

2009 Annual Report of the Amputee Coalition of America

# Transformations

#### Our Mission:

To reach out to and empower people affected by limb loss to achieve their full potential through education, support and advocacy, and to promote limb loss prevention.

In June 2009, after more than 6 months of planning and seeking input, the Amputee Coalition's Board of Directors adopted a revised organizational mission statement to better reflect the needs of the limb loss community and the work of the organization, and to specifically include limb loss prevention. In a survey of Amputee Coalition members, almost 80 percent ranked raising limb loss prevention awareness, conducting limb loss prevention research and working to reduce limb loss as important or very important. This outcome finalized the Board of Directors' decision to include limb loss prevention in the organization's new mission.



#### Credits

Written/Compiled by Amputee Coalition of America Staff Edited by ACA Communications & Public Relations Department Designed by Patrick Alley

#### The ACA's Programs to Support the Mission

#### Advocacy

The ACA advocates for the rights of people with limb loss. This includes access to, and delivery of, information, quality care, appropriate devices, reimbursement, and the services required to lead empowered lives.

The ACA promotes full implementation of the Americans with Disabilities Act, and other legislation that guarantees full participation in society for all people, regardless of disability.

The ACA sensitizes professionals, the general public and policy makers to the issues, needs and concerns of amputees.

#### Support

The ACA's National Peer Network certifies people with limb loss to provide support and information for others who are just beginning the road to recovery.

The ACA toll-free call center provides answers and resources for people who have experienced the loss of a limb and those involved with their lives.

#### **Education**

The ACA publishes *inMotion*, a magazine that comprehensively addresses areas of interest and concern to amputees and those who care for and about them.

The ACA develops and distributes educational resources, booklets, videotapes, and fact sheets to enhance the knowledge and coping skills of people affected by amputation or congenital limb differences.

The ACA acts as a source of comprehensive information regarding amputation and rehabilitation through its National Limb Loss Information Center.

The ACA provides technical help, resources and training for local amputee educational and support organizations.

The ACA conducts programs for its members, professionals and the general public to educate them regarding the physical, emotional, technological, and other issues involving amputees.

#### Prevention

The ACA publishes articles about prevention in its resource publications.

The ACA reaches out to organizations to share educational materials about limb loss prevention with medical professionals and individuals who are at risk for limb loss.

The ACA distributes messages to the public to raise awareness about effective ways to prevent limb loss.

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# Message From the President & CEO and the Chairman of the Board







As both of us travel across the country meeting with members and partners, we are often privileged to hear stories from amputees and families that focus on something or someone from the ACA that impacted their lives. For some it was a peer visitor or one of our Resource Center specialists who helped them through recovery and readjustment. For others it was our National Conference, our Paddy Rossbach Youth Camp or a staff member who ignited a passion they are still following. For still others it was in Motion magazine or participation in advocacy efforts to pass prosthetic and orthotic parity.

Through these personal testimonials, we continue to learn how the ACA is transforming lives and how these transformations reverberate in the limb loss communities. There is no doubt about it. The ACA makes a difference in and enriches the lives of amputees and their families. That's why we are here.

We've learned transformations come in all sizes. We witnessed many powerful transformations among our members in 2009. We hope you will read the profiles and stories with an appreciation that the people featured here are regular people who've been sparked into action because of their experiences. Their infectious passion and courage inspired us, and we know you will see yourself in them.

Take, for instance, Lorenzo Smith's mother, Albertha, who said the hardest day in her life was the day she told her son he couldn't have a leg. Their insurance company had put unfair restrictions on prosthetics – but no longer. Lorenzo and Albertha did something that transformed not only their lives, but the lives of all amputees in Maryland. Then there is Jordan Thomas, an amazing young amputee who started his own foundation to provide prosthetic care to children whose parents can't afford it. Through his determination and vision he is transforming lives, and his efforts earned him a spot among the amazing people nominated as a 2009 CNN Hero. Marshall J. Cohen's transformation happened 100 feet up in the air on a zip line ropes course at the ACA youth camp. His experience forever changed him and our camp. Dr. Christina Skoski's determination to transform her own life through higher education led to her passion to transform the lives of other college-bound amputees by creating a scholarship through the ACA to ease the burden of college expenses.

As rewarding and reinforcing as these personal testimonials can be, they also offer us a challenge: How do we multiply the transformative effect, increasing the number of amputees and families we serve, while offering every person affected by limb loss/difference even greater opportunities to transform their own lives and lives they will touch?

Last year our major initiative was developing a 5-year strategic plan – our 2015 Plan – so we could work that impact. Over the next 5 years, we will implement this plan, which puts us on a path for more transformations that will lead to reaching more amputees and providing deeper, more enriching services and programs to our members and relationships with our partners.

The ACA has made positive progress in 2009, thanks in most part to the incredible members and donors who support us. With this annual report, we invite you to reflect on transformations, great and small, with the ACA and with your own life. And we invite you to look forward to 2010 and all the growth we are sure to see as these transformations become contagious.

David McGill
Chairman of the Board

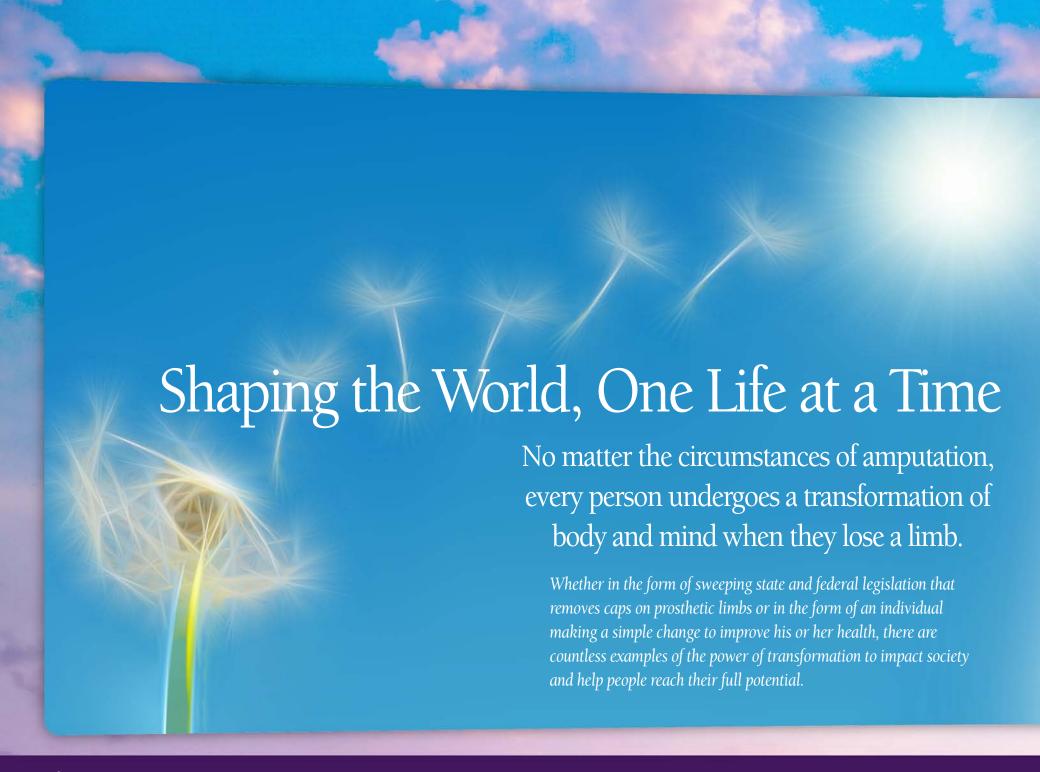
Kendra Calhoun President & CEO

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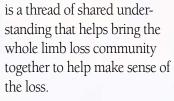


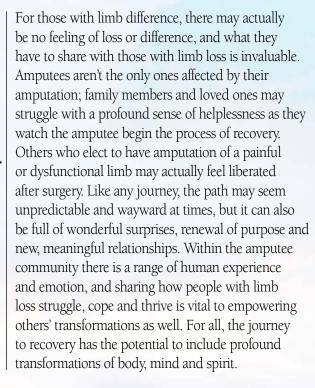


The Amputee Coalition of America applauds everyone who is working toward transforming their own lives and the lives of anyone living with limb loss. The ACA believes in *The Power of One, Community of Many* because it represents the potential for every individual in our community – people with limb loss, their friends, family members and caregivers – to contribute to the positive social, educational and legislative transformations that will strengthen the entire limb loss community.

