



ANNUAL REPORT 09/10

making life more liveable

CROHN'S & COLITIS AUSTRALIA

This year marked Crohn's & Colitis Australia's 25th anniversary, during which time our organisation has undertaken to make life more liveable for the thousands of Australian men, women and children living with these debilitating chronic illnesses. While we invest in research and wait for a cure for inflammatory bowel disease, CCA continues to advocate for world best treatments and health services, as well as providing educational and support programs for Australia's growing Crohn's and colitis community. Importantly, our services are offered free of charge. As we receive no funding from government sources, we rely on the generosity of volunteers, donors and community fundraising to continue our vital work.

ABOUT CROHN'S AND COLITIS

More than 61,000 Australians live with Crohn's disease and ulcerative colitis, two debilitating conditions known as inflammatory bowel disease (IBD). Common symptoms of IBD include abdominal pain, weight loss, diarrhoea, fatigue and fever. The disease can also lead to poor growth and development in children, and can be life threatening due to complications arising from symptoms. The illnesses can occur at any age but are most commonly diagnosed between 15-35, when education, career and establishing a family are at a peak. There is no cure for these chronic illnesses.



CONTENTS

| | |
|---|-------|
| Chairman and Chief Executive Officer's report | 4 |
| Achieving our goals | 5-10 |
| Our Board of Directors | 11 |
| Concise financials | 12-13 |
| Our donors and volunteers | 14 |

OUR VISION

Support for today - a cure for tomorrow

OUR MISSION

To support the Crohn's and colitis community with a focus on confidential support programs, including education, advocacy, counselling, increasing awareness, and generating and utilising funds for research and support.

OUR VALUES

CCA's values are at the core of every decision and action that it takes. These values are:

Achievement

Delivering on our mission to achieve an environment where people living with IBD can fully participate in everyday social and economic activities that others take for granted.

Innovation

Continually finding new and innovative ways to maximise the efficiency and value of our service to the IBD and broader Australian community by funding new research and developing meaningful programs that create change for the betterment of people living with IBD.

Relationships

Maintaining and nurturing mutually beneficial relationships with members and collaborating with volunteers, research organisations, corporate partners, government and the health profession to help honour our commitment to people living with IBD.

Integrity

Inspiring trust and respect for our ethical practices, high standards of governance and for our honesty and transparency in our dealings.

Sustainability

Building a strong organisation for future generations, providing leadership within the industry and developing the capabilities to deliver on our mission.

CCA has developed five goals to help us to meet the needs of the growing IBD community. These goals are:

- To support people with Crohn's and colitis and their families through advocacy, education and counselling.
- To raise awareness and understanding of Crohn's and colitis across government, business, media, general community, and health sector, to assist with early diagnosis.
- To generate and allocate funds for research and support programs.
- To develop structures to collaborate with volunteers, research organisations and health professionals.
- To develop and maintain the highest levels of integrity in corporate governance, and effective and efficient business practices.

CHAIRMAN & CHIEF EXECUTIVE OFFICER'S REPORT



At Crohn's and Colitis Australia, delivering the highest quality programs and services to meet our members' needs has been the focus of this financial year. Over the last four years, CCA has experienced a 65 per cent increase in membership. This represents an average growth of 16.25 per cent a year. As a small, grassroots organisation with a history of "professional" operations and limited resources, we needed to realistically review our capacity to meet the needs of our growing membership and identify the requirements for operational sustainability and support research to help find a cure for Crohn's and colitis.

To sustain this level of growth and continue delivering on our mission, CCA allocated significant time and resources towards infrastructure development in the areas of information technology, staff and operational processes, procedures and policies. We now have a firm foundation to meet future challenges and continue to extend our reach into the community.

Revenue raised for the year saw an increase in community fundraising, with a number of valued volunteers donating their time and contacts to help us raise funds in many and varied ways. General donations were slightly lower than the previous year but generally held steady. In the wake of the global financial crisis, sponsorship and income generated through our investments were the two areas that slumped significantly compared with last year, and unfortunately, were the main reasons for the \$291,616 deficit experienced by the organisation this year.

