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Dear Friends and Colleagues,

I am delighted to share the first annual public report of the Global Brain Health Institute (GBHI).

This report is compiled as the Atlantic Fellows for Equity in Brain Health program completed training of our third cohort of fellows, now totaling 85 leaders from 29 countries. We recently welcomed our fourth cohort that includes 32 new leaders who broaden our geographic spread to seven new countries, including Bermuda, Chile, Ethiopia and Kenya.

This report chronicles a highly engaged and increasingly networked group of fellows whose collaborative efforts through art, medicine, research, education, and advocacy are making a global impact.

You will read of our growing efforts to reduce the impact of dementia worldwide, with examples of exciting new developments in Latin America, the Mediterranean, and the UK. You will also read about innovative pilot projects that fellows are running in their home communities. To date, more than 70 percent of Atlantic Fellows have returned to their communities to complete an activity aligned with our goals, providing stability for our fellows as they develop into regional leaders.

GBHI is increasingly recognized for our inter-professional approach, for our focus on brain health rather than disease, for championing the vulnerable, and for lifelong career support of our fellows. We remain committed to invest in regions beyond the US and Ireland, where our founding sites are based. We continue to share our deepest gratitude to our community members and supporters for providing us with the resources needed to truly change society around brain health.

Now, I’m thrilled to share with you the efforts of our community. I hope you will enjoy reading about them.

Victor Valcour, MD, PhD
Professor of Geriatric Medicine, UCSF Department of Neurology
Executive Director, Global Brain Health Institute
About GBHI

The Global Brain Health Institute (GBHI) is dedicated to protecting the world’s aging populations from threats to brain health.

Dementia is rapidly increasing around the world. By 2050, the number of people with dementia could triple from 50 million to 152 million, overwhelming families, communities, public health care systems, and economies worldwide.

In 2015, the Atlantic Philanthropies offered significant funding to the University of California, San Francisco (UCSF) and Trinity College Dublin, the University of Dublin (Trinity) to establish GBHI, a groundbreaking initiative that aims to tackle the looming dementia epidemic and improve brain health worldwide.

GBHI works to reduce the scale and impact of dementia in three ways: by training and connecting the next generation of leaders in brain health through the Atlantic Fellows for Equity in Brain Health program; by collaborating in expanding preventions and interventions; and by sharing knowledge and engaging in advocacy.

GBHI brings together a powerful mix of disciplines, professions, backgrounds, skill sets, perspectives, and approaches to develop new solutions. We strive to improve brain health for populations across the world, reaching into local communities and across our global network. We focus on working compassionately with people in vulnerable and underserved populations to improve outcomes and promote dignity for all.
The Atlantic Fellows for Equity in Brain Health

The Atlantic Fellows for Equity in Brain Health program at GBHI provides innovative training, networking, and support to emerging leaders focused on improving brain health and reducing the impact of dementia worldwide. It is one of seven global Atlantic Fellows programs to advance fairer, healthier, and more inclusive societies.

Atlantic Fellows at GBHI join the program for 12 months and have a base at UCSF or Trinity. A curriculum covering economics, epidemiology, law and ethics, leadership, neurology, public policy, and statistics constitutes part of the experience. Fellows also gain experiences in the clinic, engage in projects aimed at advancing brain health, and have opportunities to work with individuals with cognitive disorders. Through intensive mentoring, fellows are guided in the development of projects, careers, leadership, and policy efforts.

After training, we expect fellows to return to their home community to implement a project using newly acquired knowledge and expertise. They continue to have access to career-duration mentoring, pilot funds, and an international network of colleagues.

The Atlantic Fellows program at GBHI will train hundreds of global leaders over the next 15 years in the US, Ireland, and across the world to promote brain health and dementia prevention, to reduce stigma, and to alleviate suffering. GBHI is dedicated to training at least 50% of fellows who come from regions outside the US and Ireland. The fellows come from many different professional backgrounds including clinical practice, social sciences, arts, economics, public health, research, policy and education.
EFFECTS TO FIGHT DEMENTIA
IN LATIN AMERICA TAKE HOLD

“If we really want to make change, we have to go beyond borders,” says Agustín Ibáñez, PhD, an Atlantic Fellow at GBHI and neuroscientist from Argentina.

Countries in Latin America and the Caribbean (LAC)—where a third of the population lives in poverty, combined with one of the world’s fastest growing elderly populations—are experiencing growing rates of dementia faster than most of the world. Like dementia in developing countries worldwide, cases in LAC are expected to triple by 2050. This rise will bring great challenges for care, diagnosis, and prevention.

Since its founding, GBHI has invested major efforts to address the dementia epidemic in LAC. In the Atlantic Fellows for Equity in Brain Health program, a third of the fellows are from this region. As designed, new leaders of brain health are starting to emerge to deliver positive change to brain health in LAC.

In 2018, Ibáñez helped to launch the Latin America and Caribbean Consortium on Dementia (LAC-CD), a regional organization overseeing and promoting clinical and research activities on dementia. The budding group focuses on building networks across LAC to support collaborative training, research, and clinical practice.