No matter the circumstances of amputation, every person undergoes a transformation of body and mind when they lose a limb. The six phases of recovery model teaches that healing begins with grief in the wake of losing a limb or multiple limbs, and – with patience and perseverance – may extend to a full and healthy recovery. The six phases are enduring, suffering,

reckoning, reconciling, normalizing and thriving, but not everyone will reach all stages. For some, different phases will surely be visited over again. This is why, for many, recovery is described as a journey. While not every amputee experiences the loss in the same way, there





2009 also brought a number of important organizational transformations. The creation of the 2015 Strategic Plan was a watershed moment for the organization, which took many months of planning, discussing and listening to one another in an effort to create the boldest, yet most reasonable, roadmap for the organization to follow for the next 5 years. The end result is something that the entire limb loss community can be proud of, and it represents what is possible with dedicated, spirited supporters.

Stemming from that was an effort to better communicate all the exciting organization-wide developments, which led to the creation of several electronic newsletters to better inform our members; advocacy matters, CornerStone, Pebbles, and Bridges were created as a means to connect advocacy volunteers and supporters, membership body, donor base and network of volunteers and support group leaders with progress on our initiatives.

On the advocacy front, with help from all of the dedicated volunteers in the field, the ACA helped get prosthetic parity laws on the books in seven more states, for a total of 18. The ACA also partnered with the American Orthotic and Prosthetic Association (AOPA) to create new and compelling ads for the Arms and Legs Are Not a Luxury campaign. It was

also a busy year for volunteers, as the ACA formed 10 new committees with members serving the vital task of vocalizing the concerns and interests of community leaders to the ACA staff and leadership. The education work group was one such committee that helped the ACA reach a bold new decision for the national conference — one that is both financially responsible with your membership dollars and also allows for face-to-face interaction on a regular basis, which has been a staple of ACA educational programming for years.

The ACA has witnessed many powerful transformations among our members in 2009, and we hope you will read the profiles and stories contained in this annual report with an appreciation that the people featured here are regular people who've been sparked into action by a simple desire for change. We know that you will enjoy reading about the personal transformations of courage and strength from members like Mona Patel, Lorenzo Smith, Jordan Thomas, Marshall J. Cohen and Dr. Christina Skoski, and we hope that you will take these stories with you on your journey.

Individuals may choose different roles, but together, by sharing each other's triumphs and struggles, we can strengthen the narrative of what it means to live with limb loss in the U.S. today. It is the ACA's firm belief that the ripples of everyone's hard work will touch many

distant shores. Transformative events have the effect of encouraging reflection on our former selves. With this annual report, we invite you to reflect on the ACA's accomplishments in 2009 as well as everything you did to make this the strongest organization working for the limb loss community.

Amputees aren't the only ones affected by their amputation; family members and loved ones may struggle with a profound sense of helplessness as they watch the amputee begin the process of recovery.



In 2009, Amputee Coalition of America member Mona Patel spearheaded the successful effort to pass prosthetic and orthotic insurance parity legislation in Texas. She works tirelessly with the limb loss community in San Antonio, and she has served the ACA in a variety of roles. And if Patel has anything to say about it, the Amputee Coalition will offer more roles to others in the future.

"I want the ACA to become so visible in the medical community that every surgeon, every case manager, every discharge planner — everyone in the rehabilitation network — never forgets to put an amputee in touch with the ACA," she says. "I envision this because the ACA encompasses this invaluable network of information, support and education that can truly make a difference in the positive outcomes for amputees who otherwise may be at a loss."

Her journey to this position of supporting and advocating on behalf of people with limb loss already has seen many milestones of outreach and assistance to the limb loss community.

Patel, 37, holds a Bachelor's degree in Behavioral Science and Master's in both Psychology and Social Work. A Licensed Clinical Social Worker, she works with MK Prosthetics & Orthotic Services in San Antonio. She is married and has two daughters. In 1990, while still a college student, Patel was struck by a drunk driver, which severely injured her right leg. Attempts to salvage her leg led to multiple surgeries spanning several years. In 1997, she elected to have her leg amputated below the knee. Since then, she has worked diligently to help people facing limb loss make the transition and adjust to their new circumstances, sometimes speaking to them just hours before they undergo surgery. Patel says it is essential for amputees to remember that a missing limb does not define who they are.

"I strive to give new amputees a strong basis of support and understanding," she explains. "As they slowly but surely regain their mental strength and faith in themselves to persevere, they begin to trust me and my words."

Patel calls this the beauty and the power of peer support.

"I simply and gently help them plant a seed of hope," she says. "I support them through their journey and watch them grow and realize strengths they sometimes never believed they possessed. I am forever grateful to the ACA for allowing me the gift and the avenues to be able give back to others with limb loss."

When those she works with express their gratitude, Patel says she simply asks them to one day "pay it forward," because this is what she believes the human spirit should be about.

She helped start the Amputees Believing, Living & Excelling (ABLE) support group in San Antonio while in her master's program, and she is still the leader of this active group, whose meetings attract 20-40 amputees and their families each month.

"It is an amazingly beautiful network we have begun here in San Antonio, and I am so proud and so blessed to be a part of it," she says. Looking for information on how to start a support group led Patel to the ACA. "We talked to them and asked how to start a support group, and they sent me literature and that was my first contact with them," explains Patel. "And I have been with the ACA ever since. They gave me the confidence to continue to grow my support group."

Patel subsequently became an ACA-certified peer visitor, served as an ACA regional representative, and she has served on various ACA panels, including the Volunteer Task Force and the Government Relations Committee. In 2009, she worked with the ACA to lead the successful effort to pass the Texas Prosthetic and Orthotic Insurance Parity legislation. Patel downplays her own expertise in politicking, attributing the success of the advocacy efforts to the energy of the volunteers working for the legislation.

"We networked like I've never networked before," she says. "Being a novice to the political arena, I asked lots and lots of questions about the process and meanings of various terminologies. It was a very tiring, yet very exciting few months."

One thing Patel knows how to do well is pull people together, and that was her task in this effort, she says. "I strongly believe in positive energy, and I and all the advocates focused on this," she says. "We were very organized and united and successfully completed the task."

Patel says the experience gave her more confidence in her ability to lead – a quality she will no doubt put to good use in future endeavors with the ACA.

"Ongoing legislative advocacy is crucial, and, of course, I will do my part to improve the livelihood of those with limb loss," Patel explains. "But my heart is on the front lines, working with new amputees, helping them feel normal again, while they begin their journey to physical and emotional recovery."

Patel reiterates her conviction that the ACA must attain such strong recognition in the medical communities that they never forget to connect their patients with limb loss to the ACA. By doing so, the ACA will be able to touch the lives of many more amputees, so they are equipped with the support and knowledge to succeed and continue to follow their dreams despite their limb loss.

"The ACA has been and will continue to be instrumental in reminding and reassuring amputees that their lives can be full of great opportunities and potential," says Patel.

"I strive to give new amputees a strong basis of support and understanding."

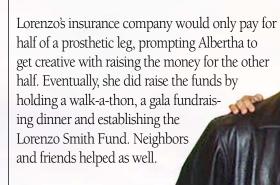
## Mother-son Team Helps Pass Prosthetic Parity

Maryland Governor Martin O'Malley signed the prosthetic parity act on May 7, 2009, making Maryland the 15th state to enact prosthetic parity. Like many other states that have enacted prosthetic parity, it came down to the dedication and persistence of grassroots volunteers who built awareness and visibility for the issue and ultimately who were motivated to speak out to their legislators and share their struggles.

