

# The Arthritis Society

## Vision

Living well while creating a future without arthritis

## Mission

Provide leadership and funding for research, advocacy and solutions to improve the quality of life for Canadians living with arthritis

## Values

Integrity Passionate commitment Spirited teamwork **Bold** innovation Courageous leadership

# Message from the president AND CEO

e can only achieve our provide leadership and funding for research, advocacy and solutions to improve the quality of life for Canadians with arthritis, through the generosity of our donors, sponsors and volunteers.

2016–2017 Priorities

### CURE

Fund discovery research.

#### CARE

Train health care professionals.

### **COMMUNITY**

Provide information and resources to a broader array of Canadians with arthritis.

I am so pleased to have the opportunity to lead support us in providing The Arthritis Society, as we serve the needs of so evidenced-based insight many people experiencing the pain that arthritis brings to their everyday life.

When I meet those people, I am always surprised by their ability to "push through the pain." But then I stop to realize that they should not have to live like that. No one should. There needs to be a cure. Easily said — but the journey continues. That is why the support of our donors and sponsors is so vital — to allow us to harness the expertise of our scientific and medical experts in making recommendations on how funds can be best applied to find breakthrough discoveries. One such opportunity is the potential of medical cannabis to alleviate the chronic pain of arthritis. This year we have been strong advocates with government as the prospect of full legalization looms. To demonstrate that more funding must be put into scientific research in this field, we have awarded our first ever grant for medical cannabis research.

We also want to help those living with arthritis improve their quality of life. There has never been a greater need for people to be equipped to be their own self-advocates. Our on-line resources and educational modules are designed to help people manage their disease, including a new educational tool on how to communicate effectively with your health care practitioner. The development of this content is a result of our wide-reaching network within the medical profession who

and guidance.

One area that remains personally troubling to me is the diagnosis of arthritis in a child. I cannot imagine how it must feel to be told your child has a disease believed to be "only for old people."



This is a life-changing diagnosis for children and their families filled with medical appointments and regular injections to stem disease progression not to mention chronic pain. We have made the development and expansion of children's camps a strategic priority — to give these kids the chance to have a great experience with others like them in a safe environment. It is always a highlight of my year to visit these camps and see the joy on the children's faces.

None of what we seek to accomplish would be possible without the continued support of our generous donors and sponsors as well as the thousands of volunteers who help us deliver our educational programs and run our fundraising events across the country. Thank you.



# Why I Walk

## Eileen Davidson ("Chronic Eileen")

fter living a relatively normal and healthy Arthritis Society after people started life, Eileen was hit with a double arthritis noticing her writing and photos. diagnosis in her twenties. She has both The biggest compliment she's ever rheumatoid arthritis and osteoarthritis and is received (and there are many from just thirty years old. The diagnoses caused her intense emotional turmoil that she described as her "rock bottom". Losing the ability to work take better care of themselves and and the constant struggle with her health, while to treat others better. trying to raise a child by herself, have been the biggest challenges of Eileen's life. Every day she experiences pain and crippling fatigue that make normal activities difficult and draining.

Even the simplest of tasks can tire Eileen out – and the side effects of medication have been unpleasant, to say the least. She found a sense of solace during her rock bottom when she started to raise awareness of what living with an invisible disease like arthritis can be like.

Eileen shared what she was going through on social media and became an Ambassador for the

all over the world) was that they found her to be an inspiration to

People have also shared that until they heard about arthritis through Eileen's journey, they really didn't know about it. And those who thought they did had no idea that there are so many kinds of arthritis or that someone in their twenties could be diagnosed with it. This inspired Eileen to believe in herself and gave her a hunger to help others. The best part was that she could do it just by being herself and being open, and through that, she could promote something meaningful.



wants to show her young son that a disease like arthritis isn't going to stop his mom.

"I am doing it to be a voice for those suffering with arthritis and to show that not all diseases and disabilities are seen by the eye," she says. "My late grandmother and aunt were both severely affected by arthritis, and I never knew their suffering until I too became a person living Young Volunteer Shares Her Silver Lining

Laura Burnison

t started one morning with a knuckle that was purple and swollen to twice its size. Odd, but easily explained away. A few mornings later, says she is using her personal experience to Laura Burnison woke up to find both knees in help others. the same condition.

"They literally weren't functioning. I had to crawl my way across the floor to my desk chair to hoist myself up," she says.

Within a week, all of her major joints were swollen. Hips, elbows, wrists, shoulders, and both hands were stiff and painful. "I had to crawl to the door and knock so that my roommate would come open it. I couldn't turn the knob," she recalls.

Doctors were stumped. Some dared to suggest arthritis, but others said it couldn't possibly be Laura was just 19 years old.

"I was getting very frustrated and scared," she recalls. Originally from Burlington, ON, the firstyear student at the University of Calgary missed so many classes due of her illness that she had to withdraw.

