



ANNUAL REPORT 2018-2019

-  arthritis.ca
-  1.800.321.1433
-  /ArthritisSociety
-  @ArthritisSoc
-  @ArthritisSociety



Message from the Chair of the Board

Ken Smith

This is the subtitle

As Chair of the Board of the Arthritis Society, I am pleased to provide this annual report regarding the organization's activities for the fiscal year 2018/19 and the focus and plans going forward.

This is an exciting time to be involved in the work of the Arthritis Society, but also a challenging one. With ever-increasing numbers of Canadians affected by various forms of arthritis, it is vital that we respond with timely and effective information and resources to those affected by this disease – and our response must be scalable to meet the needs of the growing and diverse arthritis community.

Simply put, we want to do more. We want to reach more of the people affected by the disease. We want to advocate on their behalf for more and better care. We want to be able to fund more of the research that is leading to better outcomes.

The Board therefore engaged with management in the development of an ambitious 5-year strategic plan, “*Accelerating Impact*”. This represents our commitment to Canadians that the Arthritis Society will position itself to do more, for more people and do so more effectively. This will allow us to accelerate our positive impact on health outcomes for the millions of Canadians living with arthritis today, and the millions more at risk of developing arthritis in the years to come. The plan includes a sophisticated approach to revenue growth in order to sustain ambitious targets for mission investment and position the Arthritis Society for success in the years to come.

Accelerating Impact has three key goals:

- ▼ **Reach:** to significantly increase the number of Canadians we reach annually
- ▼ **Relevance:** to become the leading voice of Canadians living with arthritis
- ▼ **Return:** to increase our annual revenues by \$10 million by 2025

For the next five years, the initiatives we undertake and the causes we champion will all be evaluated against these goals to ensure we focus on work that offers the greatest positive impact on those living with or at risk of developing arthritis. Of course, none of this can occur without the engagement of the broader community: our ability to increase our mission impact is directly related to our ability to measurably increase our revenues, to engage volunteers purposefully, and operate as efficiently as possible.

“Accelerating Impact... represents our commitment to Canadians that the Arthritis Society will position itself to do more, for more people and do so more effectively.”

Our goals at the Arthritis Society are clear: we will focus on supporting people today while changing the future of arthritis. We fulfill our mission through three pillars of activity:

- ▼ **Research:** We will spark new ideas and careers in arthritis research
- ▼ **Advocacy:** We will be a critical patient voice on health issues
- ▼ **Information and Support:** We will engage Canadians to reduce the impact of arthritis by ensuring they are knowledgeable and empowered about their disease

Each of these pillars has success measures that will allow us to monitor and report on our progress to our stakeholders. Work has already begun, and we have realigned our operations and governance structures to better reflect these priorities.

It’s an ambitious plan – as it must be, if we are to meet the challenges ahead.

In the Board’s view, we have taken important steps to ensure the Arthritis Society has an increasingly positive impact. As we continue this journey, we are incredibly grateful for the leadership and skill of our management team, the dedication of our staff and volunteers, and the generosity of our donors and supporters. Working together, we will make continuous progress towards achieving our vision of a world free from the devastating impact arthritis has on lives.



Ken Smith,
Chair of the Board, Arthritis Society



Message from the President and CEO Janet Yale

I am pleased to submit this report as President and CEO of the Arthritis Society on the activities, initiatives and results for the past year, fiscal 2018/19.

There were many noteworthy accomplishments this year:

- ▼ Over \$4 million invested in new research grants and salary awards.
- ▼ The launch of our 'Stars Career Development Awards' to attract young scientists to the field of arthritis research.
- ▼ A new strategic partnership with Cassie and Friends (C+F) in support of our Stop Childhood Arthritis research initiative.
- ▼ Advocacy on behalf of Canadians with arthritis during the provincial elections in Ontario, New Brunswick and Quebec.
- ▼ The creation of a federal election strategy focused on pharmacare, wait times for joint replacements and improved access to medical cannabis through pharmacies.
- ▼ The launch of many new information and support resources, including [learning modules and patient journeys](#) and [navigation resources](#) that help people deal with their local health care system.