Despite the financial outcome, CCA was able to continue activity across all areas of member services. Major advances were made in the following key areas:

Awareness of IBD in the Community

This year, we took awareness of IBD to a new level with World IBD Day and the "Support Our Cause" campaign. The global partnership between IBD patient organisations helped CCA generate interest in each major city, evidenced by a sharp increase in visits to our website and signatures for our "Support Our Cause" petition. Awareness was also heightened within government circles – and this remains a key area of focus for the organisation. Politicians were sent a CCA pin and asked to wear it on World IBD Day in recognition of the event. We received numerous emails and letters from elected members supporting our cause.

Research Grant Awarded

Research continues to be a high priority for Crohn's and colitis Australia. \$150,000 was awarded to Dr Antonina Mikocka-Walus, the first recipient of the Angela McAvoy Fellowship. Her study potentially changes the course of IBD and offers a non-invasive treatment option for IBD sufferers.

Supporting Young People and Families

Queensland and New South Wales hosted teenage and family camps, catering to 110 people. The success of these camps has meant that a new group of young people and their families are now connected and are able to share support to help them navigate through the experience of living with an incurable disease.

We realise there is much more to do and we will continue to work hard to improve the lives of those living with Crohn's and colitis and their families that provide great support day in, day out. We remain grateful for the loyalty of our members and the support we receive from all our sponsors, donors, volunteers and staff, and we look forward to serving the IBD community again next year.

Handwritten signature of Bruce Tobin in black ink.

Bruce Tobin
Chairman

Handwritten signature of Francesca Manglaviti in black ink.

Francesca Manglaviti
Chief Executive Officer

GOAL PROVIDE OUTSTANDING SUPPORT

CCA programs connect Australians living with Crohn's and colitis to a supportive community in the following ways:

Youth Camps

CCA consolidated its youth camp program, which brings together similarly-aged children to share their IBD experiences in a relaxed and fun atmosphere.

Our Queensland camp was held over a weekend at Currimundi Centre on the Sunshine Coast in March, and was attended by 11 teenagers from all over the state.



As well as attending helpful information sessions from a nutritionist and a young entrepreneur with IBD, the teens participated in indoor and outdoor games and a movie night.

CCA also hosted a dinner for the participants' parents in recognition of their needs to connect with others in a similar situation, and to share stories and advice.

The NSW camp was held at the Collaroy Centre in Sydney's northern beaches in April, and was attended by teens, and their parents and siblings. The attendees participated in communal and age-appropriate activities, including

orienteering, canoeing and coastal walks. IBD nurses provided practical information, while TV personality Peter Timbs shared his IBD journey.

The free weekend camps, overseen by CCA staff and volunteers, enabled the adult and youth participants to share their common experiences, support each other and develop new friendships, with email addresses and phone numbers circulated for further conversations and meetings.

The feedback from all of the participants was extremely encouraging, reaffirming CCA's aim to host more camps in the future.

Support Groups

The number of people attending CCA's support groups remained strong, highlighting the continued need for mutual-aid groups for people impacted by Crohn's or colitis. The groups meet regularly in community venues in an informal environment that allows every person the opportunity to contribute, and receive empathy, support and understanding. Last year groups operated in NSW, Victoria, Queensland, South Australia and West Australia. Many members have expressed interest in training as group facilitators, and CCA hopes to have support groups running in Tasmania and ACT in the near future.

Telephone Support

Telephone support is offered to our members who are unable to attend a support group or who may require specific support for a particular part

of their IBD journey, such as surgery, medication complications or needing personalised emotional support. We match our members with one of our trained peers for a one-off phone call, or a series of calls agreed between the member and the peer.

Forums and Symposiums

More than 1 500 people attended CCA's information forums and two day-long symposiums during the year. The free information events were held across Australia and were extremely well attended. Expert speakers provided education on diagnosis, treatments, disease management, and developments available to the IBD community.

The two symposiums were held in Melbourne and Sydney and comprised a comprehensive range of speakers discussing medical, social and economic aspects of the illness.

The forums and symposiums, free to all participants, allows CCA to connect with members and the broader IBD community, including the specialist speakers who generously donate their time.

IBD Helpline

CCA's helpline continued to provide invaluable support, with an increased number of people living with Crohn's disease and ulcerative colitis utilising this free support service. CCA director (and former ACCAQ president) Anita Reilly provides advice and support to people with social and emotional issues relating to the illness, as well as advising people on the best approach with regard to following up on medical-based queries. People can also phone the helpline for referrals, information and advice on travelling overseas in relation to IBD.



