

Medact's 18th year

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The logo for Medact, featuring a stylized white waveform on the left and the word "MEDACT" in a bold, black, sans-serif font on the right.

Annual Report 2009/2010

## Treasurer's Report

The economic environment has continued to be challenging for small charities such as Medact and we are enormously grateful to our members and donors for enabling us to continue with our work this year.

During the financial year ending January 2010 our total audited income of £195,618 consisted of £133,642 in core funds and the balance of £61,976 in restricted funds. Total expenditure was £217,139 with an overspend in core funds of £4,247. In total we have a positive balance in core funds of £24,475 and £7,210 in restricted funds.

Members' subscriptions totalled £56,317, a drop of £2,324 from last year and there was also a drop in donations to £14,458. The appeals raised £39,972, a rise of £5,155. Generous donations and the loyalty and support of all members as ever underpinned and contributed to our activities throughout the year.

In recognition of the economic downturn we reduced the Medact office space to cut our core costs. While the financial year 2009–10 was difficult in terms of raising project funds, we have been successful in securing a number of project grants which will come on line in 2010–2011.

In the present economic climate maintaining and increasing our membership and donations – including through appeals – is crucial.

Our accountant Tim Goodwin continued to provide indispensable advice and guidance for which we are very thankful. Tim has finally decided that the time has come for him to retire from Medact, and I would like to express my personal gratitude for all the help he has given me in my time as Treasurer, and to wish him well in his well-deserved retirement. I would also like to thank the Director, staff and fellow members of the Board for their understanding and support.

**Rebecca Macnair, Treasurer**

## Officers elected 2009–2010

### Chair

Dr Frank Boulton

### Vice-Chairs

Dr Elisabeth McDermid

### Treasurer

Ms Rebecca Macnair

### Other

Dr Judith Cook

Dr Ian Fairlie

Ms Vanessa Jessop

Dr Margaret Reeves

Ms Ruth Stern

Dr Liz Waterston

Dr Gilles de Wildt

Dr Tom Yates

### President

Dr June Crown CBE

### Vice-Presidents

Ms Naaz Coker

Prof P J Graham

Dr Alex Poteliakhoff

Dr Hanna Segal

Prof Gill Walt

Dr Helen Zealley

# Communicating health

Throughout the year Medact's members, staff and local groups continued to challenge the causes of violent conflict, the need for a nuclear deterrent, the drivers of climate change and the inequalities that impact on health and health care.

By coordinating the UK contribution to the international campaign for a Nuclear Weapons Convention led by IPPNW (International Physicians for the Prevention of Nuclear War) we promoted the practical and equitable framework for abolition. Through a combination of political lobbying, meetings and public events, Medact's anti-nuclear work highlighted the urgent need for progress towards abolition and against the renewal of the Trident nuclear weapons system.

Medact continued to document the health consequences of violent conflict with a report on Explosive Violence, and to disseminate the findings of key witnesses to conflict with a UK tour of two people involved in a fact-finding mission into Gaza in early 2009. Longer-term research work on health information in conflict was balanced by campaigning and communicating with government officials on civilian mortality in Afghanistan.

Medact is one of the partners working towards the third Global Health Watch and the next stage of the Europe wide on-line training in Medical Peace Work. We were also one of the partners who organised the first International People's Health University workshop to be held in the UK, and we are part of the Global Health Education Project working towards global health being included in medical training.

In collaboration with others we campaigned for just environmental policies globally and for responsibility locally – stressing that what is good for health is good for the climate. Members were active in their work places and their homes.

Medact's members and local groups have carried forward this work at all levels, ensuring legitimacy, accuracy and focus. Our strong collaborations with Medsin and many others such as Alma Mata are crucial for our work and ensure maximum effectiveness.

**Marion Birch, Director**



## Weapons of mass destruction

Medact continued to campaign for the abolition of nuclear weapons and for a Nuclear Weapons Convention (NWC). Medact advocated that the resources currently devoted to armaments be reallocated to peaceful purposes promoting global health.

Medact coordinates the UK's International Campaign to Abolish Nuclear Weapons (ICAN-UK) as part of the international movement calling for a NWC, launched by International Physicians for the Prevention of Nuclear War (IPPNW).

