

# Medact Annual Report **2014-15**



# Medact

Conflict, violence, poverty and injustice are the fundamental and most important causes of premature death and avoidable disease and suffering. Medact exists to harness the expertise, mandate and ethical principles of health professionals to speak out and campaign on these issues. Medact is now over 20 years old and builds on many past examples of health professionals acting as agents for social change.

Medact works across four broad and inter-connected programme areas.



**Peace and Demilitarisation**



**Climate and Ecology**



**Economic Justice**



**Health and Human Rights**

## Please support our work

Medact seeks to exist independently of large donors. Our funding is based on membership subscriptions and individual donations, supplemented by support from grant-making foundations. To find out more about membership please visit the [how to join](#) page on our website. You can also support and be part of Medact without being a member – find out more on our [get involved](#) page.

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Medact

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Medact is the UK affiliate of the International Physicians for the Prevention of Nuclear War (IPPNW)

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# Chair's Report

I have been involved with Medact for many years and have had the privilege of being its chairman during 2014, which has been a stimulating and humbling experience. This report sets out the amazing range of activities, influence and impact that is produced by a very small number of staff, volunteers and supporters who all give generously of their time, energy and commitment. The growing evidence on the breadth of issues that affect health has led to expansion of our activities. The experience and integrity of the supporters and contributors to our reports means that our evidence is trusted and widely used.

During this year we have been continuing our efforts to revitalise Medact, increase its membership and improve its financial position so that it can further develop its role as a focus for all health professionals and others who have an interest in the many areas that affect global health and peace.

To achieve these aims, we must retain our legitimacy and credibility and the sound, ethical and evidence-based positions and arguments that underpin our campaigns and advocacy. New members from all of the health professions will broaden our expertise and enhance our influence and impact.

We must also continue our efforts to put Medact on a more secure and stable financial base to enable us to create a credible strategy for the further development of our organisation and its important work in an increasingly threatened world.

The impressive list of activities reported here would not have been possible without the courage and generosity of our Director, Dr David McCoy. His tireless work and leadership in all aspects of our work, from "routine", through research, fundraising, presentations and teaching, to national and international advocacy, have been central to the increased visibility of Medact and its concerns. He has been supported by our staff members, Chris Venables and Victor Ponsford, who have also given generously of their time and effort. Their energy and commitment are greatly appreciated. I would also like to thank very warmly the many volunteers who have contributed so much to our work.

I wish to thank most warmly all the Trustees who continue to give time and expertise to Medact and who have also given me so much support.

I hope you will find this report of interest and that you will continue to seek ways in which you can support Medact and its work in the future.

**Dr June Crown CBE**  
Chair

# Medact in a Nutshell

## Who and what is Medact?

Medact is an organisation for and of health professionals. This typically means doctors, nurses, therapists, psychologists, academics and other professional groups working in the health sector. In addition, it includes lawyers, economists, philosophers, social scientists and others who work to improve health and wellbeing.

It grew out of the medical peace movement of the 1950s and 1960s and was formed from the merger of the Medical Association for the Prevention of War (MAPW) and the Medical Campaign Against Nuclear Weapons (MCANW).

Medact is also the UK affiliate of the 1985 Nobel Peace Prize Winner, International Physicians for the Prevention of Nuclear War (IPPNW).

It subsequently evolved to embrace other aspects of global public health.

It sees health professionals as having a wider social duty to promote peace, economic justice, ecological health and human rights.

## What does Medact do?

It conducts research and analysis. It lobbies and campaigns. It informs and educates.

It works with other professional organisations in the UK, such as the BMA, the Royal Colleges, the Royal Society of Medicine, relevant university faculties and public health departments to support the wider health community to be more effective social change agents.

It works with similar overseas organisations, including Physicians for Social Responsibility (USA) and Medico International (Germany), to strengthen the global health, peace and justice movement. It has also formed a partnership with Health Poverty Action, a UK-based charity that works with marginalised communities in 13 countries across Africa, Asia and Latin America.

It seeks to strengthen bridges between professionals and communities and thus collaborates with the Peoples Health Movement, which is a loose trans-national network of community organisations, individuals and non-government organisations with strong roots in the global South.

It also collaborates with the Medical Justice Network, Friends of the Earth, War on Want, the Food Climate and Research Network, Tax Justice Network, New Economics Foundation, I-CAN UK and the Oxford Research Group to promote multi-sectoral and inter-disciplinary partnerships for action on global health.

*Medact's core purpose is to educate and inform the wider health community on the issues it works on; and to lobby and campaign for change. But both these sets of activities are based on an analysis of data and evidence and the construction of a sound argument for change, as well as explicit values and principles.*

**Values and Principles**

**Data, Evidence and Analysis**

**Alternative (and better) Solutions**

**Information and Education**

**Advocacy and Campaigning**

# 2014: Blogs, Actions and Events

This year Medact has generated interest and energy around the social, political and ecological determinants of health through conferences, seminars and lectures, training events, blogs and reports.