Among the Maryland residents who fought successfully for prosthetic parity is Lorenzo Smith, whose right leg was amputated when he was 12 years old. Lorenzo's mother, Albertha Jackson-Smith, remembers the tragic experience of having to tell her son that the family could not afford a prosthesis. Lorenzo, who had already endured 16 operations and subsequent amputations after a car struck him while playing with his friends after school, had been

looking forward to getting a prosthetic leg and moving on with life. The news that he would not be able to get back to walking, running and being a normal active kid again was devastating to him. "I will never forget the extreme dismay my child suffered when I told him the leg was not an option for us," says his mother.

Now, thanks to their efforts to pass prosthetic parity, others who may have had the same struggles they did will receive fair and consistent coverage for their prosthetic devices.



Lorenzo Smith (left) and his mom, Albertha Jackson-Smith (right), with the lead House sponsor, Delegate Heather Mizeur. (center) "The main business is not to see what lies dimly at a distance but to do what lies clearly at hand."





## 2015 Strategic Plan Summary

In 2009, the Amputee Coalition of America sought to answer one fundamental question: How can we most effectively use our resources to positively interact with and improve the lives of people living with limb loss and help raise awareness about limb loss in general? The answer came about through months of strategic planning and discussions about the ACA's goals and mission impact. The ACA emerged with a stronger mission statement that now includes prevention and a road map called the 2015 Strategic Plan that will be used to guide the organization for the next 5 years.

We are embarking upon an exciting journey into the future. We are projecting 10 years out with our vision statement and planning in 5-year increments – thus, the 2015 Plan, and in 5 years, a 2020 Plan. We have, however, defined our destination within the parameters of four strategic pillars that support our mission and our vision. Our new vision describes our dreams, hopes and ambitions for the Amputee Coalition. By 2020, we will be nationally recognized

as the premier organization for people affected by limb loss and as a leader in limb loss prevention.

We will focus our resources on four key strategic pillars, or key aims, that show promise for advancing our mission. Our pursuit of these key

aims builds on the Amputee Coalition's strengths and seizes the unique opportunity that we have to make a significant and permanent inroad to help amputees reach their full potential and to reduce limb loss.

AWARENESS: The vast majority of those affected by limb loss will know of the Amputee Coalition and understand the value of being a part of the Amputee Coalition community because of educational, social networking, philanthropic and outreach programs that are easily accessible to them through the Amputee Coalition.

IMPACT: Amputee Coalition-led collaborations, programs, relationship-building and strategic alliances among nonprofit, commercial and governmental organizations will create changes in healthcare delivery that ensure all amputee patients and their

families in the U.S. have access to and receive quality care, support and information for both pre- and postlimb loss.

MEMBER SERVICES: The Amputee Coalition will provide meaningful services and programs

that make lifelong membership in the Amputee Coalition desirable to amputees across America.

SUSTAINABILITY: Amputee Coalition-led collaborations and strategic alliances among nonprofit, commercial and governmental organizations will increase funding for the full spectrum of our services – with the aim of increasing knowledge applicable to creating a vibrant, healthy limb loss community and robust limb loss prevention initiatives.

We have identified five core values that will direct all our work, our people and our organizational attitude. These values provide common ground for the implementation of our four strategic pillars.

- Excellence Integrity Encouragement
- Respect Service

2015 Strategic Plan Summary

#### The Power of One, Community of Many Reflected in New Committee Structure

Each time the ACA implements a new program or creates a new resource, it is with the intention of reaching more amputees or addressing an area of need in the lives of everyone with limb loss. Over the years, the ACA has solicited ideas, interpreted feedback and implemented changes from a diverse membership base. But in 2009, the ACA took amputee inclusion in the organization a step further by instituting a committee structure to ensure that amputees from a broad spectrum of backgrounds and viewpoints always have strong voices within the organization. More than at any other time in its history, the Amputee Coalition of America is truly an organization created for amputees by amputees.

The 47 volunteers serving on the committees, 30 of whom are amputees, are not just lending important insights, but performing hard work. Each of the following 10 committees has a charter and a set meeting time, as well as deadlines to mark progress toward strategic goals. The path to 2015 will be paved with countless hours of precious volunteer time provided by the following essential committees:

Brand Work Group Development Education Work Group Finance Government Relations Limb Loss Task Force Membership
Nominating
Upper Limb Loss Advisory
Council
Volunteer Task Force

The ACA started as a grassroots organization, and the institution of committees comprised of amputees and professionals helps the ACA maintain a connection with the amputee community. Jack Richmond, who participated in the Education Work Group responsible for guiding the conference decision, states, "The ACA not only hears but also cares what participants are saying. This has created an environment where the ACA can reach out and grow in the direction that will ensure the maximum benefit for all."

Tom Coakley, co-chair of the Volunteer Task Force, sees committees as critical to the strength and growth of the ACA in three different ways. "First, the committees harness the creative idea-generating and problem-solving expertise of many folks with a multitude of talents and a singular passion," says Coakley. "Second, committees improve on the sense of organizational transparency and allow more members to feel a share of organizational ownership. Third, committees give back to participants an important feeling of personal accomplishment and self-worth."



There is no doubt that the committees are mutually beneficial to the ACA as an organization and to the membership body. The committees, which are comprised of amputees and professionals, help the organization keep its finger on the pulse of the community, and the participants are able to get an intimate perspective of how their ideas impact the membership. The general sense from participants is that the committee structure is revitalizing the ACA from the ground up. "I personally believe the membership at large should have an improved sense of participation as a result of the committee structure," says Dennis Strickland, who serves on the Membership Committee.

Phil Tamoush, who serves on the Volunteer Task Force, says that being on a committee has helped him feel that his opinions and perspective are integral to the organization. "The staff has made me (and each of us on the committee) believe that we are serving a valuable purpose," he says.

## The ACA's Educational Programs Changing to Meet the Needs of a Growing Community

In June 2009, the ACA Board of Directors approved a 5-year strategic plan that included an objective to expand ACA educational programming to make it sustainable and more accessible and meaningful to its constituents. This objective included increasing the number of amputees and families participating in educational offerings and increasing ACA member satisfaction with its education programs.

Because we believe that the ACA can be most effective when we seek amputees' perspectives in everything that we do, in October 2009 we convened an Education Work Group (EWG) with a wide representation from the limb loss community. The EWG was made up of amputee participants from around the country, including those with upper-, lower- and bilateral limb loss, prosthetic and non-prosthetic users, long-time and sporadic conference attendees, vendor representatives, a physician, ACA board members and representation from various ACA committees.

The EWG met for 2 days to discuss current programs and debate the best processes to expand vital education



to more amputees while keeping the program financially sustainable. The discussion was serious, passionate and intelligent. At the end of the 2 days the group did not come to a full consensus but did develop thoughtful and meaningful consideration for the staff to use as they

discussed the future of the national conference and other educational programming.

While the ACA Board of Directors had the responsibility of voting for the plan for our educational program, the voices of many amputees helped forge the recommendation that was made to the board. The approved plan includes:

- The Amputee Coalition of America will host a 3-day national conference in fall 2010.
- In 2011, the ACA will host a national celebration of its 25th Anniversary, which will include educational programming.

- In 2012, the ACA will begin hosting a national conference every other year, with 2012 being the first "off year."
- In 2010 and beyond, the ACA will begin the development of other types of educational programming to reach larger numbers of amputees and for distribution in the "off-year" program schedule.
- In 2012, the ACA will pilot-test some of these new forms of education, including regional educational events, webinars, podcasts, etc.

This slate of educational programming is more robust and will more effectively reach a larger number of amputees and build greater awareness of ACA programs and services. We hope you share our aim of reaching more amputees and that you will continue to support the ACA in our efforts to positively impact the lives of all amputees. Additionally, we hope that you will support our vision for developing innovative educational programming that meets the needs of the growing number of people living with limb loss or limb difference.