- ▼ Strengthened relationships with key arthritis community partners such as the CRA, CAPA and CIHR.
- ▼ Our 70th Anniversary Gala featuring a Lifetime Achievement Award for world-renowned rheumatologist Dr. Claire Bombardier.
- ▼ Our 9th annual Walk for Arthritis, that saw 8,000 Canadians raise over \$1 million.

Financially, 2018/19 results reflected the continued changes in the external marketplace that are impacting the Arthritis Society as well as others in the health charity sector, from changing donor giving patterns to regulatory changes impacting corporate sponsorships. The results also reflect some short-term impacts of the changes we are undertaking as an organization to reposition ourselves for this new fundraising environment.

We remain confident of the medium- and long-term viability of this strategy to achieve material and sustainable revenue growth so that we may increase the investment in our mission priorities in research, advocacy and information and support.

Accelerating Impact

As discussed by our Board Chair, the end of this year saw us develop the Arthritis Society's first-ever five-year strategic plan, *Accelerating Impact*. As you'll see laid out in the following pages, the plan is built around four operational areas of focus – mission, revenue, strategic communications and enablers – and sets a clear direction for mission priorities and revenue growth that will allow us to support people today while we continue working to change the future of arthritis.

The strategy forms the framework for our business planning for fiscal year 2019/20 and beyond. The three pillars of our mission aim to spark new ideas and careers in arthritis research, to ensure that we are a critical patient voice on health issues, and to engage more Canadians to reduce the impact of arthritis.

Our mission ambition is supported by a robust revenue plan that will move the organization to \$40 million in annual revenues over five years. Our revenue portfolio will focus on 4 main streams: High End Giving, Direct Response, Community Events & Corporate Partnerships. Revenue growth will directly drive our ability to expand our mission commitments to meet the growing needs of Canadians with arthritis.

In Closing

This past year, fiscal 2018/19, has set us on a firm path forward as we adapt our organizational model to the achievement of our ambitious five-year plan. We have a clear roadmap, a strong leadership team and a passionate group of staff and volunteers whose commitment and dedication are second to none. The year ahead will be an exciting one full of positive change – for the Arthritis Society, for the arthritis community and for the millions of Canadians living with this devastating disease.

On a personal note, I will be retiring in January 2020. Looking back on my seven years with the Arthritis Society, I am pleased with the progress we have made but recognize how much more needs to be done. In the coming months, I will be helping to facilitate a smooth transition, secure in the knowledge that my successor will inherit an organization with a bold, ambitious plan and a great team in place. I look forward to seeing the incredible progress still to come.



Janet Yale
President and CEO, Arthritis Society

“The year ahead will be an exciting one full of positive change – for the Arthritis Society, for the arthritis community and for the millions of Canadians living with this devastating disease.”



2020-25 Strategic Plan



Accelerating Impact

Vision: To live in a world where people are free from the devastating effects that arthritis has on lives

Reach 3M

Significantly increase the number of Canadians we touch by sharing information and inspiring actions



- ▼ Deliver valued information to **3M** Canadians each year
- ▼ Inspire **25K** actions by Canadians

Relevance Top 10

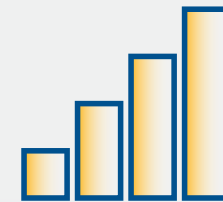
Boost our relevance as the voice of patients living with arthritis



- ▼ Engage **300** policymakers and opinion leaders
- ▼ Ensure that arthritis registers as a top health cause

Return +\$10M

Measurably increase our revenues and the mission investments we make



- ▼ Increase annual revenues by **\$10M** each year by **2025**
- ▼ Invest **\$30M** in research by 2025, increasing our annual investment by **50%**

What We Do

Research: Through the trust and support of our donors and sponsors, the Arthritis Society is Canada’s largest charitable source of investment in cutting-edge arthritis research, funding more than \$200 million in research projects since our founding – projects that have led to breakthroughs in the diagnosis, treatment and care of people with arthritis.

The Arthritis Society’s research program is grounded on our goal of finding the causes and cures of arthritis and to promote the best possible treatments and care of those with arthritis. Most importantly, transparency, fairness and accountability remain priorities in our research strategy and programs.