Tim Street took over from Joseph Mutti as ICAN-UK Coordinator and has continued to build the campaign. The need for multilateral negotiations leading to a NWC was promoted at government and civil society meetings, conferences and workshops. Several high profile patrons were recruited and a new website launched <http://www.icanw.org.uk/> MP voting patterns were analyzed and MPs urged to take action

including signing Early Day Motions.

Medact is a member of CND's No to Trident Replacement group and joined forces with CND on a 'No to Trident Replacement – Yes to a Nuclear Weapons Convention' petition, presented during the 2010 Non-Proliferation Treaty Review



Conference at the UN in New York.

As a member of the Peace and Security Liaison group Medact helped organize a meeting with UK government representatives in preparation for the NPT Review Conference. Medact continued to be a member of the Weapons of Mass Destruction Awareness Programme which raises awareness about weapons of mass destruction worldwide. Medact and other members of IPPNW held key

discussions with NATO representatives.

Medact members continued to use Medact's Trident briefing: *Britain's New Nuclear Weapons: illegal, indiscriminate and catastrophic* and in Scotland Medact members advocated against Trident at the highest level.

Gay Lee organized a Medact presence at the Aldermaston Atomic Weapons establishment demonstration. Medact members were active in the Missile Defence Working Group, which opposes US military bases at Fylingdales and Menwith Hill in Yorkshire.

Medact drew attention to the dangers posed by nuclear power, publishing a fact sheet on its threats to health, and disseminating recent research into potential health risks. We continued to counter the myth that nuclear power is 'carbon free' and argued that the unsolved problems of nuclear waste cannot be left for future generations.



## Violence, conflict and health

Medact has continued to challenge the underlying causes of violent conflict and has campaigned to mitigate and prevent its health consequences.

Medact collaborated with Landmine Action on producing and disseminating a report on Explosive Violence launched in August 2009. We also provided support and editorial advice on *Health in the Firing Line*, a report about the inequality and health effects of over 20 years of conflict in Sri Lanka. Medact followed up with a number of meetings with government on the situation in Sri Lanka as part of the Crisis Action group, and entered into communication with the Sri Lanka Medical Association about specific concerns.

Medact's considerable work on health in Iraq continued; we hosted a talk by Hanaa Ibrahim, founder of the 'Women's Will Association of Iraq' about the health of women in Iraq, we made a submission to the Chilcot Inquiry into the Iraq War, and together with Doctors for Iraq, we are working on the results of their survey of the functioning of Iraqi hospitals.

Together with Pax Christi, Medact organised a regional speaking tour for two health professionals



involved in the fact-finding mission into Gaza shortly after the Israeli offensive in early 2009. Medact members have followed this up with advocacy on the health of the civilians in Gaza. In spring 2009 David Halpin once again took the seas in his boat Dignity on his latest relief voyage to try and assist the Palestinians of Gaza.

Medact has also been in communication with the Ministry of Defence and Joint Operations Command about civilian casualties in Afghanistan, and we took part in a cross government meeting on the

health consequences of such operations.

In January Medact took part in Global Response 2010 in Copenhagen – an international multi-disciplinary conference on violent conflict and health organised by Global Doctors.

Medact has taken part in various policy meetings on conflict and health, in particular in relation to health financing, global health governance and the provision of health and the rehabilitation of health services post-conflict.



## Health, poverty and development

The impact of global inequalities on public health continues to be a core part of Medact's work. *Global Health Watch 2*, the alternative world health report produced by Medact, the People's Health Movement and the Global Equity Gauge Alliance was widely distributed.

Medact contributed to the alternative global health conference 'A Public Eye on Berlin' and participated in health policy discussions throughout the year,

including following up on the cross governmental Health is Global strategy. Medact's members and local groups organised influential events including a conference on child health and drug therapy in Derby and a global health conference in Manchester.

Together with the People's Health Movement, Health Poverty Action, and Healthlink International, Medact helped organize a pilot workshop – People, Politics and

Global Health – part of the International People's Health University.

As a member of the Global Health Education Project working group, Medact is helping to produce recommendations for the inclusion of global health in the core medical curriculum, and has contributed to Special Study Modules. The web-based training on medical peace work, part of a European-wide initiative, has entered a second phase.