#### 2009 COMMITTEES

#### **BRAND WORK GROUP**

Lisa Arbogast

Rose Bissonnette

Rick Bowers (ACA)

Michael Burton

Kendra Calhoun (ACA)

Pat Chelf (Chair)

Marshall J. Cohen

Kim Doolan

Vicki Foster (ACA)

Jamey French

David Fuller

Kim Phillips (ACA)

#### DEVELOPMENT

Art Bassin

Kendra Calhoun (ACA)

Pat Chelf

Marshall J. Cohen (Chair)

Pat Isenberg (ACA)

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Doug Doty, MD

Leslie Duncan (ACA)

Patty Friend

Rich Friend

Jim Haag

Karilyn Klipple (ACA)

Dave McGill, Esq.

Joan McIntosh (Discussion Facilitator)

Jack Richmond

Terry Sheehan, MD

Kathy Spozio

Dennis Strickland

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Kendra Calhoun (ACA)

Pat Isenberg (ACA)

Dave McGill, Esq.

Rick Myers

#### **GOVERNMENT RELATIONS**

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Kendra Calhoun (ACA)

Marshall J. Cohen

Aaron Holm

Jeff Lutz

Marifran Mattson

Dave McGill, Esq.

Tim Moran

Mona Patel

Terry Sheehan, MD

Brian Thiel

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Pat Isenberg (ACA)

Terry Sheehan, MD (Chair)

Charlie Steele

Steve Wegener, PhD, ABPP

#### 2009 COMMITTEES

#### **MEMBERSHIP**

Kendra Calhoun (ACA)

Shari Caradonna

Don Davis

Vicki Foster (ACA)

Mike Goins (ACA)

Cathy McVay

Kathy Spozio (Co-Chair)

Charlie Steele (Co-Chair)

Dennis Strickland

John Vacca

#### **NOMINATING**

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Jack Farley

Dave McGill, Esq.

Rick Myers

Brad Ruhl

Kathy Spozio

Peter Thomas

#### UPPER LIMB LOSS ADVISORY COUNCIL

(ULLAC)

Randy Alley, BSc, CP, CFT, FAAOP

Kim Doolan

Doug Doty, MD (Chair)

Jim Haag

Sean McHugh

Ruth Morris, LMSW

Jim Myers (ACA)

David Rotter, CPO

Shawn Swanson, OTR/L

#### **VOLUNTEER TASKFORCE**

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Robin Burton

Chris Casteel

Pat Chelf

Tom Coakley (Co-Chair)

Don Davis

Vicki Foster (ACA)

Dan Ignaszewski (ACA)

Pat Isenberg (Co-Chair, ACA)

Sheila MacDonald (ACA)

Mona Patel

Jeremiah Pérez

Sherri Samuels

Kathy Spozio

Phil Tamoush





## Resource Center Update

inMotion, a multiple-award-winning magazine, has a current readership of more than 160,000 each issue. Normally published six times per year, a special issue on employment was added in 2009. Other electronic and print publications are targeted to specific audiences, such as older adults, multicultural groups, children and people with diabetes.

The National Peer Network includes over 300 registered support groups and more than 1,200 civilian and military certified peer visitors. The ACA national conference, which began in 1994 with fewer than 100 attendees, drew more than 840 attendees in 2009.

The ACA Web site had 453,603 visits in 2009 compared with 121,268 in 2008, a 274 percent increase. In 2009 the Web site had 343,577 unique visitors and in 2008 it had 95,550, a 260 percent increase. As more and more people made this Web site their source for information about limb loss, a redesign was scheduled to accommodate the growing traffic. The redesign was launched in 2008 and will continue into 2010.

Additional achievements and activities of the Resource Center in 2009 include:

• The three most popular information packets disseminated to callers in 2009 were the publication First Step – A Guide for Adapting to Limb Loss, the general information packet for new amputees and funding information.

Methods that the Resource Center uses to disseminate limb loss information include the publication of fact sheets, the revision of articles into an Easy Read format (an 8th-grade reading level or lower), and the translation of articles into Spanish.

- Fact sheets accessed through the Web in 2009 numbered 69,602, up from 49,041 in 2008.
- Easy Read articles accessed through the Web in 2008 totaled 37,331. In 2008 the total was 43,548.

- The total number of Spanish translation pages disseminated in 2009 was 92,676. In 2008 the total was 106,937.
- More than 112 limb loss-related books and videos were added to the library, with special focus on children's books, rehabilitation and assistive technology.



## The ACA's National Conference Connects Amputees With Resources, Education and Support

The ACA's 2009 National Conference had another highly successful year with 841 attendees who gathered for an informative 4 days, with family and friends galore. The conference offered a total of 61 sessions and special events. Again, the ACA partnered with the Children's Hospital of Atlanta to bring a parent/child track, giving families of children with limb loss/difference a chance to learn, network, share and play. This program was again rated very highly and the conference overall received exceedingly high marks on attendee evaluations, with 94 percent of respondents reporting that they were satisfied or very satisfied.

One of the many highlights of the conference is the technology and service exposition. In fact, the opportunity to interact with exhibitors is one of the most highly rated reasons people give for attending the conference. In 2009, 53 companies were represented among the 71 exhibit booths displaying products and information, including the latest in assistive devices and prosthetic technology. Ten of the leading manufacturers in the prosthetic industry offered technology seminars focused on specific components. Participants also spent time at the nonprofit booths learning more about local and national services to enhance their lives and assist in their reintegration into their community.





# Growing Stronger Every Year Amputee Coalition of America's Paddy Rossbach Youth

Camp Strengthens Youth

The Amputee Coalition of America Youth Camp was designated as the Amputee Coalition of America's Paddy Rossbach Youth Camp in its 10th year (2009). In 2009, 50 campers from 21 different states and Australia joined staff and volunteer counselors for the challenging 5-day program. The camp was held for the second year in a row at the Joy Outdoor Education Center in Clarksville, Ohio, which was selected to enable the ACA to accommodate more campers without turning any youths away. Since its beginning, the camp has hosted more than 500 campers with limb loss or limb difference from 42 states and three countries and has worked with more than 115 volunteers to mentor youth campers. Leadership training is provided for 17-year-old campers to prepare them to be future camp counselors and leaders in their schools and communities. The youth camp experience is filled with a variety of activities designed for fun, learning and building self-esteem. One example is the fully accessible ropes course, where every child can set his or her own personal level of challenge. Though campers are sometimes hesitant to participate in such events at first, they often overcome their hesitation and learn that they can do more than they ever expected.

> "Camp gives me confidence that I do not feel any other place or time."





Campers Annie Garafolo and Alexandra Streb

One such camper, Alexandra Streb, was born without her right hand. She has attended the ACA camp since 2006 and has had many valuable experiences as a result. "Camp was the first place where I met another amputee," says Alexandra. In 2009 Alexandra sang karaoke for the first time at the ACA Camp Idol event, a singing competition based on the popular TV series, *American Idol*. "I would not have been able to sing in front of such a large group without being surrounded by friends I made at camp," she says. "Camp gives me confidence that I do not feel any other place or time. It is a place where I can feel free to be who I am and not hide my limb difference."

Other camp activities include:

• Fishing

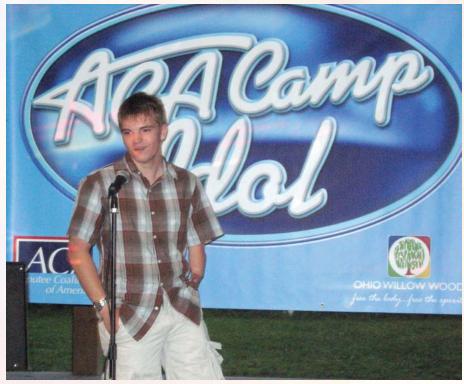
• Tennis

- Canoeing
- Swimming

• Archery

- Basketball
- Team field sports
- Educational programs.

In addition to feeling better about themselves because of the camp experience, evaluations indicate that the majority of campers plan to exercise more, eat healthier foods, become more engaged in sports and learn about leadership.