## Lecture Series: Global Health Justice

In 2014 we started a global health lecture series entitled *Global Health Justice*, in partnership with Queen Mary University, London. The series attracted over 300 attendees and provided an opportunity to explain the interconnected nature of the topics of Medact's campaigns. Speakers included experts from several academic fields, medical journalists and health campaigners.

## Forum 2014: Health In Action

At our 'Health in Action' forum in November 2014, over 200 health professionals, students and academics attended plenary sessions by academic experts in the fields of global health and participated in a series of workshops focusing on skills building and campaign strategizing. The workshops sought to give health professionals the skills they need to campaign effectively for social justice in health. Sessions included: 'Campaigning for universal healthcare and the NHS', which encouraged the reintroducing of values such as compassion, social justice and universalism into the NHS, to combat the increasing focus on self-interest, wealth and power. There was also a session on theories of change where the different approaches were laid out, discussed and turned into potential strategies for Medact's future campaigns on tax avoidance, fossil fuel divestment and fracking.

## Website

Medact's website has become a hub for the online public and global health community and includes a blog facility and a 'take action' page with petitions and letters organised by members, partner organisations and Medact.

## Blogs

Medact provides an alternative analysis of current health crises that looks beyond the images of bombed hospitals, rushing ambulances and biohazard suits.

In the case of Ebola, Medact published a blog titled 'The social, political and ecological pathologies of the Ebola Crisis' to stimulate debate about the wider political economy of Ebola.

During the 2014 Israel-Gaza conflict Medact published a blog that included graphic images of Palestinian victims sent to us by doctors working in Gaza. The blog called for a more honest account of the conflict and also defended the Lancet journal from accusations of anti-Semitism.

## Online Actions

In 2014 we experimented with new campaigning techniques and created an Online Actions page where health professionals can quickly add their name in support of petitions or letters.



# Director's Report



Last year's annual report outlined Medact's process of change and revitalisation following its relaunch in November 2013.

Since then, much progress has been made. Membership is rising, Medact has started to feature more in both

the mainstream and social media and our activity across a broad scope of issues has grown. Another positive development has been the emergence of new volunteers and expressions of interest from health professionals wanting to set up local area Medact groups.

However the coming year will be critical. If Medact is to have real impact on the world, it needs to continue developing in three ways.

First, it needs to keep growing its support base. We currently have just over a thousand members, but given that there are around a million health professionals in the UK, we should aim to increase our membership several fold. In particular, we need to attract many more non-medical health professionals. This will strengthen Medact's legitimacy as a voice of progressive and socially responsible health professionals and its ability to influence change within the wider health community.

Second, we hope to build our scientific and professional capacity so that our advocacy rests on the basis of up-to-date knowledge, solid evidence and sound argument. Part of our plan for this is to develop mutually beneficial working relationships with academics and experts from elsewhere and to establish an advisory council of experts for each of our four programme areas.

Finally, we plan to raise grant-based funding for specific projects or programmes of work to complement the general income we receive from members and individual supporters.

The need for a progressive public health movement in the UK is stronger than ever and we look forward to Medact's next phase of revitalisation.

**David McCoy**

Director

# Economic Justice



Above: Medact health professionals outside the Boots flagship shop on Oxford Street highlighting the firm's use of illegitimate tax avoidance schemes. Boots continues to bank on the trusted image it built up, which is being slowly eroded by the scale of its tax avoidance - £1.2 billion to date and rising, despite directly drawing 40% of their profits from the tax-funded NHS.

A redistribution of less than 1% of global GDP would instantly lift billions of people out of \$2/ day income poverty. Curbs on illicit financial flows would negate the need for aid to many developing countries. Changes to trade, finance and investment laws could end hunger and under-nutrition in a world which currently over-produces food.

Many of our economic policies and systems are unfair, undemocratic and inefficient. They certainly do not promote health. Socio-economic inequality continues to grow globally, across and within countries, undermining health and social well being, breeding violent conflict and inhibiting good governance and sustainable development.

## A new economics

We are working to provide accessible critiques and explanations of the reasons why mainstream economics is not working for most people or for the planet. More importantly, we want the health community to consider how alternatives to the dominant neoliberal paradigm would be good for society in general *and* for health specifically. We have done this through a series of events including our lecture series, Global Health Justice, which included a session with speakers from the UCL Institute of Health Equity and from Oxford's Department of Sociology. The highlight for our annual Forum was a two-hour workshop on health and inequality with an advanced screening of the Spirit Level documentary, followed by a strategy workshop on how Medact can further engage the health community in calling for a more equal and healthy world.

