

Speaker Presentation Guidelines

ADI 2012 will feature a networked presentation submission system. The tips below will help ensure that little, if any, editing will need to be done on-site, allowing you to quickly review your presentation and then attend other meetings in progress. The tips below are for both Windows and MAC users. As all the provided computers will be PCs, MAC users should additionally review *Considerations for MAC Users* at the end of this section.

Key Points

- Presenters **MUST** submit their final presentation content to the Speaker Preview Room (Room 6, Capital Suite, ICC, ExCel) at least 4 hours prior to their session time.
- All presentations will be played on PowerPoint 2010 or Acrobat Reader 10 for PC
- Only video codec's and fonts as detailed below will be supported
- PowerPoint for MAC files should be tested on a PC before attending the event
- Keynote for MAC will not be accepted, it must be exported to PowerPoint
- There will be no internet connectivity in the *Speaker Preview Room* or in session rooms

Building your presentation

Movies: Please take steps to compress your videos. Uncompressed videos will take longer to upload and will not be better quality than a modern MPEG-4 codec. We can only accept movies created as **MPGs, WMVs**, or with the following **AVI** codecs: **MPEG-4** (Divx, Xvid, or WMVs), **Indeo, Cinepack, Techsmith. Flash** content (**FLV**) is fully supported.

Apple Quicktime formats such as **MOV, QT, MP4, or DV** files are **NOT** supported in Windows PowerPoint. Options to convert these movies to a Windows compatible AVI are discussed below in *Considerations for MAC Users*.

DVDs: If you plan to play a DVD as part of your presentation, please notify a technician in the Speaker Ready Room so arrangements can be made for assistance in your meeting room.

Fonts: We only support fonts that are included with Office 2003/2007. If you need a specialized font, it should be embedded into your PowerPoint presentation. For instructions on this process, please click on the following link:
<http://support.microsoft.com/kb/826832/en-uk>

Backup

Please bring a copy of your presentation along with you. Copy your PowerPoint and all movies to a folder on a USB or CD-ROM. PowerPoint does **NOT** embed movies. They must all be placed in the same folder as your PowerPoint. It is good practice to keep a second copy in your luggage.

Presenting

Speaker Preview Room (Room 6, Capital Suite, ICC, ExCel)

Presenters should present their final presentation in the *Speaker Preview Room* no later than 4 hours prior to their scheduled presentation. The *Speaker Preview Room* will be staffed with technicians that can assist with any compatibility or formatting issues.

Hours of Operation:	Opens	Closes
Wednesday 7 March 2012	12:00	21:00
Thursday 8 March 2012	08:00	18:00
Friday 9 March 2012	08:00	18:00
Saturday 10 March 2012	08:30	14:00

Session Meeting Room:

Please arrive at your session meeting room at least 15 minutes before the start of your session. Take time to familiarize yourself with the setup at the lectern.

Speak directly into the microphone in a normal voice, and do not handle the microphone while speaking. By following the guidelines above, your presentation will go smoothly.

Should you have any questions not addressed in this document, please feel free to email adi2012@mci-group.com

Considerations for MAC users

Pictures: If you use a version of PowerPoint prior to 2008, please be sure any embedded pictures are not TIFF format. These images will not show up in Windows PowerPoint. With PowerPoint 2008 for the MAC, this is no longer an issue, and any inserted image will be compatible.

Movies: Quicktime Pro 7 can natively export MOV, DV, QT, or MP4 files as Cinepack codec AVI files. While the resulting file is Windows compatible, there are add on products to Quicktime that will give a better results. Divx offers a plug-in for Quicktime 7 Pro that will convert all Quicktime movie formats to Windows compatible divx AVI files. It is available at the following website.

<http://www.divx.com/en/products/software/mac/divx-pro>

If you cannot convert the files or have a considerable number of files, please check with a technician in the Speaker Preview Room who can make arrangements to convert the videos, or at the Association's discretion, confirm you will be allowed to present off your own laptop.

Keynote: Keynote will not be accepted since it cannot be played back on PC. Please export your presentation as PowerPoint.

Notes for presenters

Statistics

Worldwide prevalence of dementia – On World Alzheimer's Day 2009, Alzheimer's Disease International (ADI) launched the World Alzheimer Report 2009, which provided the most up to date figures on the global prevalence of dementia. In 2010 there were an estimated 35.6 million people worldwide living with dementia. This number is estimated to almost double every 20 years, to 65.7 million in 2030 and 115.4 million in 2050. More information can be found at www.alz.co.uk/research/worldreport

Worldwide cost of dementia – On World Alzheimer's Day 2010, ADI launched the World Alzheimer Report 2010, which provided the most up to date figures on the worldwide cost of dementia. The total estimated worldwide costs of dementia were US\$604 billion in 2010 and will exceed 1% of global gross domestic product (GDP) in 2010. More information can be found at www.alz.co.uk/research/worldreport

Canadian economic and social costs of dementia – In 2009, the Alzheimer Society of Canada launched the report "Rising tide: Impact of dementia on Canadian society" that provided the most up to date figures on the incidence, prevalence and economic burden of dementia for Canada. In 2008 there were an estimated 480,600 people with dementia in Canada rising to 1,125,200 in 2038. In 2008 an estimated 231 million hours of informal care was provided annually for people with dementia in Canada, rising to 756 million hours in 2038. The economic burden of dementia in Canada was an estimated C\$15 billion in 2008 and rising to C\$153 billion in 2038. More information can be found at www.alzheimer.ca/english/rising_tide/rising_tide.htm

Person-centred language

Language used to describe Alzheimer's and related diseases has historically been largely negative. Person centred language helps tackle the fear and stigma surrounding Alzheimer's and related diseases, in effect, making the disease one that people are more likely to acknowledge and discuss. ADI requests that all presenters are mindful of the mixed audience they will be addressing and asks that as far as possible the following terms are used:

People with dementia (or name the specific type) – this term should be used rather than demented, dementing, victims, sufferers, cases or patients. Patient should only be used within the medical profession.

Effects of caregiving / providing care – these terms should be used rather than Caregiver burden / Burden of caregiving as this implies that caregiving is always a burden.

Home support workers – this term should be used rather than Homemakers as the individuals may do more than household tasks

Day centre(s) / Programmes – this term should be used rather than Adult Day Care Centre(s) / Day Care as this is more appropriate for children's services than adults'.

Organisations

Alzheimer's Disease International (ADI) www.alz.co.uk

Alzheimer's Disease International (ADI) is the international federation of more than 76 national Alzheimer associations around the world. ADI was founded in 1984 to help establish and strengthen Alzheimer associations throughout the world, through the exchange of information, skills and models of best practice. ADI wants to improve the quality of life for people with dementia and their families and to raise global awareness about Alzheimer's disease and all other causes of dementia.

Alzheimer's Society www.alzheimers.org.uk

Alzheimer's Society is a membership organisation, which works to improve the quality of life of people affected by dementia in England, Wales and Northern Ireland. Many of our 25,000 members have personal experience of dementia as carers, health professionals or people with dementia themselves, and their experiences help to inform our work.

Through campaigning and lobbying we strive to influence government policies and raise awareness of the challenges faced by people with dementia and the people who care for them. And through our research programme we work to improve the knowledge we have about dementia and its treatment – and pursuing the ultimate goal of finding a cure.