Beau LaFave sings in the ACA Camp Idol competition

Beau LaFave was born with congenital limb differences. He is an above-knee amputee and has a shortened left arm. Beau's experiences as a camper motivated him to attend camp as one of 2009's Leaders-in-Training. The Leaders-in-Training program is designed to give 17-year-old campers some leadership skills by asking them to take on more responsibility at camp and to be a positive role model for others. In the future, these Leaders-in-Training can return as camp counselors. "I was excited to be able to learn what being a leader is all about," says Beau. "Camp has helped me feel more confident in who I am, and I look forward to the opportunity to give back as a leader and future camp counselor."

## Peer Visitor Program and Support Groups Help Amputees in All Phases of Recovery

By the end of 2009, the ACA had trained and certified nearly 1,100 volunteers to provide personalized peer support, including military peer visitors and family peer visitors. Though professionals cannot be certified unless they themselves are amputees, they frequently attend the trainings to learn more about the program.

In August 2009, the ACA continued providing online recertification training to update peer visitors on program changes and to reemphasize important aspects of effective communication. The training is flexible enough to accommodate peer visitors who do not have ready computer and Internet access. A strong support system is an essential element to a complete recovery from a traumatic experience, such as limb loss. Support groups

can be an invaluable resource, offering opportunities to connect with others who have been through a similar experience and who are further down the road toward an ideal adjustment. They provide a safe, supportive environment for discussing and practicing new coping strategies to help members get there.

While not every community is fortunate enough to have an amputee support group, the ACA strives to help seed new groups at every opportunity. In 2009, 110 support group startup packets were sent out. The ACA also provided consultations with support group leaders by phone and held a Support Group Leaders Workshop in June at the ACA National Conference.





# Transformative Relationships

Together We Can Do More



## Jordan Thomas Is Making a Difference

Jordan Thomas has found a way to make a difference in the limb loss community. In 2005, the 16-year-old teenager from Chattanooga, Tennessee, and his family were on their annual boating trip in the Florida Keys. Jordan jumped off the boat to go scuba diving, but the boat's wake sucked him into the propellers. In an instant, both his legs below the knees were gone.

His parents, both doctors, staunched his wounds and rushed him to a hospital. Eventually, he was fitted with computerized prostheses that allowed him to return to some of the sports he loves best – golfing and fishing. However, while in the hospital, Jordan saw younger children whose parents could not afford expensive prostheses. He also learned that many insurance companies cap the amount they will pay for prostheses at amounts far too low to allow the purchase of even one prosthesis, much less the many replacements required for growing children.

Jordan was determined to do something about this inequity. He started a foundation, the Jordan Thomas Foundation, to raise money through bracelet sales, donations and an annual golf tournament to purchase prostheses for children who otherwise could not afford them. To date, Jordan has raised more than \$500,000 and has helped several children acquire prostheses. The foundation has committed to helping these children until they are 18. This is important because children will need several different prostheses as they grow.

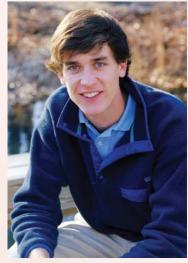


Photo by Lane Taylor Photography

"The gratitude and joy you feel when giving kids the ability to lead happy and successful lives is indescribable," says Jordan. "Unfortunately, it took something like my accident to realize the joy you feel in helping others, but because of that, I wouldn't change anything that has happened to me because of that newfound appreciation."

Recently, Jordan has been working with the Amputee Coalition, visiting legislators in Washington, D.C., to advocate for a national prosthetic and orthotic insurance parity law. The law would require insurance companies to offer coverage for prosthetic and orthotic devices and components at a level comparable to coverage for other medical and surgical devices and services.

"It's imperative that we get parity," Jordan says. "A lot of insurance companies don't realize that prostheses are not a luxury – they are imperative for getting kids back to a functional level, giving them the ability to get back to leading happy and successful lives. The more we can nail that point home, the more they will recognize

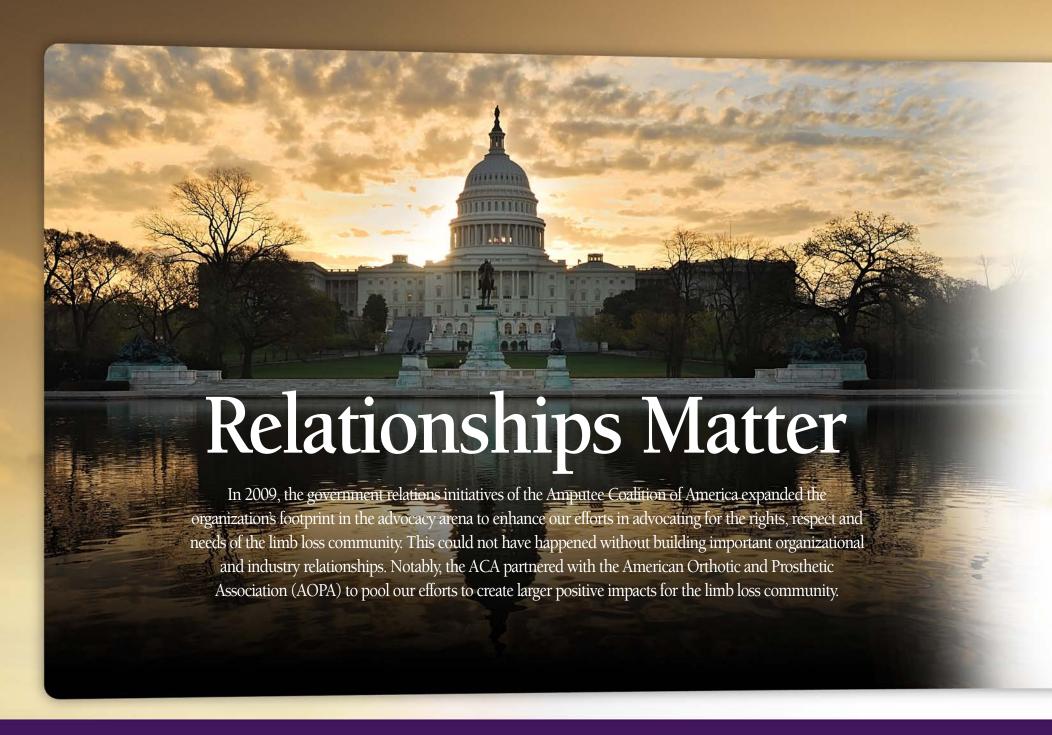
that point. We'll see where that comes down with the national healthcare reform, but I'm going to fight for it until something gets done."

In 2009, Jordan won the Courage Center's highest honor, the 2009 National Courage Award, presented annually to honor an individual who has made a significant contribution to the health, welfare, rehabilitation or awareness of people with disabilities. He was also named one of CNN's Top Ten Heroes of 2009 for his work with his foundation, assisting children obtain prostheses. The

publicity surrounding this honor often helps recipients further their cause. Jordan was also awarded the Outstanding Youth in Philanthropy Award, Ages 18-23, by the Association of Fundraising Professionals (AFP).

Through his work with his foundation and with the ACA, Jordan Thomas is making a difference for amputees everywhere.

"The gratitude and joy you feel when giving kids the ability to lead happy and successful lives is indescribable."



#### "To live the American Dream, arms and legs are not a luxury."

With this partnership, the Amputee Coalition of America worked to introduce the Prosthetic and Custom Orthotic Parity Act in the United States House of Representatives, (HR 2575). This bill would be an important step to ensure prosthetics and customized orthotics are included in all insurance plans, and would make fair insurance access to these devices a reality.

With our strong focus on prosthetic parity, it's important to note that another seven states passed prosthetic parity at the state level, bringing our total at the end of 2009 to 18 states that have enacted prosthetic parity (Arkansas, California, Colorado, Illinois, Indiana, Iowa, Louisiana, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, Oregon, Rhode Island, Texas, Vermont and Virginia). With the persistent effort of advocates working in their communities to bring about these important changes, the Amputee Coalition will continue to focus on these laws, and make sure fair insurance access to prosthetic devices is a reality in all 50 states. To help support advocates at the state level, the Amputee Coalition developed a plan in 2009 to implement a pilot program in 2010 called the Amputee Action Network. This program will be piloted in 10 states in 2010, and would ultimately lead to having a lead advocate in all 50 states.