GOAL MAINTAIN SUSTAINABLE FUNDING FOR IBD RESEARCH AND SUPPORT

Fundraising is vital to promote research and support CCA's services, particularly as our organisation does not receive any government funding. CCA has established the following range of initiatives to maintain our programs:

Mid-Year Research Appeal

Funding research to help Australian scientists and researchers find better ways of managing IBD and hopefully, one day, a cure, is a high priority at CCA. Unfortunately, CCA does not receive any state or federal government funding, and must rely solely upon sponsorship and membership fees to provide services and fund research. Added to this, an Access Economics report found that just 0.1 per cent of the national health budget is allocated to IBD, of which only 1 per cent goes to research. In light of this, CCA must launch annual appeals to our members and the wider IBD community, with the aim of investing much-needed funds in research and support programs that make life more liveable for people with IBD. This money has already contributed to Australia's largest IBD research grant to be entirely funded by a charity, the Angela McAvoy Fellowship (see page 9).

CCA Fundraising Initiatives

Merchandise

Last year CCA expanded its range of merchandise to include lapel pins, new wristbands, pens and recyclable shopping bags. The items cover a range of price points and have proven popular with CCA members holding fundraising events, where the merchandise can be displayed and purchased by attendees.



Changing Lives Challenge

As a part of our fundraising strategy, CCA co-ordinates a national fun runs program, called Changing Lives Challenge.

The program targets fun runs across Australia, using the website Everyday Hero. When individuals register to participate in the fun runs, they nominate CCA as their beneficiary charity. This alleviates participants from managing money or keeping track of donations.

This year 14 CCA members took part in Sydney's City2Surf and raised more than \$8000.

CCA worked with online gym company, Glow Fitness Online, to assist the participants with a training program, and regular

training tips, and also instigated fundraising goals, whereby the participant receives a prize equivalent to the value of 10 per cent of the amount they raised. Prizes included Adidas gym bags, Gold Class cinema vouchers, iPods, GPS systems and an LCD TV.

CCA plans to expand the program next year to incorporate runs in every state, providing participants with tops bearing the CCA logo to promote awareness of IBD.



Christmas Cards

Following the success of the previous year's sale of Christmas cards, CCA this year expanded its range of high-quality foil-embossed greeting cards to incorporate more designs and mixed-pack options. Sales were very strong and raised more than \$8000. As well as raising valuable funds, the cards are an excellent avenue for raising awareness of IBD as every card includes CCA's name and website details.



Community Fundraising Initiatives

Much of CCA's funds are derived from fundraising events initiated by individuals, and groups or businesses that name CCA as beneficiaries.

In response to fundraising enquiries, CCA provides a Community Fundraising Kit, which includes helpful tips and suggested events. Donation boxes and merchandise, as well as information brochures that provide an overview of IBD and CCA, can also be supplied upon request.

As well as increasing in number, the variety of fundraising events has expanded to include headshaves, mountain climbs and car rallies.

The following are just a few of the fundraisers that donated more than \$70,000 to CCA last year.

Art From The Heart

CCA members teamed with professional artists to hold an art exhibition that raised more than \$5000.

Members were invited to express their IBD journey in the form of paintings, photographs, craft or digital art, which was then exhibited alongside works donated by professional artists. All works were offered for sale at a Melbourne art gallery over a weekend, launched with an opening night cocktail party.



The money raised was donated to CCA's youth camp program and IBD research.

The volunteer organising committee comprised people with IBD or parenting someone with IBD, and people associated with CCA.

Organiser Julie Gunn said art was a great for people with IBD to express their inner feelings.

"Art is a great vehicle for people with this illness who spend a lot of time at home, away from school, work and sport. It is something they can do that is morale boosting," Julie said.

It is hoped the exhibition will be an annual event.

A Close Shave



Lincoln McGregor-Smith was only 11 when he first realised his brother Nick was seriously ill with Crohn's disease.

Ten years on, Lincoln decided to raise awareness of his brother's condition, as well as raising funds for research.

The 21-year-old called for supporters

to sponsor him to shave off his dreadlocks, which he had been growing for two years.

"I had wanted to shave my hair so I thought I should help someone in the process. I thought I want to do it for someone I know and for something that not a lot of people know about," Lincoln said.