The LAC-CD achieved significant attention in 2018, including an award from the Inter-American Development Bank (IDB) and a publication in Neurology. As a result, the network is growing. The consortium has recruited 100 members with many more expected.

“We have a huge opportunity to create a sense of membership, to share a common voice, and to empower local groups,” says Ibáñez. “We are reaching for a big dream.”

The dream of using literacy and education to improve dementia is driving Elisa Resende, MD, an Atlantic Fellow at GBHI and neurologist from Brazil. She is exploring how late life education and literacy programs may re-shape the brain to become more resilient.

In addition to poverty and limited health care, LAC sees high rates of dementia due to low literacy and education rates. For instance, 30 percent of older adults in Brazil are illiterate.

Resende hopes her work will show how adult literacy training can reduce the risk of dementia. In 2018, her efforts received major attention, including an award from the World Federation of Neurology and publications in JAMA Neurology, among others.

“If we can prove that the literacy program is going to prevent or reduce (dementia), it can be a prevention strategy, which is cheap,” says Resende. The continued efforts of the next generation of leaders in brain health appear to be well on the way to delivering positive change to brain health in LAC.
Examples of Impact and Collaboration in Latin America and Caribbean

Bárbara Costa Beber (Brazil) – Faculty position at Universidade Federal do Rio Grande do Sul (UFRGS)

Alejandra Guerrero Barragán (Colombia) – Publication in Colombian Neurological Association journal

Jorge Leon Salas (Costa Rica) – Publication in Age and Aging journal

Jorge J. Llibre-Guerra (Cuba) – World Federation of Neurology Grant

Elisa de Paula França Resende (Brazil) – World Federation of Neurology Grant

Maira Okada de Oliveira (Brazil) – Publication in Brazilian Journal of Psychiatry

Examples of GBHI Collaborative Networks in Latin America and Caribbean

Brazilian Brain Bank

Fellows Interest Group for Latin America and Caribbean

Latin American and Caribbean Consortium on Dementia (LAC-CD)

STRiDE, helping to link dementia resources across Latin America

Working Group on Low Literacy Populations for Brain Health Assessment

Photos: Alex Kornthumer, Atlantic Fellow
Regional stories

PROMOTING BRAIN HEALTH IN THE MEDITERRANEAN

Upon returning to Egypt after completing medical training, Mohamed Salama, MD, a toxicologist, recognized a large gap between neuroscience research and its clinical practice.

“I believe dementia is a multidisciplinary problem,” says Salama, Atlantic Fellow at GBHI. “We need to have people of different backgrounds brainstorming to find new innovative solutions.”

Thus, he has devoted his efforts to bridging this gap. With support from the Ministry of Social Solidarity in Egypt, Salama hopes to develop a longitudinal study of 30,000 people over age 40 to consider physical, mental health, and cognitive measures and how they relate to social and economic data. The study, which he hopes to call AL-SEHA (“Health”), will include elements from an international set of longitudinal epidemiological studies, including the Irish Longitudinal Study on Ageing (TILDA) survey.

In a developing country like Egypt, many do not consider dementia a top health priority. It is often misunderstood as a sign of normal aging.

“Spreading awareness about dementia is an important first step,” says Hany Ibrahim, MD, PhD, Atlantic Fellow at GBHI and geriatrician from Egypt.

Perhaps the misinformation is related to the high proportion of youth. In a country of 98 million, only four percent (4 million) of its citizens are over 65 years old.

At Ain Shams University Geriatric Hospital in Cairo, Ibrahim is taking steps to help this problem. He has set up a laboratory for cognitive training for people with cognitive disorders.

“Older adults deserve dedicated efforts to preserve and enhance their mental and physical health,” says Ibrahim.

The lab is part of a new coordinated effort, the East Mediterranean Brain Health Initiative, which aims to improve access to brain health technologies across the underserved region. The initiative was co-founded by Ibrahim; Elaine Howard, MSc, Atlantic Fellow and Founder of Dementia Focus from Dublin, Ireland, who is helping to develop new dementia care models; and Stelios Zygouris, MSc, Atlantic Fellow and neuropsychologist from Thessaloniki, Greece, who is helping to create novel, enjoyable, and easy to use computerized tests that can detect early cognitive problems.

“New technologies can promote health equity and universal access to brain health,” says Zygouris.
“Spreading awareness about dementia is an important first step.”

–HANY IBRAHIM, MD, PHD, ATLANTIC FELLOW
IMPROVING END-OF-LIFE CARE IN THE UK, NORTH AMERICA, AND BEYOND

As a young physician in New York, Elizabeth Dzeng, MD, observed patients with dementia who were often subjected to unnecessary medical treatments, frequently suffering as a result.

“I felt a great deal of moral distress providing intensive care level treatment when it could not improve their condition,” says Dzeng. “I felt like I was not acting in their best interest.”