Advocacy: As the proud voice for people affected by arthritis in Canada, we often speak up and speak out to capture the attention of decision-makers at both the federal and provincial levels. Our advocacy goals are to:

- ▼ champion the needs of people with arthritis to drive positive policy changes
- ▼ increase awareness and understanding of arthritis in Canada

We pursue these goals through meetings with key federal and provincial decision-makers, presentations to Parliamentary and legislative committees, publishing policy papers and analyses on vital issues, sector consultations and coalitions, public awareness campaigns and other means.

Information and Support: Arthritis is a chronic condition which means once diagnosed, a person has many challenges and factors to consider in treating, managing and coping with the disease. The Arthritis Society has a long tradition of providing educational programs, as well as innovative information and support aimed at helping people affected by arthritis have the best possible quality of life. Drawing on the expertise of health professionals and experts in their field, our goal is to provide patient centric, evidence-based information, resources and on-line tools and education.

Be it managing the disease and its medical challenges or seeking a positive lifestyle to deal with the pain and the impact arthritis has on everyday life, our resources available online, by phone or in person are designed with the goal of enabling and empowering people affected by arthritis.



Who We Are Here To Help

Cristy Spencer

“More than anything, it’s about refusing to let the disease define me. Arthritis won’t stop me.”

After years of heavy lifting as a film and TV technician, Cristy could no longer kneel to reach or place materials. She tried to work through the pain, relying on her back for lifting until it too started to degrade. Ultimately, her body’s failure to repair those joint injuries – basically the definition of osteoarthritis (OA) – forced Cristy to retire early.

Now 64, Cristy has already had one total knee replacement, and is about to have the other knee replaced as well. She experiences pain, stiffness and limited mobility daily.

“Honestly, I think people don’t really understand what it’s like to live with a disease like this,” she says. “It’s not just the pain, it’s the fact that you can’t do so many of the things that you want to do, even simple things that most people take for granted. Your whole outlook on life changes, you start defining yourself by the things you can’t do.”

While OA is a progressive disease, Cristy was surprised to discover that there’s a lot she can do to slow the progress of the disease and maintain her quality of life. The resources of the Arthritis Society

have helped her learn to manage better – and that has helped change her outlook.

“I make myself do things,” she says. “Not like before, when I just pushed through the pain and ended up doing more damage. If I had known then what I know now, my life would be very different. Now I am focused on making smarter decisions, staying mobile, rehabilitating from my surgery and preparing for the next one – and making sure I push my health team and advocate for the care I need.”



“Honestly, I think people don’t really understand what it’s like to live with a disease like this.”

Who We Are Here To Help

Julia McNally

"I am the wellness coach of my own health journey."

Julia McNally has lived with inflammatory arthritis her entire life, first with juvenile idiopathic arthritis (JIA), then rheumatoid arthritis (RA). But her confidence shines through.

Having learned early the importance of exercise and movement to retain her mobility, Julia became a personal trainer. When one of her clients suggested she get involved with the Arthritis Society, it was the start of a whole new journey for Julia. She met other people who were living and coping with arthritis, and found that that Society provides them with purpose, validation and that all-important connection.

"Working at Family Days, connecting with families, giving parents resources and understanding... If I had the resources as a child that are available now – the tools, the education, the opportunities to connect – my childhood would have been very different."

Taking a more holistic approach to her own health, Julia has been able to manage medication-free for over a year. That doesn't mean she's cut out her

doctor: she engages regularly with her GP, rheumatologist, physiotherapist, psychologist and more. But she stresses the importance of her own role in keeping her health team focused on her goals: "I am the wellness coach of my own health journey."

Earlier this year, with her disease in remission, Julia ticked off a bucket list item by going to live in an ashram in the Bahamas for three months. She's now developing a 9-week program on yoga for arthritis, which she looks forward to teaching to people experiencing some of the same challenges she has faced.

"The support from the Arthritis Society's donors for research and programs is going to help reduce chronic pain for so many people. It's the most humane thing you can do – it's life changing."



"The support from the Arthritis Society's donors for research and programs is going to help reduce chronic pain for so many people. It's life changing."

Who We Are Here To Help

Dr. Mary De Vera

Dr. De Vera's team determined that the use of biologics was not associated with an increased risk of harm to mother or baby.