He raised well in excess of his \$1000 aim, donating \$1570 to CCA's research program.

"I see this as more about helping other people from getting it (IBD) ... I just hope it helps someone," Lincoln said.

In the Swing of things

More than 80 golfers swung their support behind CCA last year as part of Smartline Personal Mortgage Advisers' annual charity golf day.

The Bankstown event raised \$19,500 for CCA's youth camp program through entry fees, raffle, lucky-door prizes and auction of merchandise donated by clients, participants and businesses.

It was the third year Smartline held the event. The previous years it donated \$24,800 to Sydney Children's Hospital, Randwick, for research into Crohn's disease.



GOAL RAISE AWARENESS OF CROHN'S DISEASE AND ULCERATIVE COLITIS

A key part of our mission is to create awareness of IBD across media, business, government, the health sector and the general community. We do this in the following ways:

Awareness Week

The National Crohn's and Colitis Awareness Week was held from May 16-22. The week was timed to coincide with the first World IBD Day (May 19), which aimed to bring world attention to IBD (see below for more detail).

CCA encouraged members to help put IBD in the minds of the public by holding fundraising events during the week, and to raise awareness by promoting these events in their local media, and work and community networks. CCA assisted members with promotion, securing media coverage for members in several states.

CCA also made its logo available to members to be used as their Facebook/Twitter handle for the month of May. Members were also encouraged to use their social media tools to promote awareness week by posting and/or tweeting facts about IBD.

Members were also asked to call on their family, friends, colleagues and other social networks to visit CCA's website and sign our I Support IBD pledge. The online pledge outlines basic patient rights to timely healthcare, social inclusiveness and equality in the workplace and education system. CCA hopes to collect 10,000 signatures, which we will use for future lobbying and awareness campaigns.

World IBD Day

Patient organisations representing 27 countries across four continents joined forces last year to co-ordinate the first World IBD Day, held on May 19. The event was intended to bring to international attention the needs and rights of the five million people worldwide living with IBD. A website, www.worldibdday.org, was established to provide an overview of IBD and the desired outcomes of the event, and attracted comments from all over the world. Global activities included awareness walks in various cities in Brazil and America, as well as the "Day on Capital Hill" in Washington to advance the national IBD Research and Awareness Act, with patients making representations to politicians.

CCA also engaged the support of politicians throughout the country, asking leaders of the state and federal parties, as well as all the health and community ministers, wear the CCA pin on World IBD Day. We were pleased with the number of ministers and opposition members who agreed to wear the pin and wrote to confirm their support for our awareness campaign.

CCA also distributed posters and 40,000 flyers across the country to promote World IBD Day and our awareness week.

We are grateful to Victorian CCA member Amber Yates who agreed to be the face of our campaign, designed to raise the

profile of IBD and invite people to sign CCA's I Support IBD pledge.

Amber, who has Crohn's disease, said she hoped the move to give the disease a global perspective would encourage people to take IBD seriously, and realise that IBD is a disease that can happen to anyone, anywhere, anytime.

Publications

CCA continues to produce its quarterly magazine, *Inside Insight*, a 24-page publication exclusive to members.

Inside Insight includes the latest IBD news and research updates, expert opinion on frequently asked questions, members' personal stories and interesting articles regarding diet and lifestyle issues. The magazine also contains uplifting stories from Australians living with Crohn's and colitis.

Last year, CCA uploaded the magazine to the member-only section of our website, thereby reducing printing and postage costs, as well as our organisation's global footprint. Members who do not wish to access the magazine online are able to request a hard-copy.

CCA also completed the Patient Information Kit, which was distributed to selected health professionals and health clinics. The kit contains A4 colour leaflets that provide an overview of IBD, flyers and an A3 poster promoting CCA's support network, as well as our membership brochure. The kit enables doctors to provide patients with easy-to-read information that can be taken away with them for further consideration. Doctors and clinics are able to request more kits as required.

Website

The CCA website receives more than 8,200 visits a month on average. It is a vital tool in providing members - and the general public - with information about upcoming events, and enables users to purchase merchandise and renew memberships online.