### Trade and investment

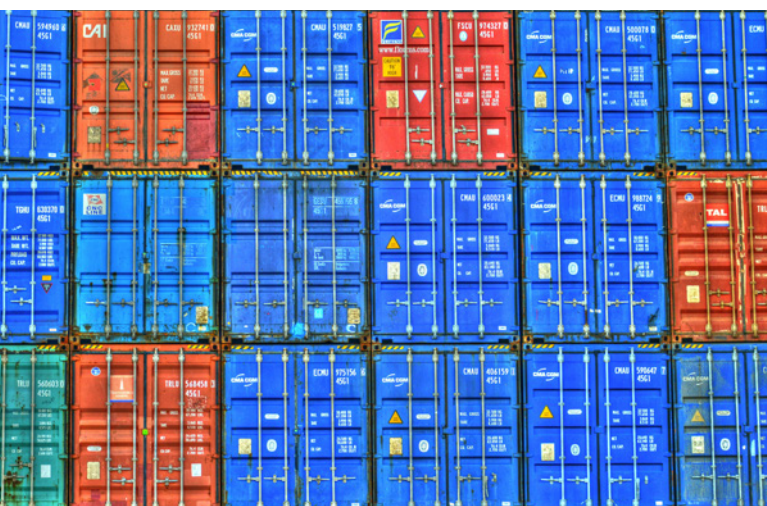
The Trans-Atlantic Trade and Investment (TTIP) negotiations are commonly portrayed as a 'contest' between US and EU interests. In reality, they are a 'contest' between financial and corporate interests on the one hand and democratic institutions and citizens on the other. High up the list of concerns are proposals that would undermine public health regulations and food, environmental and chemical safety measures *and* accelerate the commercialisation of professional and public services across Europe. Last year we organised a panel discussion on TTIP with the Royal Society of Medicine and the Faculty of Public Health. It brought together trade, public health and investment experts to discuss this vitally important issue. The Faculty of Public Health subsequently published a report, supported and reviewed by Medact, which called 'for the EU to reject TTIP and put health before profit'.

### Tax and Health


We are working to make tax a more visible public health issue. Tax has multiple functions including raising revenue for the health system, redistributing resources and promoting equal opportunities, regulating aspects of the market economy that are damaging to health and strengthening the social contract between government and society.

A series of papers outlining the connection between tax and health is being prepared for peer-reviewed publication. We have initiated a campaign against illegitimate tax avoidance conducted by companies that operate in the NHS, specifically the pharmacist Boots Alliance which has avoided £1.2 billion pounds in tax since 2007 despite drawing 40% of its profits directly from the tax-funded NHS.

In 2014 we launched an online petition asking the Chief Executive of the HMRC to investigate the loopholes used by multinational corporations to avoid paying tax.




Action: Boots



Has Avoided **£1.21 BILLION** in Taxes

That could pay the starting annual salary for nearly 15,000 new NHS nurses



Has Avoided **£1.21 BILLION** in Taxes

That's enough to cover over 2.5 years of prescription fees for all of England

Tax abuse is wrong. And Medact believes it should be considered a national public health problem.

But the rules of the international banking, trade and finance systems are rigged to allow corporations to get away with illegitimate and unacceptable tax avoidance.

Help us to put pressure on Her Majesty's Revenue & Customs (HMRC) by entering your details below and signing this petition.

Letter to Ms Lin Homer, Chief Executive HM Revenue & Customs

Dear Ms. Homer,

We write to you as health professionals expressing our concern about the scale of illegitimate tax avoidance conducted by multinational corporations operating in the UK. While this has received widespread media and parliamentary attention, we do not feel it has resulted in adequate action.

As health professionals we are especially concerned about tax avoidance conducted by companies operating within