Studying the safety of biologics in pregnancy

It can be daunting trying to weigh the risks and benefits of using medications during pregnancy, particularly if the medication or the way it's used is fairly new. The class of pharmaceuticals known as "biologics" are made from living cells, and block specific types of immune cells that attack healthy tissue. They've had a tremendous impact on treating autoimmune conditions including inflammatory arthritis like rheumatoid arthritis (RA), psoriatic arthritis and ankylosing spondylitis.

"It's not as simple getting pregnant and deciding not to take medication," says Dr. Mary De Vera, a Canada Research Chair in Medication Adherence, Utilization, and Outcomes and an assistant professor in the faculty of pharmaceutical sciences at the University of British Columbia. "Having arthritis itself is harmful for the mom and the baby. Arthritis has to be well-controlled in order to have a successful pregnancy."

The team analyzed data from thousands of British Columbians who had an autoimmune diagnosis

between 2002 and 2012, including many who had used biologics in the three months before or during their pregnancy, to study the impacts. Their results, published in 2018 and 2019, are encouraging.

Studying typical birth risk factors – preterm deliveries and birth weight, infection in baby and mother, and birth defects – Dr. De Vera's team determined that the use of biologics was not associated with an increased risk of harm to mother or baby in those key metrics.

"The next step is to see how this information is actually helping women make decisions," notes Dr. De Vera, who adds that for women living with RA it's not uncommon to experience anxiety about making decisions about medication. "We want to get this information to women and their rheumatologists so they can make an informed decision. We can help support healthy pregnancies."



"Ever since I was a little girl, all I've wanted was to be a mom... I'd been told that I would be stupid to go off my medications to try and conceive." – young mother with RA

Who We Are Here To Help

Guomin Ren, University of Calgary

(Supervisor: Dr. Roman Krawetz)

OA may have different inflammatory subtypes that affect joints differently.

Creating a clearer picture of osteoarthritis

Osteoarthritis (OA) most commonly affects the joints of the knees, hips, big toes, hands, and spine. It is well known that these joints work in different ways. However, it is not clear whether OA manifests itself differently in different joints, and most OA research is focused on the knee alone.

Under the supervision of Dr. Roman Krawetz at the University of Calgary, Guomin Ren – a recipient of an Arthritis Society Graduate PhD Salary Award – mapped out the patterns of inflammatory molecules found in the blood and joint fluid of people with OA in the hip or the knee, and those found in people without OA. The patterns differed substantially between hip and knee OA, suggesting that OA may have different inflammatory subtypes that affect joints differently. The researchers also identified three molecules specifically linked to pain in people with hip OA.

Taken together, this has important implications on the need for more personalized treatment for OA,

since a “one size fits all” approach will not target the different factors that impact OA development and progression in different joints. It is also encouraging that many of the inflammatory molecules under study were detected in the blood. With further research, this could pave the way for a simple blood test to detect OA in different joints at its earliest stages.



Guomin Ren and his University of Calgary colleagues
(Photo credit: Nedaa Aljezani)

“With further research, this could pave the way for a simple blood test to detect OA in different joints at its earliest stages.”

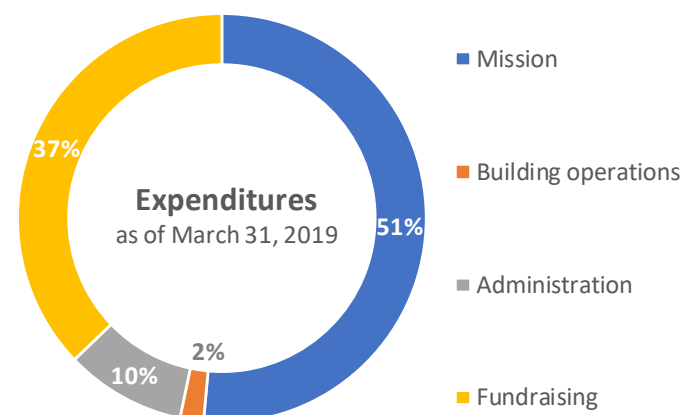
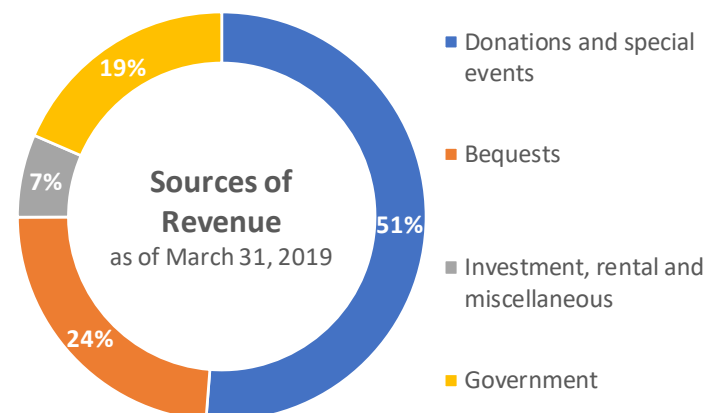
Financial Information 2018 - 2019