CCA members can now also become "Facebook friends" with CCA's Lulu Livemore. They can then go on to join different CCA Facebook groups relating to youth camps, fundraising, Changing Lives Challenge, awareness week, and support facilitators. All CCA Facebook groups are closed to respect privacy.

CCA can now also be followed on Twitter, which enables us to engage in an interactive manner with a global audience.



GOAL STRENGTHENING RELATIONSHIPS WITH OUR PARTNERS

CCA's success is reliant on cultivating mutually beneficial relationships with all of our partners. Examples of this include:

Research Fellowship Awarded



The inaugural \$150,000 Angela McAvoy Fellowship was last year awarded to Dr Antonina Mikocka-Walus for her study into whether cognitive behavioural therapy can improve the psychological and clinical outcomes of IBD.

The two-year fellowship was started by CCA last year in the absence of any state or federal government funding for research in the area of IBD, and attracted a high calibre of applicants.

Dr Mikocka-Walus said she hoped her study would change the long-term course of IBD, providing a further treatment option. The study is to be conducted in conjunction with Royal Adelaide Hospital's Department of Gastroenterology and Hepatology. CCA Scientific Advisory Committee chairman Professor Peter Gibson said Dr Mikocka-Walus' study was a necessary step in progressing the understanding and treatment of IBD. Professor Gibson said the research would enable clinicians and patients to take a more holistic approach to managing IBD.

Supporting Research

CCA also supports research by advertising clinical trials in the magazine and on the website, encouraging members who meet the criteria to take part. The trials include drug therapy and dietary approaches, as well as associated issues, such as the impact of fatigue and the emotional effects of IBD. All studies supported by CCA are ethically approved by the study co-ordinator's governing body.

Supporting Campaigns

As well as supporting the health community's clinical trials, CCA is sometimes called upon to throw its support behind campaigns to serve the interests of the IBD community.

Last year we supported the call for government to fund specialist IBD nursing positions in hospitals. Historically, where these positions exist, they are funded by other sources, including pharmaceutical companies.

Following the successful campaign to fund two IBD nursing positions in South Australia, CCA wrote to members asking for testimonials regarding the efficacy of IBD nurses to support a campaign to create more specialist nursing positions in other states.

CCA also asked members to lobby the Federal Government to extend the PBS listing of infliximab to patients with fistulising Crohn's disease. This campaign was also successful and patients with this form of IBD are now able to access subsidised treatment for their condition.

Medical Conferences

Participating in local and international conferences is an excellent way to maintain useful networks as well as keeping abreast of the latest research and breakthroughs in IBD. This year, CCA participated in three major conferences: New Zealand Society of Gastroenterology Conference, Australian Gastroenterology Week (AGW) and Digestive Diseases Week (DDW).

The New Zealand conference introduced us to our trans-Tasman neighbours, the Crohn's and Colitis Support Group New Zealand (CCSG NZ). A working relationship has been established between Australia and New Zealand to provide quality support services to people with IBD. Following our meeting, CCSG NZ formally changed its name to Crohn's and Colitis New Zealand with the same look and feel as CCA. The rebranding presents a strong unified IBD support presence in the region.

At DDW we joined with our international colleagues to launch the first world IBD Day. The launch was well received by the international delegates and local media. This was a combined project that was initiated at the conference two years ago.

AGW continues to be an excellent opportunity to meet with Australian specialists and nurses and to distribute CCA's latest information to IBD professionals.



Volunteers

CCA is fortunate to have a strong national volunteer base that can be called upon to assist with administrative tasks, mailouts, and contributed pieces for the quarterly magazine, *Inside Insight*. Our volunteers also facilitate support groups, help to oversee our youth camps, and initiate and support fundraising and awareness events, including handing out brochures and participating in media interviews. In addition to this, CCA also has a growing volunteer network of health professionals who donate their time to speak at educational forums, camps and contribute articles to our magazine.

GOAL GROW OUR CAPACITY AS A LEADING NATIONAL IBD ORGANISATION

CCA has become Australia's leading IBD patient organisation by cultivating effective and efficient business practices and strong corporate governance. This has been exemplified in the following ways:

Improved Member Communication

Since its inception, CCA has operated with sparse resources and has only recently begun investing in computer technology. This has meant that our database software has been very basic, with limited capabilities to capture and recall data when needed. As CCA continued to grow, it became evident that the organisation needed to invest in a new, much more sophisticated customer relationship management system.