"They eventually decided we'd call it 'arthritis because there was no other explanation," she says.

As an education volunteer with The Arthritis Society in Calgary, the newly-married Laura

"I'm all about awareness, about how younger people can get arthritis. It's not just that stereotype of 60-plus that gets it," she explains. "I've spent a lot of time in the past 10-plus years educating people, especially with The Arthritis Society. I've met a lot of young people who have gotten arthritis. People think I had juvenile arthritis, but I was 19 and now I'm 33 and I haven's outgrown it."

The first few years after her diagnosis were tough. Flare-ups would send her to emergency where doctors would only treat the symptoms. She received oxycontin for her pain, a drug she says she didn't really want. But it was the only thing that worked.

"Finally I went to see a proper rheumatologist and got real medication. I started the journey of finding that perfect cocktail that worked well for me. We finally found it about eight years ago."

medication was the turning point for Laura, when she finally pulled herself out of her "pityparty-pit" as she calls it, realizing she could return to activities she previously enjoyed, especially hiking. Her new husband helps her stretch out her hips during their 10km hikes in the mountains. Stress and severe weather changes often trigger flares but Laura, who is studying to become a relationship counsellor, realizes that there's a silver lining to her arthritis.

"I want to pay it forward so that people's newly diagnosed experience won't be as lonely as mine

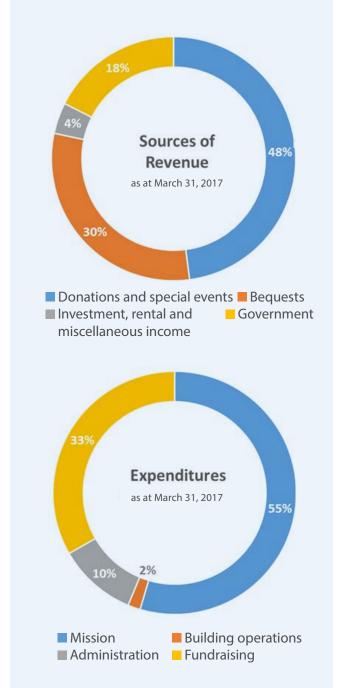
# Financial Report

#### STATEMENT OF FINANCIAL ACTIVITIES

Year ended March 31, 2017, with comparative information for 2016

	2017	2016
	\$	\$
levenue		
Support from the public:		
Campaigns	14,708,338	14,122,457
United Way	214,076	234,884
Bequests and other planned giving	7,436,424	9,128,117
	22,358,838	23,485,458
Investment, rental and miscellaneous	1,550,408	1,235,091
Support from government departments and agencies	5,246,075	5,256,192
Total revenue	29,155,321	29,976,741
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xpenses		
xpenses Research	4,616,268	4,689,239
•	4,616,268 11,317,627	4,689,239 10,815,557
Research		
Research Programs and services	11,317,627	10,815,557
Research Programs and services Building operation	11,317,627 536,345	10,815,557 473,420
Research Programs and services Building operation	11,317,627 536,345 2,899,824	10,815,557 473,420 2,963,978
Research Programs and services Building operation Administration	11,317,627 536,345 2,899,824 19,370,064	10,815,557 473,420 2,963,978 18,942,194





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# How We Work

### Governance

#### NATIONAL **BOARD**

Drew McArthur, chair Lucie Carbonneau Jonathan Carriere Dr. Sue Furlona Bill Hartley Mary Hofstetter Lisa Hrvniw Thomas Jedrei Rosie Keough Kevork Kokmanian Jennifer LaPlante Duncan Mathieson. treasurer Lynne McCarthy Dr. Jason McDougall Cathy McIntyre Jeffrey Morton Ken Ready Kenneth Smith Ron Smith Dr. Evelyn Sutton Carmelita Thompson O'Neill

Michael Whitcombe, honourary solicitor

### NATIONAL EXECUTIVE

Janet Yale, president & CEO Cheryl McClellan, chief operations officer Paul Haddad chief development officer Joanne Simons. chief mission officer

### NATIONAL 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."

- Drew McArthur, 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."

- Ken Smith, 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 quidance to inspire innovative revenue approaches that connect with the philanthropic nature of Canadians — so that The Society can carry out its

– Mary Hofstetter, chair

#### "We oversee all investments in

Mission

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. Sue Furlong, 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, evidencebased and relevant to Canadians with arthritis and their families." - Dr. Evelyn Sutton, chair

## Organization

Our network

includes eight divisional headquarters, regional offices in major cities across Canada, and a national office in Toronto. In addition, we have thousands of volunteers who support the important the work we do. In 2016–17, we were generously supported by over 150,000 individual and corporate donors who gave through direct donations, events, bequests and sponsorships.

## To our donors, sponsors and volunteers —

# THANK YOU



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