These relationship have been important for the limb loss community, and we will continue these relationships moving forward because of the positive impact we've been able to have speaking with legislators and expanding our messaging. During the healthcare reform debate, this relationship took center stage as we partnered with AOPA on several national advertisements including a full-page ad in TIME magazine that featured President Obama

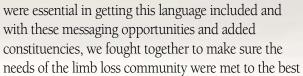
hugging Tammy Duckworth, a double amputee veteran from the Iraq war with the words "To live the American Dream, arms and legs are not a luxury." This ad received national attention and would not have been possible



We Make Great Americans

without these new partnerships. In addition, there were advertisement banners put in airports and bus terminals throughout the Washington, D.C., area that depicted the Lincoln Memorial with a prosthetic leg.

These powerful advertisements showed the importance of providing access to prosthetic care, and helped us have meaningful conversations with legislators that resulted in the healthcare reform package including the key words "rehabilitative and habilitative services." and devices" in the basic benefits set. With the number of organizations with different items that wanted to be included in healthcare reform, this was a big win. These organizational relationships



of our ability in the reform. Although it isn't exactly what we wanted, it moves us in the right direction.

In addition to building relationships to advance prosthetic and orthotic parity, and our work on healthcare reform, the Amputee Coalition has also expanded its involvement and interaction with federal legislators, and in 2009 we

began the process of establishing a national Limb Loss Awareness Month. The Limb Loss Awareness Month would allow the ACA and members of the limb loss community a chance to focus on education, support, prevention and advocacy. This would provide an opportunity to speak to both the limb loss community and broader community and would have a positive impact for everyone.

The ACA has also recognized the need to address travel issues that people with limb loss or limb difference face, and the need for something to be done to not only protect our skies, but also the rights and privacy of amputees. The Amputee Coalition is working with the Transportation Security



Administration (TSA) to ensure people with limb loss who travel are treated with dignity and respect, and that policies are appropriate, effective, and consistent from airport to airport. We will continue our work to identify and find a solution to these issues in 2010.

Prior to 2009, the primary focus had been on ensuring fair access to

insurance coverage for prosthetic devices (also known as prosthetic parity), with a limited involvement in other initiatives. While prosthetic parity is still a primary focus at the state and federal levels, 2009 was a year that we began planning and shifting our efforts to take more proactive roles in shaping other policy initiatives that affect the limb loss community. The Amputee Coalition of America's government relations department and advocacy initiatives continue to grow, and we look forward to continuing to expand and advance our partnerships with AOPA and other organizations to be certain our messages are reaching influential people and decision-makers, and to ensure the needs of the limb loss community are met.

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## The Power of One, Community of Many Helps Advance Legislative Goals

The Power of One is an important concept — one person can do many things to improve the quality of life for themselves and others around them. But the Community of Many is how we can enact broad sweeping changes, particularly in legislation. The Amputee Coalition has ambitious legislative goals, not just because it should, but because it can. With a strong membership body, the amputee community speaks with one voice to seek changes that will improve the lives of many.

#### 2009 LEGISLATIVE GOALS

#### **Advance Parity Legislation**

To address this goal, the Coalition supports:

- Requiring private health insurers to provide parity in coverage for prosthetic care
- Availability of prosthetic devices for all amputees, so parents are not forced into financial hardship to obtain appropriate prosthetic care for their children
- Continued grassroots efforts at the state and federal levels calling for lawmakers to support legislation that

creates a consistent standard of insurance coverage with adequate benefits to allow amputees to lead active lives.

#### Protect Funding of Critical Coalition Programs

To address this goal, the Coalition:

- Supports the continuation of the Centers for Disease Control and Prevention (CDC) appropriation for the Coalition's National Limb Loss Information Center, which also supports the Coalition's peer visitor program and national conference
- Calls on lawmakers to maintain funding of programs aimed at providing support and educational resources to amputees.

#### **Increase and Enhance Access to Care in Public Health Programs**

To address this goal, the Coalition:

- Calls on lawmakers to promote policies and regulations that ensure access to care in government health programs
- Works with coalitions to address these issues through administrative and legislative channels.

#### Medicare

• 2-Year Waiting Period: Unlike older Americans, who typically enroll and become eligible for Medicare coverage within months of turning 65, beneficiaries with

disabilities must wait 2 years before their coverage takes effect.

- "In Home" Restriction: Medicare only provides coverage for mobility devices that are necessary for use inside a beneficiary's home. It will not provide an assistive device if the beneficiary needs it to return to work or participate in activities such as church or school. The Amputee Coalition will help support efforts like the Medicare Independent Living Act of 2007 (HR 1809), which eliminates the "in the home" restriction on mobility devices.
- DME (Durable Medical Equipment)

Competitive Bidding: The Amputee Coalition was part of a grassroots initiative around the 2008 Medicare law, competitive bidding, and its possible implications on orthotic and prosthetic benefits. There was a temporary resolution that allows the Centers for Medicare and Medicaid Services 18 months to reevaluate the various proposals. Using its coalition membership and relationships with key partners, the Amputee Coalition will continue to monitor this process to ensure that orthotic and prosthetic benefits are not compromised.

#### Medicaid

• State Prosthetic Benefit Levels: The Amputee Coalition worked with the North Carolina campaign committee to update the state's Medicaid regulations. Their state program was paying for most prosthetic items once a year for ages 0 to 20 and once every 3 years for ages 21 and older. The new proposed policy changes will pay for prosthetic items once every 6 months regardless of age.

The Amputee Coalition will also work to conduct research into the benefit levels and restrictions on coverage in state Medicaid programs, with an eye toward developing campaigns in targeted states to push for increased coverage.

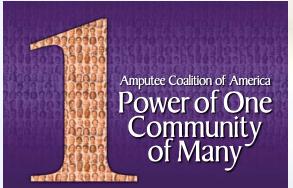
#### **Protect Access to Transportation**

To address this goal, the Coalition:

• Calls on state and federal agencies to work to ensure that people with limb loss have equal access to transportation.

Transportation Security Administration (TSA): While the Amputee Coalition appreciates the opportunities it has had in the past to participate in discussions regarding best practices for TSA regulations concerning people with disabilities, the Coalition feels that much still needs to be done in developing strategies that balance the security needs of the general population with the privacy rights and need for transportation access of people with limb loss. In addition to overall policy development, the Amputee Coalition will also

look to engage in conversations regarding the training of personnel and consistent enforcement of regulations. The Amputee Coalition will strive to meet these goals through administrative and regulatory means.



**Public Transportation:** The Americans with Disabilities Act (ADA) was enacted to prevent discrimination against people with disabilities in areas of employment, public services and public transportation, public accommodations, and telecommunications. A series of Supreme Court decisions narrowed who is covered by the ADA. The ADA Amendments Act (S. 3406) was passed in 2008 to restore and expand the definition of disability and make it easier for workers to prove discrimination.

The Amputee Coalition will work with partners to monitor the rulemaking and enforcement of the expanded protections offered under the new law with a particular emphasis on access to public transportation.

**Disabled Parking Permits:** The regulations regarding the application and renewal process for disabled parking permits and their distribution are very inconsistent. People with limb loss are regularly put through a grueling renewal process despite a proven, ongoing need for the permit. Also, some states only allow one permit

per person. This poses a significant obstacle to travel since people may need to use their permit to access disabled parking areas but will also need to use the permit once they have reached their destination. The Amputee Coalition is exploring the use of administrative contacts within state governments to improve and standardize the permit procedures.

To meet the immediate needs of its members who use permits, the Amputee Coalition will begin this effort by targeting the states that have a limit of one permit per individual. After the first 6 months, the Coalition will evaluate the first phase of this effort to assess its strategies and success.

#### Influence the National Debate on Healthcare

To address this goal, the Coalition:

- Works to include access to specialized care, such as the provision of prosthetic devices, in the national dialogue on the need for comprehensive access to quality, affordable healthcare
- Coordinates with our coalition partners and key allies to ensure that the specific treatment and rehabilitation needs of people with limb loss are included in the policy discussions around healthcare reform.