## Access to healthcare

This year Medact continued to host the Refugee Health Network (RHN) and the Entitlement Working Group. Member organizations advocated on the right to access to free healthcare for failed asylum seekers and undocumented migrants in the UK. Ezinda Franklin-Houtzager took over as coordinator from Moyra Rushby who had built up the network over several years.

In 2008 a High Court ruling, following a case brought about through RHN campaigning, found in favour of an individual who was denied healthcare. In March 2009 the Department of Health

challenged and overturned this ruling. However the Court of Appeal stressed the importance of free treatment for urgent and immediate health care on the basis of clinical judgment, and urged the Department of Health for better guidelines regarding treatment of persons who are unable to pay for healthcare and who cannot be returned to their home countries. At a Home Affairs Committee meeting medical professionals had previously highlighted the damaging effects of restricting access.

More recently Medact has written a guide and produced other materials to help different groups –

including those whose access to health care needs defending – to make a submission to the Department of Health's consultation '*Review of access to the NHS for Foreign Nationals*'.

The distribution of the Maternity Advocacy and Access Pack was followed up by further training for NHS bodies. Ros Bragg, the coordinator, left Medact to start Maternity Action. Medact participated in the Still Human, Still Here coalition, which advocates on behalf of refused asylum seekers in the UK.



## The environment

Medact took action with other health groups to advocate for just and urgently needed environmental policies. We encouraged people to sign up to the Climate and Health Council Pledge and to make the link between health and the environment by promoting good, preventive individual healthcare. Members are pressing their respective Colleges, including the Royal Colleges of Nursing and General Practitioners to join 10:10 – which campaigns for a 10% reduction on carbon output by the end of 2010.

In the run up to the UN conference on climate change in Copenhagen in December, Medact,



along with the Campaign for Greener Healthcare, Medsin and the Climate and Health Council, held a packed meeting, hosted by the Royal College of Nursing in London, at which keynote speakers described the potentially devastating impact on global health of climate change.

After the meeting, the participants joined thousands of protesters in Grosvenor Square. Members discussed health and climate change with Secretary of State for

Climate Change Ed Miliband en route. Photographs and reports of the event appeared in many newspapers and magazines.

Groups in Scotland, Newcastle and Bristol campaigned on the issue and Bristol Medact ran an energetic campaign against the expansion of Bristol International airport. Bristol Medact challenged the chief executive of North Somerset PCT to declare how the Trust is raising awareness about climate change.

## Publications and communication

Medact's triannual members' newsletter *Communiqué* continued to keep members up-to-date with reports on Medact's many activities. Articles in *Medicine*, *Conflict and Survival*, the international quarterly journal, covered a range of issues related to health, security, conflict and international law. Members were also kept up to date through our monthly e-bulletin and Tom

Yates initiated Medactivist, an on-line discussion group for Medact members.

Medact staff and members wrote widely in a range of publications including the *British Medical Journal*, *Nursing Standard* and *Nursing Times*, the *Bulletin of World Health Organization*, *Resurgence*, *Health Matters* and national and regional newspapers such as the

*News – Portsmouth* and the *Glasgow Herald*. Medact's media adviser wrote a set of media guides and Tony Waterston wrote a *Guide to Blogging*.

Tony Waterston wrote several blogs on climate change for the BMJ and worked with the Royal College of Paediatrics and Child Health to develop a College Position Statement on climate change.

# Inside Medact

## Staff

Our administrative officer Pat Onoapoi left Medact and was replaced by Daniel Gayle. When Daniel joined the police force we welcomed Natalie Fernandes. Moyra Rushby, our office manager and coordinator of the Refugee Health Network, left Medact after eight years and was replaced by Catherine Holley. Her refugee work was taken over by Ezinda Franklin-Houtzager. Tim Street took over from Joseph Mutti as ICAN-UK Coordinator. Marion Birch continued as Director and Alison Whyte as media advisor and editor of *Communiqué*.