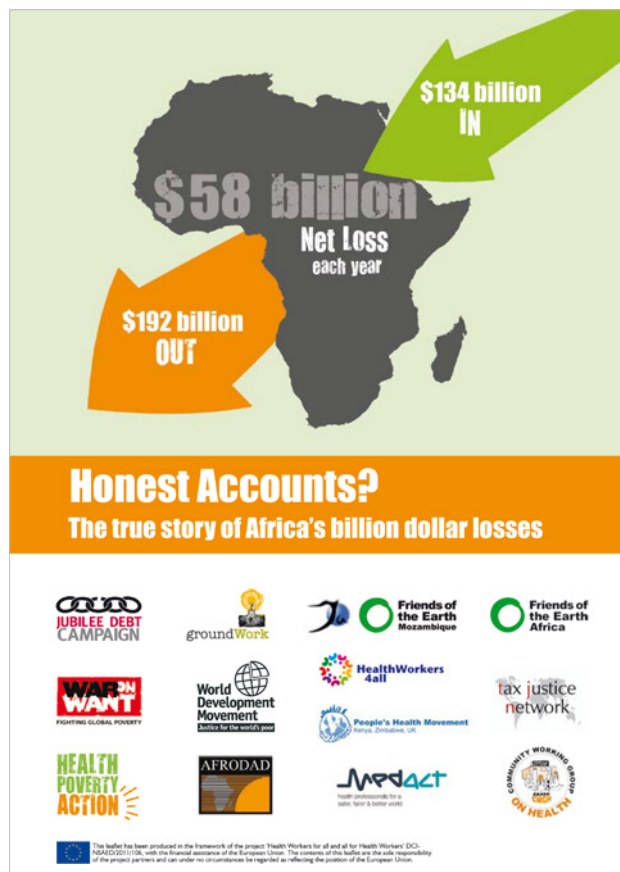
## Private Finance Initiative

The onerous debts incurred by PFI contracts and the subsequent cuts in NHS jobs and services means that they are a bad deal for patients, health workers and the tax payer. However, the secrecy and complexity of PFI contracts has made it difficult to sustain an organised campaign against PFI. This is important because PFI is now being exported to the developing world where its effects can be expected to be even more severe. Medact has helped to establish a nationally coordinated campaign (People Vs PFI) which had a successful launch at the London School of Hygiene and Tropical Medicine.



**THE  
PEOPLE  
VS.  
PFI**

"Giving PFI a run  
for **our** money"



Medact, along with ten other organisations, joined Health Poverty Action in publishing research that reveals how Africa loses \$192 billion every year to the rest of the world. This research is the first attempt to calculate Africa's losses through a comprehensive account of: illicit financial flows; profits taken out of the continent by multinational companies; debt payments; brain drain of skilled workers; illegal logging and fishing and the costs incurred as a result of climate change.

# Health and Human Rights



Medact does not provide frontline clinical services or humanitarian relief, but it promotes a culture of medicine and clinical care that is ethical and based on universal human rights. It exists to defend and protect the rights and health of those who are unjustly persecuted, oppressed, imprisoned, tortured and made to suffer cruel and degrading treatment.

Medact also acts on the premise that in today's economically integrated and globalised world, rights and entitlements to essential health care should not be denied on the basis of a person's official migration status.

*Refugees and immigrants in a detention centre in Greece. Southern Europe is the entry point for many refugees fleeing conflict, poverty and the effects of climate change.*

## **Support for Doctors Working in Immigration Detention Centres**

In recent years, there has been an increase in the number of asylum seekers and refugees being transferred to immigration detention centres.

The doctors employed in detention centres have little time or training to support vulnerable asylum seekers who have been tortured and they often feel conflicting loyalties between their duties to their patients and to their employers. Despite this conflict, immigration detention centre doctors issued roughly 1500 medical reports in 2014 that raised concerns about asylum-seeker patients who had previously been tortured. Unfortunately, the Home Office rejected over three quarters of these reports for failing to meet inconsistent standards evidence, which the Home Office have failed to clarify. As a result people with serious mental or physical illness or the obvious consequences of torture are detained for extended periods in violation of Home Office policy. This does huge harm and wastes a lot of public money.

With generous support from the Royal Society of Medicine, Medact has established a forum for doctors working in immigration detention centres to interact with medical colleagues experienced in the documentation of torture. The purpose of the forum is to help support immigration detention centre doctors in their efforts to improve performance in this area.

## **Documenting Evidence of Torture**

Reported instances of torture from newly arrived asylum seekers and refugees in the UK have been increasing in recent years. Primary care providers, who are often the first port of call for newly arrived settlers, often have little experience in dealing with victims of torture. In response, Medact, in partnership with the Royal Society of Medicine, started the UK's first publicly available training for health professionals in the clinical documentation of torture. Sessions included obtaining and using photographic evidence of torture, role-playing the presentation of medical legal reports in court and the importance of understanding the experience of torture survivors going through the UK's lengthy immigration process in detention centres.

## **Medical Ethics: Education at the Bleeding Edge**

We live in a world where the right to health is being denied on an extraordinary scale. Addressing this issue requires a joined-up response from a range of civil society groups, including health professionals, academics, human rights organisations and activists. In order to facilitate dialogue between these groups, Medact, in partnership with Brighton University, hosted a two-day conference that ran sessions on the medical impacts of human rights violations around the world, clinical decision-making in extreme situations and how campaign groups can make best use of health professionals in their campaigns.

# Climate and Ecology



Climate change threatens to reverse the health gains made over the last century. Importantly, it is a 'threat multiplier' that will impact negatively on health by increasing socio-economic inequality and raising the risk of conflict. In spite of this, the world as a whole is still burning fossil fuel in greater amounts from one year to the next.