As an Atlantic Fellow at GBHI, Dzeng aims to understand why end-of-life care can result in patients with dementia receiving unnecessary treatments, and what can be done to reduce it. To this end, she is comparing dementia care in hospitals in the US, France and the UK.

So far, Dzeng’s research suggests that providers in the US tend to prioritize patient choice, while providers in the UK tend to prioritize treatment benefit. She hopes her work will highlight how the attitudes of medical professionals can be changed to empower people with dementia and their families to make the best choices.

Determining the best choices for the final stages of dementia can be difficult. Atlantic Fellow Corrina Grimes, MSc, who devotes her career to improving palliative care, recognizes this challenge. She co-leads the Northern Ireland Palliative Care in Partnership Program, whose aim is to design and support the delivery of connected services to improved quality of life at end of life.

“We need to ensure that everyone has the optimal end of life through palliative care,” says Grimes. “Particularly for those with advanced progressive conditions.”

Using a computer screening tool, Grimes is reviewing routine clinical data, including medical notes, to identify people in need of planning and care coordination. She has recruited dozens of medical practices across Northern Ireland to participate.

“We hope (our work) will help to alert general practitioners to the palliative needs of people with dementia,” says Grimes.

As a physician providing healthcare to older adults in her home country, Mexico, Brenda Pérez Cerpa, MD, noticed that comprehensive care of advanced-stage dementia patients was undervalued.

“Palliative care should be considered a fundamental part of the services and care offered to a patient living with dementia,” says Pérez Cerpa.
As an Atlantic Fellow, Pérez Cerpa is evaluating a tool for end-of-life care that could be used by families of individuals with advanced dementia. Set in Guadalajara, Mexico, the study could help families make challenging healthcare decisions at an early stage of dementia.

“Until a new breakthrough development is achieved, patients living with dementia unfortunately will progress to an advanced stage,” says Pérez Cerpa. “Supportive care is fundamental.”

In the US, Krista Harrison, PhD, Atlantic Fellow and Assistant Professor of Geriatrics at UCSF, recognized a lack of knowledge about individuals with advanced dementia who live at home.

“At home, it can be more difficult to access medical and social support,” says Harrison.

As an Atlantic Fellow, she is working to identify palliative care needs for individuals with prion diseases—a rare group of neurodegenerative diseases—and other dementias.

“Optimizing the quality of life for people with dementia living at home and their families requires evidence-based transformation of health systems and health policy,” she says.

To this end, Harrison is developing a palliative care toolkit using the input of caregivers. If successful, the study could develop guidance for palliative care for individuals with prion disease and possibly other dementias, worldwide.

PALLIATIVE CARE IN DEMENTIA

GBHI faculty members Georges Naasan, MD; Christine Ritchie, MD; and Krista Harrison, PhD, are leading a project to identify palliative care needs and end-of-life challenges for people living with dementia. Working with an interdisciplinary team including Atlantic Fellows, they aim to identify educational needs of health care providers, and to develop, test and evaluate a team-based palliative care intervention for people with dementia and their caregivers.

Georges Naasan, MD

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GBHI GATHERS BRAIN HEALTH SPECIALISTS TO FOCUS ON DEMENTIA IN SOUTH AMERICA AND BEYOND

In April 2019, GBHI co-hosted the Alzheimer’s Association International Conference (AAIC) Satellite Symposium in São Paulo, Brazil. The aim was to consider the latest ideas in dementia and the need to create a National Dementia Plan for Brazil, part of the WHO’s goal to make dementia a public health priority.

“In projects rooted in local communities, to national training initiatives and pan national networks, we want to equip leaders with tools to address dementia across Latin America and beyond,” says Lea Grinberg, MD, PhD, Executive Committee Member of GBHI and Associate Professor of Neurology and Pathology at UCSF. In addition to discussing the unique challenges dementia poses for Latin American countries, the AAIC Satellite Symposium considered a wide range of dementia-related topics, including sleep medicine, gender differences in dementia, and how to reduce stigma about dementia.

Atlantic Fellows Boon Lead Tee, MD, MSc, and Yue Leng, PhD, MPhil, won best posters for their respective projects, “Neurolinguistics Presentation of Chinese Speaking Primary Progressive Aphasia Individuals” and “Sleep Medication Use and Risk of Dementia in a Biracial Cohort of Older Adults.”

Brian Lawlor, MD, Deputy Executive Director of GBHI, says he is hopeful the gathering will emphasize the importance of a public health approach to dementia, and thus strengthen collaborations and innovations. “Together as an activated community, change can be delivered,” says Lawlor.
The three-day meeting featured contributions from Atlantic Fellows for Equity in Brain Health, including Maira Okada de Oliveira, MSc, who is working to improve diagnosis of dementia among illiterate groups in Brazil, and Bárbara Costa Beber, PhD, who strives to increase awareness of dementia among Brazil’s 40,000 speech and language therapists.
The pilot awards for Global Brain Health leaders

Supported by GBHI, the Alzheimer’s Association, and Alzheimer’s Society UK, the pilot program aims to support emerging leaders in brain health and dementia by funding small-scale pilot projects, activities and/or studies to advance skills, knowledge, and efforts to delay, prevent and/or mitigate the impact of dementia. As Atlantic Fellows return to their home communities, these pilot awards help them to achieve regional impact while maintaining a link to GBHI through mentoring.