FINANCIAL REPORT

STATEMENT OF FINANCIAL ACTIVITIES

Year ended March 31, 2019, with comparative information for 2018

	2019	2018
	\$	\$
Revenue		
Support from the public:		
Campaigns	14,740,799	14,620,538
United Way	128,301	162,547
Bequests and other planned giving	6,882,542	4,890,891
	21,751,642	19,673,976
Investment, rental and miscellaneous income	1,900,384	1,912,147
Support from government departments and agencies	5,370,514	5,131,920
Total revenue	29,022,540	26,718,043
Expenses		
Research	4,487,118	4,461,824
Programs and services	11,470,001	11,859,858
Building operations	577,602	522,891
Administration	2,958,522	3,050,267
	19,493,243	19,894,840
Cost of raising funds from the public	11,529,307	10,540,797
Total expenses	31,022,550	30,435,638
Excess (deficiency) of revenue over expenses	(2,000,010)	(3,717,594)



The Arthritis Society is accredited by the Imagine Canada Standards Program, Canada's highest measure of excellence for charities and not-for-profits. For more information, visit imaginecanada.ca.

Full audited financial reports are available for review at arthritis.ca/finances

Governance

NATIONAL BOARD

Kenneth Smith, Chair
Ronald Smith, Past Chair
Drew McArthur
Duncan Mathieson
Cathy McIntyre
Mary Hofstetter
Nancy Hopkins
Jay Cross
Lynne McCarthy
Bill Stewart
Sue Furlong
Jennifer LaPlante
Thomas Jedrej
Martin Daraiche
Rosie Keough
Jonathan Carriere
Lisa Hryniw
Ingrid Gutzmann
Michele Walsh
Evelyn Sutton
Jason McDougall

Michael Whitcombe,
Honorary Solicitor

NATIONAL EXECUTIVE

Janet Yale,
President & CEO
Sian Bevan,
Chief Science Officer
Cheryl McClellan,
Chief Operations Officer
Laura Syron,
Chief Development Officer

BOARD COMMITTEES

Executive

"Composed of the chairs of each board committee, we are entrusted with monitoring and guiding the performance of the Arthritis Society and the CEO. We also address urgent matters that arise between board meetings to ensure we achieve our mission."

– Kenneth Smith, Chair

Governance & Nominating

"We oversee the recruitment and succession of the national board, review recommendations for the division advisory boards across the country, and ensure that board policies are monitored and reviewed by the board as required to support effective governance."

– Mary Hofstetter, Chair

Audit & Finance

"We fill the critical role of overseeing the financial health and sustainability of the Arthritis Society, monitor The Society's financial reporting, and remain keenly aware of managing and mitigating any risks to our financial health."

– Duncan Mathieson, Chair

Revenue Development

"We provide strategic advice and guidance to inspire innovative revenue approaches that connect with the philanthropic nature of Canadians—so that The Society can carry out its mission."

– Cathy McIntyre, Chair

Mission

"We oversee all investments in research, programs, services and public policy to ensure that Canadians with arthritis are receiving the best possible benefit of our donor dollars, without which, none of this would be possible."

– Dr. Evelyn Sutton, Chair

Scientific Advisory Committee (SAC)

"We advise on matters pertaining to arthritis science and research, ensuring objectivity and a high standard of scientific excellence. We shape the research strategy based on the needs of people we serve and remain committed to delivering a future without arthritis."