There is an increasing recognition in the health community that climate change is potentially the most important threat to global health. Medact is at the heart of the growing movement of health professionals in the UK calling for action on climate change and making the argument that an ecologically sustainable world could also be a better, healthier and fairer world.

*Medical students, nurses, doctors and health academics join the Fossil Free Health bloc on Global Divestment Day, 14 Feb 2015, for a day of action outside London's City Hall, part of a global grassroots mobilisation led by 350.org aimed at raising awareness and strengthening the fossil fuel divestment movement worldwide.*

## Land, food, farming and climate

Globally, food systems and human diets are unhealthy and unsustainable and Medact has started work aimed at describing the inter-connections between health, land use, the overuse of antibiotics in farming, climate change and diets.

As part of this, in 2014 Medact joined the Eating Better Network, which is a coalition of organisations such as Oxfam and the Soil Association that have come together to promote sustainable food systems and diets. Medact is one of the few partners in the coalition that approaches food from a health angle, for example, by looking at the benefits to health and the environment of reducing meat consumption.

Added to this, major concerns exist about the unregulated use of antibiotics in farming. Medact, along with the Royal Society of Medicine and Alliance to Save Our Antibiotics, held a small meeting at the RSM drawing together international public health specialists, veterinarians and policy makers to discuss these issues.

## Fracking – an *inherently risky activity*

The UK government is presently set to expand 'hydraulic fracturing' of shale formations ('fracking') as a means of extracting unconventional gas, arguing that it will create jobs, will lower the cost of energy and is less carbon emitting than coal or oil. A report produced by Public Health England essentially declared fracking to be safe from the direct effects of pollution if regulated effectively. However, this report failed to assess many of the wider and indirect impacts of fracking on health, including its contribution to climate change, and it also did not assess whether fracking would be regulated effectively.

In response, Medact conducted its own assessment of fracking and found evidence suggesting that fracking does pose significant risks to human health but is also likely to be incompatible with the UK's global commitments to reduce greenhouse gas emissions. Our report was supported by a letter in the BMJ signed by prominent health professionals who stated that '*Fracking is an inherently risky activity that produces hazardous levels of air and water pollution that can have adverse impacts on health.*' The letter and the report were featured in the national press and have been used widely by local campaigns in counties where fracking is being considered.



### Divestment

Over the last 12 months, Medact has been working with a group of medical students, health professionals and partner organisations to support the divestment movement. Divesting from fossil fuels sends an important message to the world that climate change requires immediate preventative action through an urgent reduction in greenhouse gas emissions and rapid transition to a low-carbon energy system.

As a community committed to improving health worldwide, UK-based organisations such as the medical Royal Colleges, the London School of Hygiene and Tropical Medicine and the Wellcome Trust, should remove their investments from an industry whose very business model threatens to undermine human and planetary health.

In June 2014, the health divestment campaign enjoyed its first success when the British Medical Association voted to take its investments out of oil, gas and coal companies, becoming the first medical representative body and

health institution in the world to do so. In February 2015, Medact worked with a coalition of health organisations, led by Healthy Planet UK, to publish a report, 'Unhealthy Investments', outlining the moral, financial and public health case for divestment.



*'We should push our own organisations to divest from fossil fuel industries completely and as quickly as possible, reinvest in renewable energy sources, and move to "renewable" energy suppliers.'*

Editorial in the British Medical Journal,  
26 March 2014

*'The arguments against fracking on public health and ecological grounds are overwhelming. There are clear grounds for adopting the precautionary principle and prohibiting fracking.'*

Letter in the British Medical Journal signed by prominent health professionals in support of Medact's report on Health & Fracking,  
27 March 2015

# Peace and Demilitarisation



War, conflict and military threat cause widespread human suffering and perpetuate inequalities and injustice. Despite their best efforts, the last year has seen humanitarian organisations struggle to alleviate the suffering caused by war and conflict in Syria, South Sudan, Yemen, Iraq, Afghanistan, Ukraine, Palestine-Israel and elsewhere.

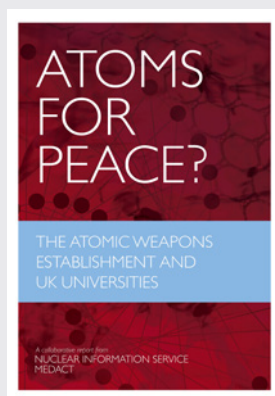
It is likely that the trend of rising conflict and war will increase unless we halt further global warming, reverse the widening of inequalities, and diminish mistrust between countries, regions, religions and cultures.

However, peace advocacy has dropped off the agenda of many public health institutions, both in the UK and worldwide. Medact hopes to change this and strengthen 'public health' and 'social medicine' as countervailing forces to 'militarism'.