Last year, after extensive research, CCA elected to implement the ThankQ database, which has a wide range of applications, enabling us to provide members with a faster and more accurate service.



Quality Assurance at CCA

Quality service is dependant on two things – the staff and volunteers that deliver the service, and the policies and procedures that ensure a consistent level of service across geographic boundaries and changes in personnel.

To ensure that CCA maintains a high quality of service and personnel, CCA embarked on a major project that mapped our process flows across all areas of the organisation. The project allowed us to examine our practices at every level and to improve the way we operate for greater efficiency and transparency across our offices and departments.

To support the volunteers and staff who deliver for our members, we invested in a suite of HR policies and procedures in line with good business practices.

The policies enable us to recruit, motivate and retain high-quality staff and volunteers to ensure the long term sustainability of CCA and the quality delivery of all our programs and services.

OUR BOARD OF DIRECTORS

Bruce Tobin - Chairman

Bruce is Group General Manager Corporate Affairs for Tabcorp Holdings Ltd and has 27 years of executive and general management experience in corporate communications and a strong journalism background in metropolitan daily newspapers in Australia.

Professor Peter Gibson - Director

Peter is Professor of Medicine at Monash University, Head of the Eastern Health Clinical School and Director of Gastroenterology & Hepatology, Eastern Health, Victoria. He has long-standing and active clinical and research interests in inflammatory bowel disease, in addition to coeliac disease and irritable bowel syndrome.

Francesca Manglaviti - Chief Executive Officer, Director

Francesca has held senior management positions in not-for-profit, commercial and government organisations. She offers significant experience in strategic planning, liaison with government, stakeholder management, education and developing organisational capacity.

Bernadette Or - Treasurer

Bernadette, a CPA, is an experienced senior finance executive with more than 11 years experience in large corporations. In recent years she was the CFO/COO of the Starlight Children's Foundation, Enterprise and Career Education Foundation and the Australian Human Resources Institute.

Anita Reilly - Director

Anita has had a long association with CCA having previously served in an executive position with ACCAQ, which merged with CCA in March 2009. Anita, the Queensland state co-ordinator, has two decades of experience as a team member of a management committee and in the provision of IBD information and support services. She co-ordinates CCA's IBD Helpline.

Sophia Tzaferis - Director

Sophia is a chartered accountant and a practising lawyer. Sophia is a senior taxation specialist with Telstra and has extensive commercial and consulting experience in the area of taxation. Other areas of interest include corporations law, general commercial law and corporate governance.

Jonathan Epstein - Director

Jonathan is a senior analyst in the Future Fund's Private Markets team. Prior to this, Jonathan was a senior adviser to the former Federal Treasurer, Peter Costello, and also worked in a number of government policy-related roles, including the Commonwealth Treasury and Victorian Department of Premier and Cabinet.

CCA'S SCIENTIFIC ADVISORY COMMITTEE

Professor Peter Gibson, Director

Representing Crohn's & Colitis Australia

Peter Gibson is Professor of Medicine at Monash University, Head of the Eastern Health Clinical School and Director of Gastroenterology & Hepatology, Eastern Health, Victoria. He is also past-president of the Gastroenterological Society of Australia and was the inaugural chairman of IBD-Australia.

Professor Timothy Florin

Representing IBD Australia

Timothy Florin is Professor in Medicine University of Queensland Department of Medicine. Tim is also Director of Gastroenterology Mater Health Services' Adult Hospital, South Brisbane and Senior Staff Specialist Mater Health Services' public and private hospitals.

Stephanie Buckton

Representing Gastroenterological Nurses College of Australia (GENCA)

Stephanie is chairwoman of the GENCA IBD Nurses subgroup and has taken a leading role in the development and support of new IBD nursing positions, presenting extensively on the outcome of the IBD nurses role both nationally and internationally.

Associate Professor William Roediger

Representing the Colorectal Surgical Society of Australia and New Zealand

Associate Professor Bill Roediger is with the Department of Surgery, The Queen Elizabeth Hospital, in South Australia.

Jaci Barrett

Representing the Dietitians Association of Australia

Jaci is an accredited practising dietician and registered nutritionalist who also works as lecturer at Monash University, Box Hill Hospital, where she also conducts IBD-related research trials.

