia: A global research review*, launched in June 2015. The report revealed the disproportionate impact of dementia on women with findings based on research from around the world. The report called for female-targeted dementia health programmes in low and middle income countries, where female-led family caring is the most common care model.

Throughout the year, we worked closely with our Medical and Scientific Advisory Panel, who provided regular research updates for our quarterly newsletter and monthly email update to member associations. We also continued our partnership with the 10/66 Dementia Research Group. While much of our close collaborative work now falls under the Global Observatory for Ageing and Dementia Care, the 10/66 Dementia Research Groups continues its work to increase dementia research in low and middle income countries.

Right: Some of the publications we have produced this year

### Treasurer's report



#### Andrew Ketteringham

I am pleased to report on a more successful financial year for ADI, following the difficult year ending in June 2014. In 2015 we increased our unrestricted net assets (reserves) by \$93,000.

It is important that we hold sufficient reserves so that we are able to continue our activity in the event of an unexpected reduction in income or a conference which makes a significant loss, as was the case in 2014. The Board has agreed a new reserves policy: we now aim to hold funds for 4-6 months of central costs, less an allowance in respect of central costs attached to project activity and covered by restricted income. We have yet to achieve the desired level, so we continue to manage our finances towards reaching the target.

Conference activity each year is a significant proportion of our total expenditure and also a source of uncertainty. The Board has agreed to select future conference destinations to avoid drawing on general funds, as was the case in 2014. When funds allow, we also aim to build a separate conference reserve.

Much of ADI's work continues to be based on projects supported by specifically allocated funds from external bodies. This restricted fund activity continues to grow and requires careful management of funds and activity. Wherever possible, these projects include appropriate amounts to cover the costs of the staff and central functions applicable to those projects.

We very much appreciate those trusts, foundations, corporations and individuals that support the work of ADI. In particular we would like to thank those donors listed in the box (see next page), including our Global Foundation Partners and Global Supporters. We are also grateful for the continuing support of all our member associations.

I would like to give thanks to the Chair, Council, Elected Board, Executive Committee and particularly the staff and volunteers who endeavour to deliver ADI's objectives within our financial constraints. Within the ADI office particular thanks go to Michael Lefevre for his work maintaining our accounts.



### Financial statements

#### Statement of Financial Position

At June 30, 2015	Unrestricted \$	Temporarily Restricted \$	Total \$
Assets	Unitestructed a	กยรแบ่เยน จ	iulai p
Current Assets			
Cash	293,312		293,312
Accounts Receivable	3.161		3,161
Due from Conference	130,308		130,308
Grants & Contributions Receivable	150,500		150,500
<ul> <li>– Net of Allowance for Uncollectible Accounts</li> </ul>			
of \$10,000 for 2015 and \$0 for 2014		427,223	427,223
Prepaid Expenses and Other	67,907	421,225	67,907
Total Current Assets	494,688	427,223	921,911
Property and Equipment	494,000	421,223	921,911
Furniture and Equipment	40,620		40,620
	,		,
Less Accumulated Depreciation	(36,209)		(36,209)
Net property and equipment	4,411	0	4,411
Other Assets			
Interfund Balance	(48,197)	48,197	0
Total Assets	450,902	475,420	926,322
Liabilities and Net Assets			
Current Liabilities	054.050		054050
Accounts Payable and Accrued Liabilities	254,258	-	254,258
Total Current Liabilities	254,258	0	254,258
Net Assets	196,644	475,420	672,064
Total Liabilities and Net Assets	450,902	475,420	926,322

#### Statement of Activities and Changes in Net Assets

For the Year Ended June 30, 2015	Temporarily		
· · · · · · · · · · · · · · · · · · ·	Unrestricted	Restricted	
	Funds \$	Funds \$	Total \$
Support and Revenue			
Dues	409,594		409,594
Contributions and Grants	265,799	826,809	1,092,608
Conference Revenue	872,833		872,833
Interest and Other	95		95
In-Kind Contributions	13,790		13,790
Gain (Loss) on Currency			
Exchange Transactions	(29,858)		(29,858)
Net Assets Released from Restrictions:			
Satisfaction of Program Restrictions	787,318	(787,318)	0
Total Support and Revenue and			
Assets Released from Restrictions	2,319,571	39,491	2,359,062
Expenses			
Program Services			
Conference	912,559		912,559
Information	57,948		57,948
Member Support and Development	358,324		358,324
Promotion	655,870		655,870
Research	13,920		13,920
Total Program Services	1,998,621	0	1,998,621
Support Services			
General and Administration	142,049		142,049
Fund Raising	85,582		85,582
Total Support Services	227,631	0	227,631
Total Expenses	2,226,252	0	2,226,252
Change in Net Assets	93,319	39,491	132,810
Net Assets, Beginning of Year	103,325	435,929	539,254
Net Assets, End of Year	196,644	475,420	672,064

#### Income

ADI is a 503(c)(3) non-profit organisation, incorporated in the state of Illinois, USA.