## **Gaza, 2014: Findings of an independent medical fact-finding mission**

On 8 July 2014, Israel initiated a military offensive in the Gaza Strip. During the course of the conflict, Medact, in July 2014, supported an independent medical fact-finding mission of eight health professionals to Gaza to investigate concerns over human rights violations. The mission, organized by Physicians for Human Rights-Israel made three separate trips to gather forensic, medical and other material evidence. The subsequent report has been presented to the United Nations and its recommendations included that 'the prima facie evidence gathered should be used for the purposes of legal determination of violations of international human rights and humanitarian law, whether through local or international justice mechanisms.'

*Above: On 8 July 2014, Israel initiated a military offensive in the Gaza Strip, which lasted for seven weeks. Most estimates put the number of residents of Gaza killed in the 50-day armed conflict at over 2,100, of whom at least 70% were civilians, including over 500 children. Over 11,000 were wounded and over 100,000 made homeless. According to Israeli estimates, 73 Israelis were killed, of whom 67 were soldiers and 6 were civilians (including one child and one migrant worker). A further 469 soldiers and 255 civilians were wounded.*



*Medact, in partnership with the Nuclear Information Service, produced a report in 2014 on the research links between AWE (The Atomic Weapons Establishment) and UK universities. We found that almost half of UK universities have links with AWE and that some of this research has the*

*potential for both peaceful and military purposes. To help universities and researchers navigate ethical issues and avoid supporting the military industrial complex, we produced a set of model ethical guidelines that were presented with the report.*



*Medact has been at the forefront of attempts to quantify the full costs of war. In 2002 it released an influential report on a modelled estimate of the impact of the Iraq invasion of 2003. Health Impact Assessments are sometimes used by governments to assess the impact of peace-time infrastructure projects.*

*Medact applies this principle to war and we developed a new methodology to assess the full impact of a possible military attack on Iran.*

### Medicine, Conflict and Survival (MCS)



Medicine, Conflict and Survival (MCS) is the designated journal of Medact and its international partner IPPNW. MCS is aimed at all those interested in health aspects of violence and human rights.

Founded in 1985, it is published quarterly by Routledge. MCS has published material on the

following issues: the causes and consequences of war and group violence; the health and environmental effects of war and preparations for war, especially from nuclear,

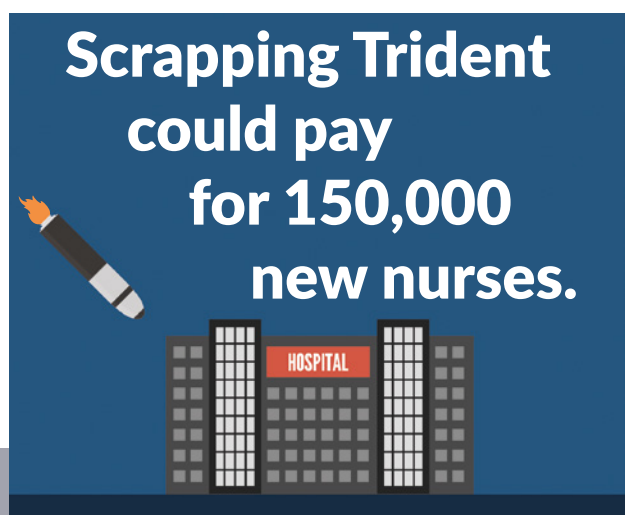
radiological, chemical and biological weapons of mass destruction; the influence of war and preparations for war on health and welfare services and the distribution of global resources; the abuse of human rights, its occurrence, causes and consequences; the ethical responsibility of health professionals in relation to war, social violence and human rights abuses; non-violent methods of conflict resolution; medical and humanitarian aid in conflict situations; relationships between the environment, development and global security; and the roles and responsibilities of governments and of international governance in reducing the risk of violent conflict.

## Nuclear disarmament

Medact, the UK affiliate of the International Physicians for the Prevention of Nuclear War (IPPNW), is the UK's medical voice for a nuclear weapons-free world and works closely with like-minded organisations including the International Campaign to Abolish Nuclear Weapons (ICAN) and BASIC (the British American Security International Council).

Although the current nuclear Non-Proliferation Treaty (NPT) obliges nuclear weapons states to disarm, it has no time-scale and the nuclear powers are frustrating progress. In December 2014, Medact was in Vienna where it supported the 'Austrian Pledge', which calls for a speedy new legal process to ban nuclear weapons. Lack of consensus or any progress at the Review Conference of the NPT in May this year has now led 108 nations to sign up to the Pledge.

Medact contributes regularly to IPPNW programmes, has lobbied governments (with IPPNW colleagues, the EU and NATO) and has held discussions with Westminster and Scottish parliamentarians. Earlier this year at Faslane, Medact Scotland and ICAN-UK demonstrated against Trident.