Diversity of discipline/profession and region is key to our success. Funded pilots range from advocacy to systems change to applied research. Fellows are addressing challenges with access to care, stigma, social determinants of brain health and education, and more.

EARLY INDICATORS OF IMPACT

Brain Health Matters: Create Optimism and Understanding around Brain Health at School
Éléonore Bayen, MD, PhD, France

This is a creative initiative for children to raise awareness, improve knowledge, and promote better understanding of brain health and dementia prevention. Bayen created a public health campaign, “My Brain Robbie,” that provides free videos and educational materials to encourage healthy lifestyles to mitigate the risk of brain diseases. She piloted the project in 15 classrooms, with 450 children aged 7 to 11 years. The campaign has been well received, with tens of thousands of video views and engagement from the French Education Minister. Bayen is working to translate the materials into multiple languages for expanded dissemination.

The Cuban Dementia Study among Admixture Populations: A Longitudinal Study
Jorge J. Llibre Guerra, MD, MS, Cuba

This pilot aims to identify the effects of ancestry background on cognitive performance and dementia rates, and to determine the effects of genetics on the relation between ApoE (a protein implicated in Alzheimer’s disease), dementia and cognitive decline. Results from the study suggest that ethnic (black-white) disparities in dementia risk are better explained by socioeconomic differences than genetics. This research raises important issues to be addressed through policy recommendations for access to education and to health care. Llibre Guerra has been awarded funding by the World Federation of Neurology to continue his efforts to address dementia in Cuba.

<table>
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<th>Year</th>
<th>Awards Funded</th>
<th>Countries Represented</th>
<th>Total Funding</th>
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<tr>
<td>2017–2018</td>
<td>17</td>
<td>Brazil, Cuba, France, Greece, Ireland, Northern Ireland, Spain, and the USA</td>
<td>$447K</td>
</tr>
<tr>
<td>2018–2019</td>
<td>21</td>
<td>Brazil, Colombia, Cuba, Greece, Hong Kong, Ireland, Israel, Jordan, Mexico, Northern Ireland, Taiwan, Turkey, UK, and the USA</td>
<td>$522K</td>
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Pilot awards funded to date
<table>
<thead>
<tr>
<th>Title</th>
<th>Location</th>
<th>Awardee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Burden and correlates of cognitive performance in Syrian refugees in Jordan</td>
<td>USA/Jordan</td>
<td>Tala Al-Rousan</td>
</tr>
<tr>
<td>Multimodal Intergenerational Social Contact Intervention (MISCI)</td>
<td>USA</td>
<td>Phaedra Bell</td>
</tr>
<tr>
<td>Factors that contribute to burdensome end-of-life treatments in dementia</td>
<td>UK/USA</td>
<td>Elizabeth Dzeng</td>
</tr>
<tr>
<td>The efficacy of speed of processing training in mild cognitive impairment</td>
<td>Turkey</td>
<td>Derya Durusu Emek Savaş</td>
</tr>
<tr>
<td>The Alzheimer Café model: a process evaluation study</td>
<td>Ireland</td>
<td>Christine FitzGerald</td>
</tr>
<tr>
<td>Feasibility: Identification of those who may benefit from palliative care</td>
<td>Northern Ireland</td>
<td>Corrina Grimes</td>
</tr>
<tr>
<td>Building evidence for palliative care for people with prion disease</td>
<td>USA</td>
<td>Krista Harrison</td>
</tr>
<tr>
<td>Music and dementia</td>
<td>Ireland</td>
<td>Catherine Jordan</td>
</tr>
<tr>
<td>Citizen Brain</td>
<td>USA</td>
<td>Josh Kornbluth</td>
</tr>
<tr>
<td>Sleep, cognitive decline and dementia—a comparison between China and the US</td>
<td>USA</td>
<td>Yue Leng</td>
</tr>
<tr>
<td>Age-related hearing loss and neural correlates of visual short-term memory</td>
<td>Ireland</td>
<td>David Loughrey</td>
</tr>
<tr>
<td>Gut microbiome restoration in elders with HIV-associated cognitive disorder</td>
<td>Mexico</td>
<td>Luis Arnoldo Muñoz Nevarez</td>
</tr>
<tr>
<td>Dementia risk charts for use in low- and middle-income countries</td>
<td>Ireland/Cuba</td>
<td>Geeske Peeters</td>
</tr>
<tr>
<td>Evaluating a decision aid for families of patients with advanced dementia</td>
<td>Mexico</td>
<td>Brenda Pérez Cerpa</td>
</tr>
<tr>
<td>Substance use in early onset Alzheimer’s disease</td>
<td>Colombia</td>
<td>Claudia Ramos</td>
</tr>
<tr>
<td>The brain health assessment for diagnosis of MCI-dementia in primary care</td>
<td>Cuba</td>
<td>Ana Margarita Rodriguez Salgado</td>
</tr>
<tr>
<td>The costs and burden of informal caregiving for dementia in Brazil</td>
<td>Brazil/USA</td>
<td>Talita Rosa</td>
</tr>
<tr>
<td>Cognitive behavioral therapy dyad treatment for insomnia in MCI</td>
<td>Greece</td>
<td>Konstantina Sykara</td>
</tr>
<tr>
<td>Primary progressive aphasia assessment in Chinese speakers</td>
<td>USA/Taiwan/Hong Kong</td>
<td>Boon Lead Tee</td>
</tr>
<tr>
<td>Family stigma and caregiver burden in early onset dementia</td>
<td>Colombia</td>
<td>Lina Velilla</td>
</tr>
<tr>
<td>Circadian rhythm and sleep disturbances in FTD, AD and older adults</td>
<td>Israel/USA</td>
<td>Jennifer Zitser</td>
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</tbody>
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Funded pilots 2018-2019
Projects