The figures in this report are for the 2014-15 year. which ended on 30 June 2015.

ADI member Alzheimer associations pay dues according to their own income, which in 2014-15 made up 17% of the total income. ADI also receives contributions and grants from corporations, foundations, trusts and individuals. The ADI conference is supported by sponsorship and participants' registration fees.

ADI also receives support from Friends of ADI, a UKregistered 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.

'Member 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 Month, and 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 mainly through support of the 10/66 Dementia Research Group and Global Observatory for Ageing and Dementia Care at King's College London. There is a heading for the ADI International 'Conference'.

#### Thank you

Bupa	Red & Yellow Care
Eli Lilly and Co	Piramal
Stavros Niarchos Foundation GE Healthcare Roche	Merck & Co TauRx Therapeutics Vradenburg Foundation
Nutricia Advanced Medical Nutrition Helen Bader Foundation Janssen Pharmaceutica	Compass Group PhRMA Home Instead Lundbeck

- 41% Conference
- **29%** Promotion

Expenses

- 16% Member support and development
- 6% Management and administration
- 4% Fundraising
- 3% Information
- 1% Research

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

**46%** Contributions and grants

Income

17% Dues

1% Other

36% 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, to raise awareness about dementia worldwide, particularly by improving knowledge and information, and to make dementia a global health priority.

#### **Elected Board**

AS AT JUNE 2015

Mr Glenn Rees, Australia, Chairman Mr Dale Goldhawk, Canada, Vice-Chairman Mr Andrew Ketteringham, UK, Treasurer Dr Serge Gauthier, Canada, Chairman of Medical and Scientific Advisory Panel Ms Faraneh Farin, Iran Mr John Grosvenor, UK Dr Mariella Guerra, Peru Mr Markus Löfström, Finland Ms Birgitta Martensson, Switzerland Mr Gerald Sampson, USA Ms Kate Swaffer, Australia – *Co-opted* 

#### President

AS AT JUNE 2015

Princess Yasmin Aga Khan, USA

### Honorary Vice Presidents

AS AT JUNE 2015

Dr Daisy Acosta, Dominican Republic Prof Henry Brodaty, Australia Ms Wendy Fleming, New Zealand Dr Nori Graham, UK Mr Brian Moss, Australia Dr Jacob Roy, India

#### Staff

#### AS AT JUNE 2015

Marc Wortmann, Executive Director Johan Vos, Deputy Executive Director Jane Cziborra, Conference and Events Manager Sarah Kerr, Publications Officer Michael Lefevre, Finance and Technology Manager Harriet Payne, Communications Officer Anastasia Psoma, Fundraising and Membership Manager Francis Wong, Regional Director, Asia Pacific Regional Office

#### Members

#### AS AT JUNE 2015

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 Ligue Nationale Alzheimer Liga (Belgium) Alzheimer's Family Support Group (Bermuda) FEBRAz (Brazil) Compassion Alzheimer Bulgaria Alzheimer Society of Canada Corporación 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) Česká alzheimerovská společnost (Czech **Republic**) Alzheimerforeningen (Denmark) Asociacion Dominicana de Alzheimer (Dominican Republic) Egyptian Alzheimer Society Asociacion de Familiares Alzheimer de El Salvador Muistiliitto ry (Finland) 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 Lebanon Macau Alzheimer's Disease Association Association of Alzheimer Disease - Skopje Macedonia Alzheimer's Disease Foundation Malaysia Malta Dementia Society **Alzheimer Association Mauritius** Federación Mexicana de Alzheimer (Mexico) L'Association Monégasque pour la recherche sur la Maladie D'Alzheimer (Monaco)

Association Marocaine Alzheimer et Maladies Apparentées (Morocco) Alzheimer and Related Dementia Society Nepal Alzheimer Nederland (Netherlands) Alzheimers New Zealand Alzheimer's Disease Association of Nigeria Nasjonalforeningen for folkehelsen (Norway) Alzheimer's Pakistan 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) Asociación de Alzheimer y Desórdenes Relacionados de Puerto Rico Romanian Alzheimer Society Help For Patients With Alzheimer's Disease And Their Families (Russia) Saudi Alzheimer's Disease Association (Saudi Arabia) Alzheimer Scotland - Action on Dementia Alzheimer's Disease Association Singapore Sint Maarten Alzheimer Association Slovak Alzheimer's Association (Slovak Republic) Spominčica (Slovenia) 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 Association Alzheimer Tunisie (Tunisia) 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) Fundación Alzheimer de Venezuela Zimbabwe Alzheimer's and Related **Disorders Association** 



Alzheimer's Disease International 64 Great Suffolk Street London SE1 0BL, UK Tel: +44 20 79810880 www.alz.co.uk 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 Cover image: Participants and speakers at the Alzheimer University for emerging associations