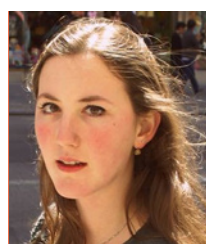


Above: Medact members have pursued an online action against the renewal of Trident, through expressing their opposition to it in emails to prospective parliamentary candidates and asking the candidates how they will vote on the issue in 2016.

## Medical Peace Work

Medact is the UK partner for a EU-funded Medical Peace Work (MPW) project. MPW is an on-line learning platform for health professionals. As part of this project, Medact is developing teaching materials on the health impacts of climate change and on the role of health professionals in advocating for the prevention of torture.

Through MPW, Medact provided grants to enable five young people from the UK to attend a week-long course in Norway on 'War, Violence, Health and Peace'. Lotte Elton, a medical student at the University of Newcastle, was one of those who went:



*'It was a great experience to be able to study alongside, and learn from, health students and professionals from so many different countries and professional backgrounds: from German medical students campaigning on peace issues, to*

*Palestinian nurses crossing military checkpoints to go to work, and British medical doctors working with victims of torture. Thanks Medact for giving me the opportunity to go.'*

Website: [www.medicalpeacework.de](http://www.medicalpeacework.de)

Facebook: Medical Peace Work

# Treasurer's Report

These accounts are unaudited management information and are currently being independently examined. Compared with the previous year of 2013-14, membership subscriptions during 2014-15 were down by £3,304, donations by £12,669 and appeals by £12,329. Consequently, the amount recovered from Gift Aid was also reduced – to £6,072. The donations during the previous year 2013-14, at £32,512, seem to have been particularly well boosted, as during 2012-13 they were £18,643 and during 2014-15 were £19,843. Furthermore, the special appeals raised a very disappointing £11,123 – less than half the amount in recent years. Hence the total unrestricted income during 2014-15 was £103,162 compared with £134,921 the previous year. However, careful management and reduced staff costs during 2014-2015 have led to an expenditure of £103,187, producing a deficit of only £25.

During 2014-15 we received grants of £43,157 for restricted projects, almost entirely from the Joseph Rowntree Charitable Trust, and the Polden- Puckham Charitable Foundation, for supporting the work of ICAN UK: these grants were £24,971 more than the single grant of £18,186 received in 2013-14 for the Health Impact Assessment (HIA) project.

The overall effect on income is that the total (restricted and unrestricted) during 2014-15 was £146,319, only £1,917 less than the total (restricted and unrestricted) £148,236 received in 2013-14.

In addition, significant project underspends in 2014-15 had the effect of increasing our reserves, so that our total assets at 31st January 2015 are recorded at £67,023. This position is not quite as healthy as it appears, as we are obliged to complete the expenditures on all our projects during the current year which would decrease our reserves by about £18,000.

Fundraising and building up a healthy reserve therefore remain high priorities for all involved with Medact. Hard work and an increasing profile of Medact's activities have reversed the trend of a falling membership which should increase our membership-related income. It is also highly desirable to procure more donations from non-member sympathisers and to address the falling income from the Special Appeals, especially in this 70th Anniversary year of the A-bombings of Hiroshima and Nagasaki.

I am particularly grateful to Medact's office staff, Chris Venables and Vic Ponsford, to the volunteers managing the membership data-base, to the anonymous donors, and to William Buckland who has agreed to take over the Treasurership, from the beginning of the current financial year.

**Frank Boulton**

Treasurer

1st June 2015

# Accounts

## Summary of Accounts financial year ending 31<sup>st</sup> January 2015

Management Summary of Accounts (Total for FY ending 31st Jan 2014 in final column)

	Unrestricted 2015 £	Restricted 2015 £	Total 2015 £	Total 2014 £
<b>Income</b>				
Membership subscription	48,989		48,989	52,293
	19,843		19,843	32,512
	11,123		11,123	23,452
	9,612		9,612	15,684
<b>All voluntary income</b>	<b>89,567</b>		<b>89,567</b>	<b>123,941</b>
Activities generating funds				
Teaching	-		-	192
Conferences	6,506		6,506	4,607
Sales	-		-	248
Investments <sup>1</sup>	231		231	61
Grants <sup>2</sup>	6,858	43,157		18,186
<b>TOTAL INCOME</b>	<b>103,162</b>	<b>43,157</b>	<b>146,319</b>	<b>148,236</b>
<b>Expenditure</b>				
Costs of income generation	7,871		7,871	8,866
Wages, pensions and social security costs <sup>3</sup>	35,077		35,077	47,881
Consultancies <sup>4</sup>	20,224	23,000	43,224	18,380
Staff, consultant & volunteer expenses	1,751	2,564	4,315	1,256
Governance costs	6,612		6,612	6,833
Office costs etc <sup>5</sup>	31,652		31,652	46,418
<b>TOTAL EXPENDITURE</b>	<b>103,187</b>	<b>25,564</b>	<b>128,751</b>	<b>129,634</b>
NET Surplus/(Deficit)	(-25)	17,593	17,568	18,601
<b>Assets</b>				
Tangible <sup>6</sup>	2,085		2,085	2,711
Bank account, 31st Jan	43,414	24,441	67,885	53,580
Liabilities (sundry creditors)	(2,197)		(2,197)	(6,816)
<b>NET ASSETS</b>	<b>42,582</b>	<b>24,441</b>	<b>67,023</b>	<b>49,475</b>