Projects are intended to support an environment of learning. They are awarded to faculty based on mission alignment, potential for fellow engagement, and ability for growth. Typically implemented at founding or regional sites or fellow-affiliated institutions, projects create a unique training environment for Atlantic Fellows while demonstrating GBHI-mission aligned activities.

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Principal Investigators</th>
<th>Description</th>
<th>Budget</th>
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<tbody>
<tr>
<td>Care Ecosystem</td>
<td>Kate Possin (UCSF)</td>
<td>Creating a supportive care program for people with dementia and their families</td>
<td>$250,000</td>
</tr>
<tr>
<td>Detect</td>
<td>Claire Gillan (Trinity)</td>
<td>Developing an internet-based platform of gamified cognitive tests</td>
<td>$249,983</td>
</tr>
<tr>
<td>hear/say</td>
<td>Jennifer Merrilees (UCSF), Lorina Naci (Trinity), Caroline Prioleau (UCSF), Dominic Trépel (Trinity)</td>
<td>Training fellows to collect oral histories of elders and people with cognitive impairment, producing a book and documentary film</td>
<td>$250,000</td>
</tr>
<tr>
<td>Health and Retirement Study</td>
<td>Rose Anne Kenny (Trinity) &amp; Kristine Yaffe (UCSF)</td>
<td>Harmonizing data across UCSF and Trinity</td>
<td>$248,217</td>
</tr>
<tr>
<td>Impact Positive Emotion</td>
<td>Virginia Sturm (UCSF)</td>
<td>Examining emotional reactivity and mental health symptoms in older adults</td>
<td>$50,000</td>
</tr>
<tr>
<td>Neuro ACE</td>
<td>Jyoti Mishra (UCSF)</td>
<td>Developing a mobile mental health technology that serves real-time, real-world neural and cognitive diagnostics</td>
<td>$50,000</td>
</tr>
<tr>
<td>Neurology Center of Excellence</td>
<td>Anna Chodos &amp; Serggio Lanata (UCSF)</td>
<td>Creating a Neurology Center of Excellence at the San Francisco General Hospital</td>
<td>$244,926</td>
</tr>
<tr>
<td>No Pressure</td>
<td>Sabina Brennan (Trinity)</td>
<td>Establishing if health literacy regarding dementia risk and hypertension can be improved</td>
<td>$41,052</td>
</tr>
<tr>
<td>Palliative Care in Dementia</td>
<td>Krista Harrison &amp; Christine Ritchie (UCSF)</td>
<td>Piloting palliative care in our memory center</td>
<td>$176,286</td>
</tr>
<tr>
<td>PREVENT</td>
<td>Lorina Naci &amp; Brian Lawlor (Trinity)</td>
<td>Establishing suitable intermediate markers of dementia</td>
<td>$269,800</td>
</tr>
<tr>
<td>Traumatic Brain Injury (TBI)</td>
<td>Raquel Gardner (UCSF) &amp; Fiona Wilson (Trinity)</td>
<td>Developing a scalable self-administered TBI screening for diverse older adults at risk of dementia</td>
<td>$50,000</td>
</tr>
</tbody>
</table>

GBHI projects funded 2015-2018
Project highlight: PREVENT

There are no treatments to prevent, delay, or slow the progression of Alzheimer’s disease, the commonest cause of dementia. Lorina Naci, PhD, MSc, GBHI Executive Committee Member and Assistant Professor of Psychology at Trinity, is determined to change this.

“My goal is to combine high-impact basic science with applied research to help improve human life,” says Naci.

Along with Brian Lawlor, MD, Deputy Executive Director of GBHI—as well as top scientists from the University of Edinburgh, Oxford University, Cambridge University, Imperial College London, and Montpellier University—Naci is leading a team of neuroscientists, clinicians, and fellows to find early indicators that suggest an increased risk of the disease.