CONCISE FINANCIALS

Below is the statement of consolidated income and expenditure for the financial year ending June 30, 2010.

Over the financial year, CCA invested in new and existing infrastructure to deliver and sustain growth and services in the long term.

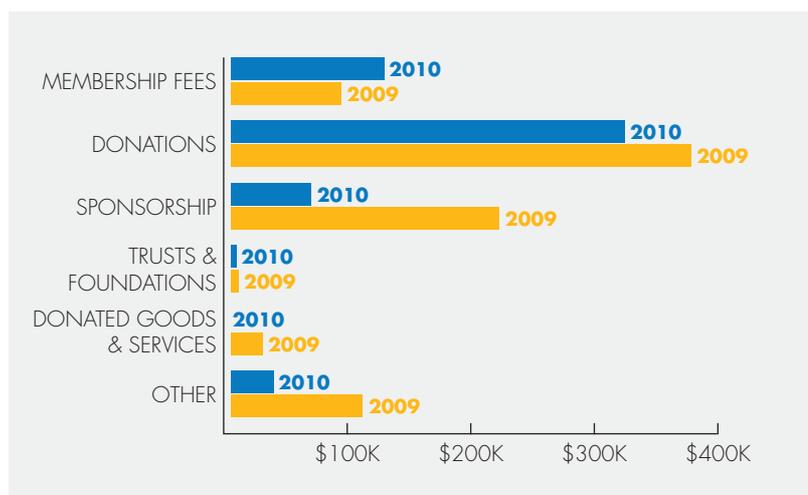
The 65 per cent growth in membership numbers over the last four years is evident in this year's expenditure as CCA invested funds in servicing member needs and expectations.

The infrastructure expenses incurred this year were one-offs and will position CCA well for the future.

Income, however, did not match budgeted expenses, due largely to a major drop in sponsorships and interest earned from investments. The 09/10 end of year result is a deficit of \$219,606.

The full audited financial report is available upon request.

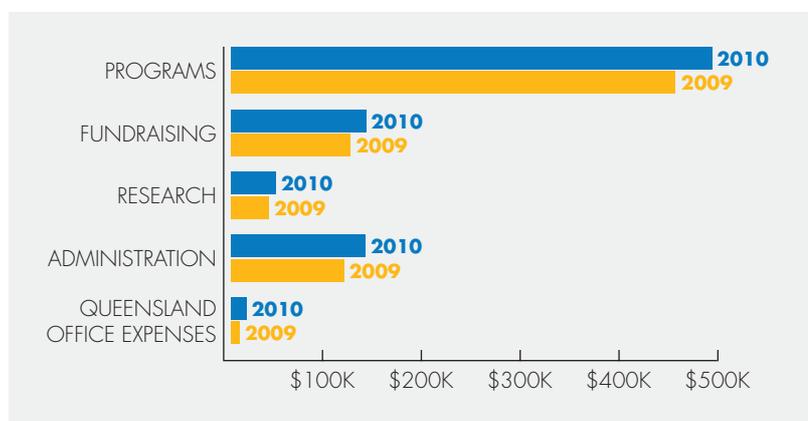
HOW THE FUNDS WERE GENERATED



HOW THE FUNDS WERE GENERATED

| | 2010 \$ | 2009 \$ |
|---------------------------|----------------|----------------|
| Membership Fees | 135,768 | 97,121 |
| Donations | 324,718 | 378,869 |
| Sponsorship | 71,309 | 224,500 |
| Trusts & Foundations | 2,020 | 2,410 |
| Donated Good and Services | - | 28,129 |
| Other | 43,427 | 108,699 |
| Funds Received | 577,242 | 839,728 |