ACA Board Member Becomes a Pebble in the Pond to Raise Funds and Awareness for Camp

Marshall J. Cohen had recently been named Chairman of the Development Committee before his first visit to the Amputee Coalition of America's Paddy Rossbach Youth Camp. Intellectually, he understood that the camp would be a "heart-tugging" theme for a development campaign, but he did not yet realize the emotional pull that the camp would have on him personally. "That 24-hour exposure to the camp completely transformed my personal emotional investment in the mission of the ACA and my understanding of the importance and immediate impact that the development program can have on the lives of amputee youth," says Marshall.

As someone who lived with a limb difference from birth until his amputation at age 63, Cohen understood the importance of bringing kids together with similar physical challenges. "My parents tried to mainstream my childhood, and by and large that was successful, including 7 or 8 years in regular athletic camps, but I was always a 'class of one' in those settings," he says. "Seeing these kids at the ACA Youth Camp with all sorts of limb differences and limb loss, engaged in physical challenges that they could not have imagined themselves doing, as well as experiencing complete acceptance by their peers – this all had personal significance for me as I reflected on my own experiences."

Cohen wants to reassure parents of children with limb loss and limb difference who are contemplating sending their child away to this camp for the first time – which may also be their first time at *any* camp. "This camp will give your child a deep understanding that they are neither alone nor unique in their physical condition," he says. "There are pathways to fulfillment, both emotionally and physically – whatever their physical difference – and they have the power to discover those pathways for themselves."

Cohen's passion for the youth camp resulted in his hosting the inaugural Pebble Party to raise money for camp. His event also was the stage for Paddy Rossbach, former ACA president & CEO, to receive an honor for her work with youths and for the unveiling of the camp's new name. His party raised an impressive \$60,000!

"It has been very gratifying to see several of the attendees at my Pebble Party become serious supporters of the ACA," he says. "Some of them will even give Pebble Parties of their own and others will join in committees of the board of the ACA and thereby strengthen their commitment."

Now that Cohen has the fever for raising awareness and funding for the camp, he set a goal of doubling the number of campers from 50 in 2009 to 100 in 2010. "Now, one of my personal goals is to increase not only the number of campers, but to increase the number of camps and other areas of youth programming sponsored by the ACA," he says. "By bringing more programs to local communities, the greater our impact will be on the lives of youths with limb loss and limb difference, on their acceptance in their communities and on our success in raising the money required to support these activities."

ACA Medical Advisory Committee Member Inspired to Establish a Scholarship for Youth with

In 2009 the Amputee Coalition of America announced the establishment of the Christina Skoski, M.D., Scholarship Fund. The fund was designed to award one scholarship per year to a student with limb loss who has a special desire to learn, exhibits potential for success and plans to attend a 4-year college. The scholarship fund was initially endowed with \$25,000 from Christina Skoski, M. D., with an award amount of \$1,000. The ACA hopes to see both the endowment and the amount of each scholarship grow in the future. "I've had a wonderful career, which afforded me a fulfilling, successful and interesting life," says Dr. Skoski. "I hope this scholarship will encourage young amputees to set high goals and pursue their dreams, whatever their interests."

Limb Loss

### "I believe that higher education is the key to security and independence in the real world, particularly for a young person with limb loss."

The 2009 recipient was Susannah Engdahl, a straight-A student who was born missing portions of both feet and arms. "I was honored to be the first recipient of the Christina Skoski, M.D., Scholarship," she said. "It was particularly helpful for me as a first-year student because it allowed me to focus on adjusting to college-level academics without also having to worry about money." Engdahl received recognition for her achievement at the ACA 2009 National Conference.

Dr. Skoski's generous donation reflects her strong conviction that limb loss should not be a barrier to academic or professional success. As a sophomore in high school, Dr. Skoski became a hemipelvectomy amputee as a result of sarcoma. Ten years later, she received her medical degree and practiced as an anesthesiologist for 30 years. Today, Dr. Skoski, a longtime member of the ACA and its Medical Advisory Committee, is a staunch advocate of higher education as a way for amputees to gain greater self-sufficiency, overcome life's obstacles, and advance causes for people living with limb loss.

"I believe that higher education is the key to security and independence in the real world, particularly for a young person with limb loss," says Dr. Skoski. Dr. Skoski, who was inspired to set up the scholarship as part of her legacy, would like to see the fund grow through donations and matching gifts. "Long after I'm gone, I would like to see it grow and I hope that others will contribute to the scholarship so that there will be more funds available," she says. "This way we can help more young people and increase the amounts awarded to each student in the future."

Dr. Skoski recognizes that while there are many opportunities for amputee youths to participate in sports these days, academic achievements are often overlooked. "Sports are fun, but how many athletes, amputee or able-bodied, can make a living?" she asks. "In my opinion, getting an education remains the surest ticket to success in the world." She also hopes to see more professional role models come forward for young amputees to emulate.

"Education has given me my independence and security, not to mention a healthy dose of self-esteem," notes Dr. Skoski. "It was very important for me not to be dependent on what others thought I could or could not do." Dr. Skoski's passion for education and the principles of self-determination are creating ripples of awareness for the importance of people with limb loss to be integrated in aspects of society.

"Education has given me my independence and security, not to mention a healthy dose of self-esteem."

"It was very important for me not to be dependent on what others thought I could or could not do."

\$25,000-\$100,000

Otto Bock Healthcare, Inc.

\$10,000-\$24,999

Marshall J. Cohen, Cohen & Perfetto LLP

De Loris Krieger

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\$1,000-\$9,999

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One Step at a Time Redd Owens, Roll Giving

Bruce Pfaff

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Richard Potvin Steven Rabinowitz

Nutan Ravani, Marlton Rehabilitation

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We recognize the following national sponsors whose commitment and generosity helps the Amputee Coalition of America reach out to an increasing number of the nearly 2 million people in the U.S. living with limb loss and limb difference. Sponsorships help the ACA fulfill its mission of providing education about limb loss and limb loss prevention through excellent resources, support for amputees and their families through structured programs and events, and to continue to have an ambitious advocacy agenda.

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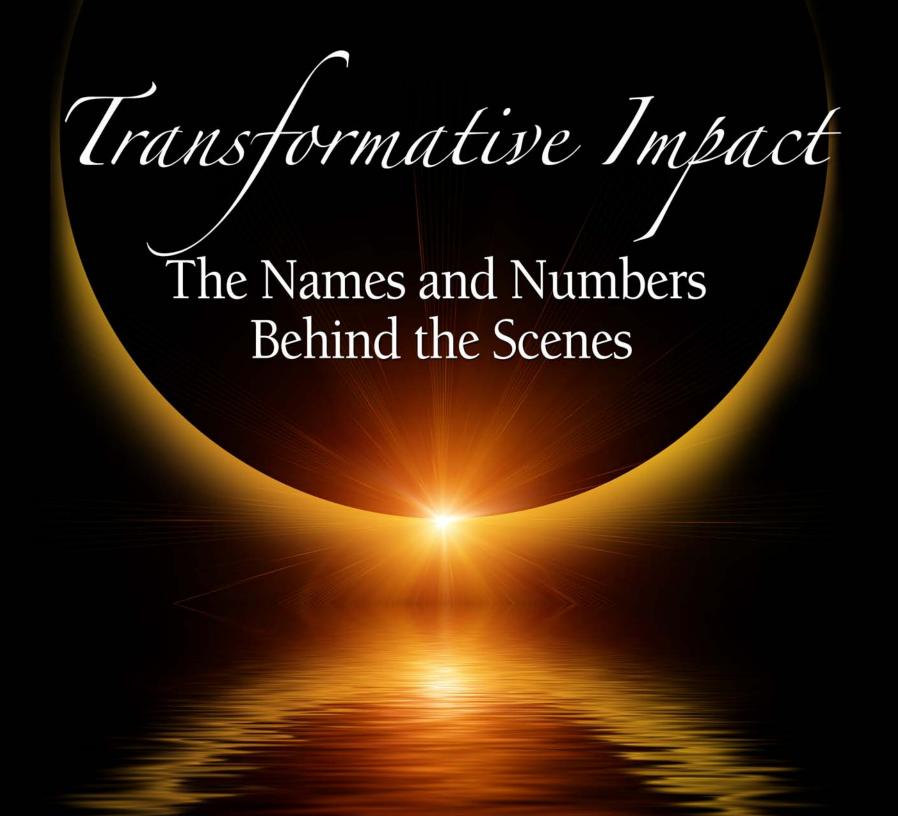
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# Mission Impact