The project, called PREVENT, is a major initiative in Ireland to identify mid-life risks for later life dementia and—using imaging, genetic, cognitive, and biological tests—characterize early changes of neurodegenerative disease. Early detection of risk can lead to better diagnoses, potential targets for treatment, and better understanding of the disease.

“In the face of a global dementia pandemic, it is extremely important to understand the nature of the earliest cognitive/functional changes, as well as their biological basis,” says Naci.

Naci works with Atlantic Fellows at GBHI to expand the reach of PREVENT, including Eimer McGlinchey, PhD, who is applying the same research framework to the Down Syndrome population, which has a five-fold increased risk of Alzheimer’s disease; Laura Booi, PhD, who is aiming to identify dementia-related fears and stigma in healthy midlife adults; and Catherine Jordan, PhD, MSc, who is exploring the benefits of music on brain health.

Naci won one of 40 prestigious Provost PhD project Awards at Trinity, including full funding of a four-year PhD student to work with the PREVENT team. The GBHI team’s efforts in PREVENT have been featured in the popular media and are the focus of a feature documentary.
In dementia, the needs of the patient are complex, and often include medical, social, legal, and financial challenges.

“The majority of the burdens of dementia are carried by the caregiver,” says Katherine Possin, PhD, faculty member at GBHI and Associate Professor of Neurology at UCSF. “They didn’t sign up for this. They weren’t trained for this.”

To help manage issues that can arise, Possin and collaborators from GBHI, UCSF, and the University of Nebraska Medical Center created the Care Ecosystem, a model of collaborative, multidisciplinary dementia care designed to provide personalized, cost-efficient care for persons with dementia and their caregivers.

“We have a responsibility as a society to help those caregivers,” says Possin. “This is what the Care Ecosystem does.”

The Care Ecosystem model includes care team navigators, clinicians with dementia expertise—including nurses, pharmacists, and social workers—and care protocols. The telephone and internet-based intervention is designed to help health systems and clinics provide better care to the growing population affected by dementia and their caregivers.

“We wanted to design a model of care that could reach patients with dementia wherever they live,” says Possin.

To help implement Care Ecosystems in health systems across the U.S., the team is collaborating with Atlantic Fellows for Equity in Brain Health, Talita Rosa, MS, MD; Alissa Bernstein, PhD, MPH; and Krista Harrison, PhD, who bring expertise in global health, medical anthropology, and geriatrics, respectively, empowering the project to scale with sensitivity and flexibility across varied sociocultural and socioeconomic contexts.
As the biggest non-drug randomized clinical trial ever conducted for dementia, Care Ecosystem is redefining dementia care.

“We’re going to work on this until patients across the world are getting better dementia care,” says Possin.
GLOBAL REACH
The fellows come from the following regions:

- **28%** LATIN AMERICA & CARIBBEAN
- **22%** NORTHERN EUROPE
- **19%** NORTH AMERICA
- **18%** MEDITERRANEAN
- **4%** SOUTHERN AFRICA
- **4%** EASTERN ASIA
- **2%** WESTERN EUROPE
- **1%** SOUTHERN ASIA
- **1%** WESTERN AFRICA
- **1%** EASTERN EUROPE

INTER-PROFESSIONAL
The fellows come from a wide variety of clinical and non-clinical professions including:

- **MEDICINE**
- **SOCIAL SCIENCE**
- **PUBLIC POLICY**
- **HEALTH ECONOMICS**
- **JOURNALISM**
- **PERFORMING ARTS**
- **BUSINESS**
- **LAW**
- **TECHNOLOGY**
- **ARCHITECTURE**
- **COGNITIVE SCIENCE**
- **PUBLIC HEALTH**
- **EPIDEMIOLOGY**
- **FINE ARTS**

Fellows (2016–2018)

Rufus Akinyemi  
Neurology  
Nigeria, 2018

Tala Al-Rousan  
Internal Medicine  
Jordan, 2017

Jalayne Arias  
Neuroethics  
USA, 2016

Mircea Balasa  
Neurology  
Spain, 2016

Nicole Batsch  
Gerontology  
USA, 2016

Phaedra Bell  
Education, Theater  
USA, 2017

Jane Bentley  
Music  
United Kingdom, 2018

Alissa Bernstein  
Medical Anthropology & Public Health  
USA, 2016

Kirsty Bobrow  
Public Health & Epidemiology  
South Africa, 2018

Laura Booi  
Gerontology  
Canada, 2018

Eléonore Bayen  
Medicine & Health Economics  
France, 2016

Laura Booi  
Gerontology  
Canada, 2018

Lenisa Brandao  
Speech-Language Pathology  
Brazil, 2018
Dominic Campbell
Elder Activism
Ireland, 2016