## Medact local groups

Our local groups were active in Bradford, Bristol, Leeds, the NorthWest, Scotland, Tyneside, West Yorkshire and Worcester. Bristol Medact led on climate change, Leeds supported the rights of asylum seekers and Palestinians. Scotland pressed for the cancellation of the Trident nuclear weapons system. Tyneside Medact with Newcastle Medsin, were successful in getting global health issues into the main curriculum at Newcastle Medical School. West Yorkshire worked with asylum

seekers, Sarah Walpole was active in the Campaign for Greener Healthcare and led a course on the Social Determinants of Health, while Medact NorthWest held a conference on local and global health inequalities.

## Volunteers and Officers

As in previous years, volunteers and interns provided valuable support. Volunteers included Donald Uzu, Mary Holdstock, Gay Lee, Mohssin Goma, Christine Falvey and Anne Piachaud. Interns included Elicia Roberston, Isha Sesay, Josephine Hombarume and Omar Ghawi. Margaret Reeves headed the People's Health Movement-UK and Ruth Stern coordinated the International People's Health University workshop. Our collaboration with Medsin was crucial. Peter Poore left the board but continues as an active member. Frank Boulton continued as Chair, Rebecca Macnair as Treasurer and Elisabeth McElderry as Vice-Chair. Volunteers, interns and board members all gave generously of their time, energy and expertise – many thanks.



## Sad losses

This year Medact lost a former director and passionate campaigner on nuclear and many other issues. Gill Reeve had been with Medact for over 20 years and was the driving force behind the highly-acclaimed Iraq reports. In 2007, she helped launch the International Campaign to Abolish Nuclear Weapons. She is sorely missed.

This year we also lost esteemed Vice-President Professor David Morley who died after a lifetime dedicated to improving the health of children in the developing world.

## Statement of Financial Activities for the year ended 31 January 2010

	Unrestricted Funds 2010 £	Restricted Funds 2010 £	Total Funds 2010 £	Restated Total 2009 £
<b>Incoming resources from generated funds</b>				
<i>Voluntary income</i>				
Donations	129,536	1,000	130,536	136,053
<i>Activities for generating funds</i>				
Teaching and consultancy	2,699	1,000	3,699	13,752
Conferences	1,112	13	1,125	2,137
Surplus on sale of leaflets and books	–	–	–	1,012
Investment income & interest	295	–	295	2,335
<b>Incoming resources from charitable activities</b>				
Grants and contracts	–	59,963	59,963	90,102
<i>Total incoming resources</i>	<u>133,642</u>	<u>61,976</u>	<u>195,618</u>	<u>245,391</u>
<b>Resources expended</b>				
<b>Costs of generating funds</b>				
Costs of generating voluntary income	9,767	–	9,767	6,789
Charitable activities	121,098	79,250	200,348	226,488
Governance costs	7,024	–	7,024	7,359
<i>Total resources expended</i>	<u>137,889</u>	<u>79,250</u>	<u>217,139</u>	<u>240,636</u>
<b>Net incoming resources</b>				
– Net income for the year	(4,247)	(17,274)	(21,521)	4,755
– Transfer between funds	1,431	(1,431)	–	–
Total funds at 1 February 2009	27,291	25,915	53,206	48,451
<b>Total funds at 31 January 2010</b>	<u>24,475</u>	<u>7,210</u>	<u>31,685</u>	<u>53,206</u>

## Balance Sheet as at 31 January 2010

<b>Tangible assets</b>		<u>1</u>	<u>1</u>
<b>Current assets</b>			
Cash at bank and on hand		25,920	55,417
Debtors and prepayments		11,868	4,254
		<u>37,788</u>	<u>59,671</u>
<b>Current liabilities</b>			
Amounts falling due within 12 months			
Creditors and accruals		(6,104)	(6,466)
		<u>–</u>	<u>–</u>
<b>Net current assets</b>		31,684	53,205
<b>Net assets</b>		<u>31,685</u>	<u>53,206</u>
<b>Restricted funds</b>		7,210	25,915
<b>Unrestricted funds</b>		24,475	27,291
<b>Total funds</b>		<u>31,685</u>	<u>53,206</u>

**Notes:** Full audited accounts available on request from the Medact Office.  
**Restricted funds:** to be used for specific purposes as laid down by the donor.  
**Unrestricted funds:** Income received and generated by the objects of the charity without specific purpose and available as general funds.