The Amputee Coalition of America (ACA) is a nonprofit organization and the national leader in developing and disseminating limb loss information, including information on best practices in clinical improvement and care management. In 2009, the ACA analyzed the effect of our various outreach initiatives and documented the following impact:



#### **Lives Benefited**

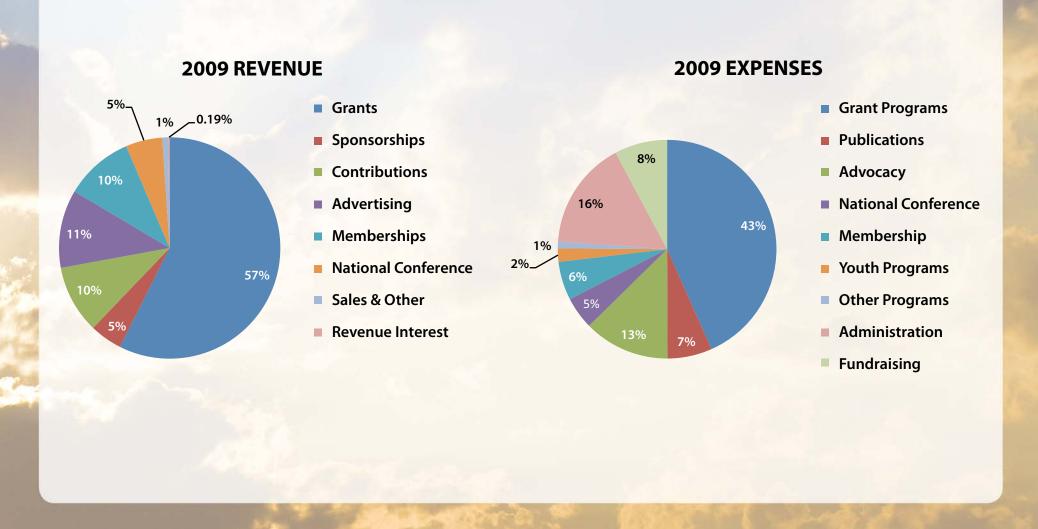
Number of ACA-Certified Peer Visitors Trained	.168
Number of Peer Visits Reported	.3,457
Fact Sheets Distributed	.91,587
Web Site Visits	.453, 603
Unique Web Site Visitors	.346,056
National Conference Attendance	.841
Support Groups	.309
Youth Campers	.50

#### **Community Outreach**

#### The People of the Amputee Coalition of America

Board Members	11
Total Employees.	26
Medical Advisory Committee Members	

# Financial Summary



## Statement of Financial Position

	December 31			
		2009		2008
Assets				
Current assets:				
Cash	\$	800,521	\$	754,188
Accounts receivable		53,951		20,365
Contributions receivable		17,680		33,051
Grants receivable		142,166		216,590
Other current assets		7,756		3,332
Total current assets		1,022,074		1,027,526
Property and equipment:				
Equipment and furniture		350,811		347,625
Leasehold improvements		11,937		11,937
Less accumulated depreciation		(332,747)		(323,404)
Net property and equipment		30,001		36,158
Total assets	\$	1,052,075	\$	1,063,684
Liabilities and net assets				
Current liabilities:				
Accounts payable	\$	28,208	\$	78,559
Accrued expenses		100,646		82,613
Current portion of deferred membership revenues		144,019		126,181
Other deferred revenue		4,011		<u>- 10-</u>
Total current liabilities		276,884		287,353
Non-current liabilities:				
Deferred membership revenues, net of current portion		1,240		21,800
Deferred rent		61,642		40,409
Total non-current liabilities		62,882		62,209
Total liabilities		339,766		349,562
Net assets:				
Unrestricted		575,218		606,490
Temporarily restricted		137,091		107,632
Total net assets		712,309		714,122
Total liabilities and net assets	\$	1,052,075	\$	1,063,684

## Statement of Activities

	Year er	Year ended December 31, 2008				
		Temporarily	Temporarily			
	Unrestricted	Restricted	Total	Unrestricted	Restricted	Total
Support and revenues:						
Grants	\$ 1,629,733	\$ - \$	1,629,733	\$ 1,869,041	\$ -	\$ 1,869,041
Sponsorship contributions	134,049	-	134,049	67,342	- 1- 1 <del>-</del>	67,342
Contributions	219,280	63,510	282,790	146,639	74,581	221,220
Publication advertising	323,445	-	323,445	376,172	-	376,172
Memberships	285,353		285,353	248,940	-	248,940
Educational material sales	24,686		24,686	14,507	<u> </u>	14,507
National conference	152,065	- 1	152,065	158,328	<u> </u>	158,328
Interest income	5,513		5,513	22,823	_	22,823
Other income	135		135	11,600	-	11,600
In-kind revenue	58,973		58,973	4,440	<u> </u>	4,440
Net assets released from restrictions	34,051	(34,051)		71,000	(71,000)	-
Total support and revenues	2,867,283	29,459	2,896,742	2,990,832	3,581	2,994,413
Expenses:						
Program services	2,181,914		2,181,914	2,235,390	-	2,235,390
Management and general	458,027		458,027	588,071	-	588,071
Fundraising	258,614		258,614	285,159	<u> </u>	285,159
Total expenses	2,898,555	-	2,898,555	3,108,620	-	3,108,620
Change in net assets	(31,272)	29,459	(1,813)	(117,788)	3,581	(114,207)
Net assets at beginning of year	606,490	107,632	714,122	724,278	104,051	828,329
Net assets at end of year	\$ 575,218	\$ 137,091 \$	712,309	\$ 606,490	\$ 107,632	\$ 714,122

# Statement of Functional Expenses

		Year ended December 31, 2009			Year ended December 31, 2008				
	Program	Management			Program	Management			
	Services	and General	Fundraising	Totals	Services	and General	Fundraising	Totals	
Salaries	\$ 980,825	\$ 79,048	\$ 94,733	\$ 1,154,606	\$ 931,972	\$ 57,273	\$ 121,443 \$	5 1,110,688	
Fringe benefits	380,219	31,071	36,680	447,970	352,326	21,652	45,911	419,889	
Commissions	10,904	-	-	10,904	505	-		505	
Communications	26,890	6,078	3,830	36,798	22,363	8,145	3,181	33,689	
Contractual costs	317,921	66,026	40,153	424,100	341,508	244,566	70,731	656,805	
Depreciation		9,343		9,343	-	9,289	-	9,289	
Educational resources	7,539		- 1-4	7,539	17,705	-	-	17,705	
Insurance	-	11,558	-	11,558	-	12,305	-	12,305	
Minor capital costs	10,828	7,287		18,115	9,638	6,426		16,064	
Postage	80,006	2,041	1,927	83,974	123,803	(11,893)	5,258	117,168	
Printing	109,549	15	9,695	119,259	124,967	-	8,523	133,490	
Rent	619	164,137	-	164,756	25,144	167,867	4,562	197,573	
Repairs and maintenance	-	13,675	-	13,675	-	7,656		7,656	
Supplies	67,035	7,664	15,787	90,486	55,037	4,926	8,077	68,040	
Travel	157,945	22,978	16,336	197,259	221,349	24,987	7,955	254,291	
Utilities		19,609	II	19,609		20,926	-	20,926	
Other	10,975	15,508	3,148	29,631	9,073	13,946	5,078	28,097	
In-Kind Expense	20,659	1,989	36,325	58,973		<u>-</u>	4,440	4,440	
Totals	\$ 2,181,914	\$ 458,027	\$ 258,614	\$ 2,898,555	\$ 2,235,390	\$ 588,071	\$ 285,159	3,108,620	

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