María Carmona-Iragui
Behavioral Neurology
Spain, 2016

Siobhan Casey
Marketing & Business Development
United Kingdom, 2018

Gabri Christa
Choreography & Film
Curaçao/USA, 2018

Heidi Clare
Music
USA, 2016

Laurent Cleret de Langavant
Neurology & Statistics
France, 2016

Bárbara Costa Beber
Speech & Language
Brazil, 2016

Krystal Culler
Behavioral Health
USA, 2017

Emma Cunningham
Geriatrics
United Kingdom, 2017

Walter Dawson
Health Policy
USA, 2018

Myriam De La Cruz
Neurology
Puebla

Derya Durusu Emek Savas
Neuroscience
Turkey, 2017
<table>
<thead>
<tr>
<th>Name</th>
<th>Specialty</th>
<th>Country/Location</th>
</tr>
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<tbody>
<tr>
<td>Elizabeth Dzeng</td>
<td>Sociology &amp; Medicine</td>
<td>USA, 2017</td>
</tr>
<tr>
<td>Laís Fajersztajn</td>
<td>Epidemiology</td>
<td>Brazil, 2018</td>
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<tr>
<td>Christine FitzGerald</td>
<td>Psychosocial Research</td>
<td>Ireland, 2016</td>
</tr>
<tr>
<td>Miriam Galvin</td>
<td>Social Science &amp; Health Services</td>
<td>Ireland, 2016</td>
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<tr>
<td>Corrina Grimes</td>
<td>Palliative Care</td>
<td>United Kingdom, 2017</td>
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<tr>
<td>Alejandra Guerrero Barragán</td>
<td>Neurology</td>
<td>Colombia, 2017</td>
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<tr>
<td>Sana-e-Zehra Haidry</td>
<td>Psychology &amp; Language</td>
<td>Pakistan, 2018</td>
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<tr>
<td>Krista Harrison</td>
<td>Policy &amp; Palliative Care</td>
<td>USA, 2017</td>
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<tr>
<td>Sandra Higuet</td>
<td>Geriatrics</td>
<td>Belgium, 2017</td>
</tr>
<tr>
<td>Elaine Howard</td>
<td>Care Models</td>
<td>Ireland, 2016</td>
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<tr>
<td>Agustin Ibáñez</td>
<td>Neuroscience</td>
<td>Argentina, 2018</td>
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<tr>
<td>Hany Ibrahim</td>
<td>Geriatric Medicine</td>
<td>Egypt, 2016</td>
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<tr>
<td>Stefania Ilinca</td>
<td>Health Economics</td>
<td>Romania, 2018</td>
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<tr>
<td>Catherine Jordan</td>
<td>Cognitive Neuroscience</td>
<td>Ireland, 2017</td>
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<tr>
<td>Elissaios Karageorgiou</td>
<td>Neurology &amp; Neuroscience</td>
<td>Greece, 2016</td>
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<tr>
<td>Ophir Keret</td>
<td>Neurology</td>
<td>Israel, 2018</td>
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<tr>
<td>Emi Kiyota</td>
<td>Environmental Gerontology</td>
<td>Japan, 2018</td>
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<tr>
<td>Silvia Kochen</td>
<td>Neuroscience</td>
<td>Argentina, 2016</td>
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<tr>
<td>Josh Kornbluth</td>
<td>Comedy &amp; Performance</td>
<td>USA, 2016</td>
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<tr>
<td>Yue Leng</td>
<td>Photography</td>
<td>Peru, 2018</td>
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<tr>
<td>Elizabeth Dzeng</td>
<td>Epidemiology</td>
<td>China, 2017</td>
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<tr>
<td>Jorge Leon Salas</td>
<td>Neuropsychiatry</td>
<td>Costa Rica, 2018</td>
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<td>Jorge Llibre Guerra</td>
<td>Neurology</td>
<td>Cuba, 2016</td>
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<tr>
<td>Mariana Longoria Ibarrola</td>
<td>Psychiatry</td>
<td>Mexico, 2017</td>
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<tr>
<td>David Loughrey</td>
<td>Research Psychology</td>
<td>Ireland, 2017</td>
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<tr>
<td>Jeronimo Martin</td>
<td>Emergency Medicine</td>
<td>Mexico, 2017</td>
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<tr>
<td>Lingani Mbakile-Mhlanza</td>
<td>Neuropsychology</td>
<td>Botswana, 2018</td>
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<tr>
<td>Shamiel McFarlane</td>
<td>General Practice</td>
<td>Medicine, Jamaica, 2018</td>
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<tr>
<td>Eimear McGlinchey</td>
<td>Intellectual Disability</td>
<td>Ireland, 2018</td>
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<tr>
<td>Luis-Arnoldo Muñoz-Nevarez</td>
<td>Geriatric Medicine</td>
<td>Mexico, 2017</td>
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<tr>
<td>Maira Okada de Oliveira</td>
<td>Neuropsychology</td>
<td>Brazil, 2018</td>
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<tr>
<td>Rogerio Panizzutti</td>
<td>Neuropsychiatry &amp; Public Health</td>
<td>Brazil, 2016</td>
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<tr>
<td>Elisa de Paula França Resende</td>
<td>Neurology</td>
<td>Brazil, 2016</td>
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<tr>
<td>Stefanie Piña-Escudero</td>
<td>Geriatrics</td>
<td>Mexico, 2018</td>
</tr>
<tr>
<td>Maritza Pintado Caipa</td>
<td>Neurology</td>
<td>Peru, 2018</td>
</tr>
<tr>
<td>Geeske Peeters</td>
<td>Public Health &amp; Preventive Medicine</td>
<td>Netherlands, 2016</td>
</tr>
<tr>
<td>Brenda Pérez Cerpa</td>
<td>Geriatric Medicine</td>
<td>Mexico, 2017</td>
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</tbody>
</table>
Claudia Ramos  
Psychiatry  
Colombia, 2017