### Notes

- Investments come mostly from our bank accounts
- Unrestricted grants mostly for office management for the Medact/IPPNW Journal Medicine, Conflict and Survival: Restricted costs for the HIA and ICAN UK projects
- Wages are for the two members of staff, one of whom was on extended unpaid leave
- Consultancies included financial management, ICAN UK and specific projects on PFI and Climate Change
- Office costs for 2014 included extra costs for computer upgrade and website development
- Tangible assets are for equipment and include depreciation costs

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## Special thanks to

Danny Allens, John Ashton, Regina Bash-Taqi, Joel Benjamin, John Bisset, Elena Blackmore, Michael Bradshaw, Isobel Braithwaite, Julia Buxton, Elena Carter, Cornelius Catona, John Christensen, Deborah Cohen, Soledad Cuevas, Maysoon Dahab, Eleanor Dow, Martin Drewry, Miranda Eeles, Paul Ekins, Elizabeth Forrester, Thomas Gebauer, Fiona Godlee, Hugh Grant-Peterkin, Andy Haines, Jake Hays, Jason Hickel, John Hilary, Mike Hill, Jon Hoare, Kat Hobbs, Richard Horton, Will Horwitz, Emma Howard, Catherine Howarth, Anuj Kapilashrami, David Kidney, Ron Labonte, Adam Law, Eddie McCaffrey, Helen McColl, Christophe McGlade, Martin McKee, Sophia McNab, Elizabeth Molinari, Hugh Montgomery, George Morris, Amy Mount, Alice Munro, Mary O'Hara, David Pencheon, Angela Raffle, Lucy Reynolds, David Rhys Jones, Katharine Round, Frank Rugman, Sid Ryan, Ina Schim Van der Loeff, Babulal Sethia, Rachel Stancliffe, Taavi Tillmann, Sarah Walpole, Alistair Wardrope, Jim Watson, Richard Whittell, Ruth Wood.

## Organisations we've been working with

Alma Mata, British American Security Information Council (BASIC), British Medical Association (BMA), British Medical Journal (BMJ), Bureau of Investigative Journalism (BIJ), Campaign Against Arms Trade (CAAT), Campaign for Nuclear Disarmament (CND/CND Scotland), Carbon Tracker Initiative, Centre for Investigative Journalism (CIJ), Centre for Sustainable Healthcare, Change to Win, Changing London, Chatham House, Children's Society, Climate and Health Council, Corporate Watch, DocsNotCops, Doctors of the World, Entitlement Working Group, Equality Trust, Evidence for Development, Freedom From Torture, Friends of the Earth, Greenpeace, Green Alliance, Health Poverty Action (HPA), Helen Bamber Foundation, Horn of Africa Health & Wellbeing Project, Immigration Law Practitioners Association, International Campaign to Abolish Nuclear Weapons (ICAN), International Centre for Health and Human Rights, International Committee of the Red Cross (ICRC), International Physicians for the Prevention of Nuclear Weapons (IPPNW), King's College London (KCL), London School of Economics (LSE), London School of Hygiene and Tropical Medicine (LSHTM), Maternity Action, Medical Information for Ethnic Minorities (MIEM), Medical Justice, Medicine, Conflict and Survival (MCS), Medsin, Migrant and Refugee Communities Forum, Move Your Money, National Aids Trust (NAT), Nuclear Information Service, Open Democracy, Operation Noah, Oxfam, Oxford University, People & Planet, People's Health Movement UK, Physicians for Human Rights Israel, Public Interest Research Centre (PIRC), Queen Mary University London, Reprieve, Request Initiative, Royal Society of Medicine (RSM), Save the Children, Scientists for Global Responsibility, ShareAction, Socialist Health Association (SHA), Spinwatch, Still Human Still Here, Stop Climate Chaos, Tax Justice Network (TJN), The Guardian, The Lancet, The Spirit Level Documentary, The Terrence Higgins Trust, 350.org, UK Health Forum, Unite, University College London (UCL), University of Brighton, War on Want, Weapons of Mass Destruction Awareness, Wellcome Trust.



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Medact is an affiliate of the International Physicians for the Prevention of Nuclear War.

Registered Office: As above. Registered Charity No. 1081097. Company Registration No. 2267125.

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