– Dr. Jason McDougall, Chair

Medical Advisory Committee (MAC)

"This team of clinicians in rheumatology works with SAC and helps connect the arthritis community and research investments. Representing the health-care provider voice, MAC also ensures that our education, publications, programs and services are accurate, evidence-based and relevant to Canadians with arthritis and their families."

– Dr. Evelyn Sutton, Chair

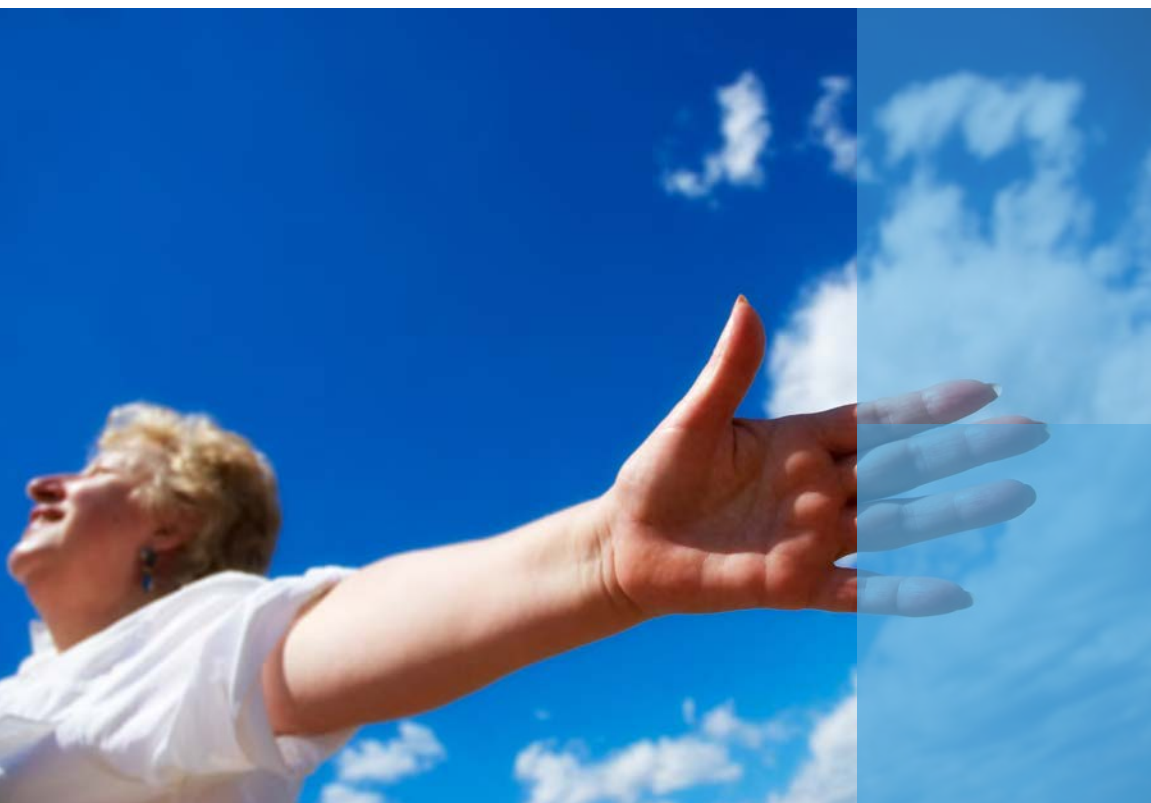


How We Work

Our network includes a national office in Toronto, 5 divisional offices, and regional offices in major cities across Canada. In addition, we have thousands of volunteers who support the important work we do.

In 2018-2019, we were supported by 130,000 individual and corporate donors who gave through direct donations, events, bequests and sponsorships.

THANK YOU to our generous donors, sponsors and incredible volunteers.
You are helping to change the future for six million Canadians affected by arthritis.

A large, stylized graphic consisting of two overlapping, curved shapes in yellow and green, resembling a swoosh or a stylized leaf, positioned on the right side of the page.

 arthritis.ca
 1.800.321.1433
 /ArthritisSociety
 @ArthritisSoc
 @ArthritisSociety