Kirti Ranchod  
Neurology  
South Africa, 2018

Rowena Richie  
Art & Education  
USA, 2018

Ana Margarita Rodriguez Salgado  
Neuropsychology  
Cuba, 2017

Lorna Roe  
Health Services  
Ireland, 2018

Adrià Rofes  
Neuroscience  
Spain, 2016

Talita Rosa  
Health Economics  
Brazil, 2017

Mohamed Salama  
Neurotoxicology  
Egypt, 2018

Fionnuala Sweeney  
Journalism  
Ireland, 2016

Claire Sexton  
Neuroscience  
United Kingdom, 2017

Konstantina Sykara  
Clinical Psychology  
Greece, 2017

Jamie Talan  
Neuroscience  
Journalism  
USA, 2016

Ioannis Tarnanas  
Neuroscience & Computer Science  
Greece, 2016

Boon Lead Tee  
Neurology  
Malaysia, 2017

Lina Velilla  
Psychology & Epidemiology  
Colombia, 2016

Dana Walrath  
Writing, Art, & Anthropology  
USA, 2018

Fiona Walsh  
Architecture  
UK/Ireland, 2018

Greg Walsh  
Life Sciences Business  
UK/Ireland, 2018

Adam Waskow  
Animal Therapy & Training  
USA, 2016

Cindy Weinstein  
Higher Education  
USA, 2018

Wilby Williamson  
Sport & Exercise Medicine  
United Kingdom, 2018

Jennifer Zitser  
Neurology  
Venezuela/Israel, 2017

Stelios Zygouris  
Neuropsychology  
Greece, 2016
Leadership, faculty and staff

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UCSF

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Care Models
UCSF

Rosalie Gearhart
Administration & Nursing
UCSF

Michael Geschwind
Neurology
UCSF

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Psychology
Trinity
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Steve Thomas
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Trinity

Winnie Tsou
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UCSF

Beth Whitney
Recruitment & Selection
Trinity

Stacey Yamamoto
Monitoring & Evaluation
UCSF

Katy Tobin
Biostatistics
Trinity

Sven Vanneste
Psychology
Trinity

Brie Williams
Geriatrics
UCSF

Jennifer Yokoyama
Neurogenetics
UCSF

Dominic Trépel
Economics
Trinity

Robert Whelan
Psychology
Trinity

Kristine Yaffe
Neuropsychiatry & Epidemiology
UCSF

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Atlantic Fellows

The Atlantic Philanthropies established the Atlantic Fellows in 2015 to culminate the foundation’s work in the geographies and issue areas in which it historically focused, and its decades of investing in people and in their vision and ability to realize a better world. The seven interconnected Atlantic Fellows programs together create a global community to advance fairer, healthier, and more inclusive societies. Each of the programs is distinct and grounded in its local context, but all share a deep commitment to advancing equity. All programs start with a core fellowship experience and continue with fellows joining the lifelong global community.

AFFILIATES

Support

GBHI welcomes partners in philanthropy to secure the success of this unique program. For more information about how to support GBHI, please visit www.gbhi.org/support.
Financials at a glance

2018–19 GBHI YEAR 3 SPEND
Total $11.3M

- Personnel: 46%
- Fellow Compensation: 8%
- Learning Experience: 10%
- Projects: 3%
- Pilots: 5%
- All Other: 28%

2018–19 PILOT AWARDS SOURCES
Total $522K

- GBHI: 57%
- Alzheimer’s Society UK: 28%
- Milbank Foundation: 10%
- Alzheimer’s Association: 5%

2017–18 PILOT AWARDS SOURCES
Total $447K

- GBHI: 61%
- Alzheimer’s Association: 39%

2018–2019 data is representative of GBHI programmatic year 3, fiscal year 2019, from July 1, 2018 to June 30, 2019. The first three years of start-up operations included annual growth in spending, reflecting the recruitment of faculty, staff, and robust Atlantic Fellows cohorts, as well as the ramping up of program implementation and in-residence learning experience. As GBHI enters steady-state operations in years 4 and 5, programmatic focus is shifting to include the alumni network and working towards global impact. Note that these are unaudited financials.
Reducing the scale and impact of dementia worldwide
UCSF and Trinity College Dublin are the two founding sites and host institutions for GBHI and the Atlantic Fellows for Equity in Brain Health Program at GBHI, providing critical infrastructure, renowned faculty, and affiliation with two of the leading institutions in brain health research.