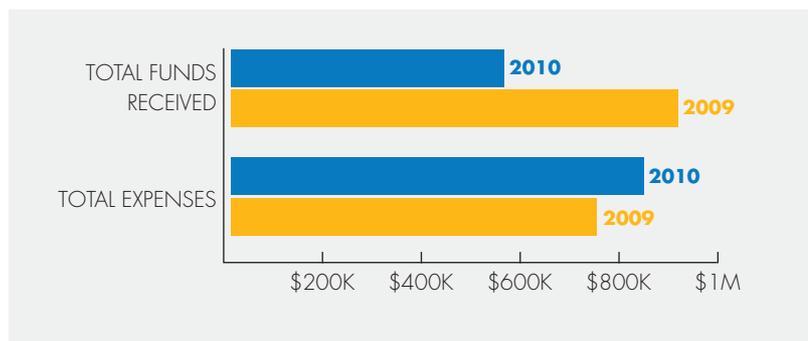
HOW THE FUNDS WERE SPENT



HOW THE FUNDS WERE SPENT

| | 2010 \$ | 2009 \$ |
|----------------------------|----------------|----------------|
| Programs | 496,981 | 454,474 |
| Fundraising | 143,149 | 129,457 |
| Research | 51,658 | 46,646 |
| Administration | 142,738 | 118,465 |
| Queensland office expenses | 15,809 | 8,572 |
| Total Expenses | 850,333 | 757,614 |

EXPENSES AND FUNDS RECEIVED



| | | |
|--|------------------|---------------|
| SURPLUS/(DEFICIT) FOR YEAR FROM OPERATIONS | (273,091) | 82,114 |
| Transfer of funds from ACCAQ | - | 74,876 |
| Realized gain & Impairment loss 1(f), 2 | (18,515) | (98,884) |
| SURPLUS/(DEFICIT) AFTER IMPAIRMENT ASSETS | (291,606) | 58,106 |

BALANCE SHEET

AS AT JUNE 2010-10-20

| | 2010 \$ | 2009 \$ |
|----------------------------------|----------------|------------------|
| ASSETS | | |
| Current Assets | | |
| Cash Assets | 113,055 | 292,122 |
| Prepayments | 2,852 | 1,220 |
| Receivables | 31,411 | 37,127 |
| Bonds/Deposits | 24,490 | 8,090 |
| Total Current Assets | 171,808 | 338,559 |
| Non-Current Assets | | |
| Investments | 569,307 | 736,866 |
| Office Equipment | 37,741 | 20,076 |
| Total Non-Current Assets | 607,048 | 756,942 |
| TOTAL ASSETS | 778,856 | 1,095,501 |
| LIABILITIES | | |
| Current Liabilities | | |
| Payables and Accruals | 38,179 | 55,467 |
| Prepaid Memberships | 60,319 | 54,441 |
| Liabilities | 9,026 | 22,655 |
| Total Current Liabilities | 107,524 | 132,563 |
| TOTAL LIABILITIES | 107,524 | 132,563 |
| NET ASSETS | 671,332 | 962,938 |
| EQUITY | | |
| Retained Surpluses | 671,332 | 962,938 |
| NET EQUITY | 671,332 | 962,938 |

STATEMENT OF CASH FLOWS

FOR THE FINANCIAL YEAR ENDED JUNE 30 2010

| | 2010 \$ | 2009 \$ |
|---|------------------|-----------------|
| CASH FLOWS FROM OPERATING ACTIVITIES | | |
| Receipts from members | 141,646 | 125,197 |
| Receipts from donors and supporters | 398,047 | 610,287 |
| Interest received | 30,228 | 47,289 |
| Other income | 13,409 | 136,287 |
| Payments to suppliers and employees | (884,405) | (645,602) |
| Net cash provided by/ (used in) operating activities | (301,075) | 273,458 |
| CASH FLOWS FROM INVESTING ACTIVITIES | | |
| Payment for property, plant and equipment | 26,825 | (8,581) |
| Net cash provided by/ (used in) investing activities | (148,833) | (62,614) |
| Net cash provided by (used in) investing activities | (122,008) | (71,195) |
| Net (Decrease)/Increase in Cash Held | (179,067) | 202,263 |
| Cash at the beginning of the financial year | 292,122 | 89,859 |
| Cash at the end of the financial year | 113,055 | 292,122 |

THANK YOU TO OUR DONORS AND SUPPORTERS

CCA is extremely grateful to everyone who has generously supported our organisation by providing funding, goods and services, expertise or time.

CCA would particularly like to acknowledge all the medical and allied health professionals who have donated their time and expertise to speak at our forums and symposiums. Their contribution to our various publications is also gratefully received.

CCA would also like to thank all the volunteers who support us through their fundraising efforts and administrative assistance.

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“ I would love to keep coming to the camps because we had so much fun and met new people and found out how many other kids are just the same.”

Josie, 14



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