



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 interconnected programme areas.



**Peace & Security** 



**Climate & Environment** 



**Economic Justice** 



**Human Rights** 

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 – to find out more about membership, please visit our website.

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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

Medact has once again had an eventful and effective year.

This report sets out the broad scope of activities undertaken by staff and members, working to ensure that health professionals have a voice in discussions about issues such as conflict, climate change and economic inequality that threaten the long term well-being of the planet and all who depend upon it.

The quality and evidence base for our reports and contributions ensures that they are valued and have an impact disproportionate to our small size. This is enhanced by collaboration with partners and supporting organisations, including the Esmee Fairbairn Foundation, the Polden-Puckham Charitable Foundation, the Sainsbury Family Charitable Trusts and the Joseph Rowntree Charitable Trust.

I wish to thank everyone who has contributed to our work during the year. I am grateful to all the Trustees for their support and to the staff for their hard work.

Most importantly, I wish to thank our Director, Dr David McCoy, whose understanding, passion and tireless dedication to the organisation and its mission have been central to Medact's success over the past five years. He will be greatly missed as Director, but I know that he will continue to support us in many ways. Thanks to all his work, we can face the coming year with continued confidence and energy.

**Dr June Crown CBE**Chair



# Director's Report

In spite of evidence that child mortality and life expectancy is improving worldwide; and that the world has chosen to make universal health coverage a key component of the Sustainable Development Goals, it's hard to escape the feeling that the world has become more dangerous, marked by greater levels of armed conflict, terrorism and international tension, and by more evidence of climate change and ecological degradation.

In many parts of the world, politics has also become more ugly, with nationalistic xenophobia, racism and religious intolerance becoming more overt and acceptable in everyday discourse. And the world has become more unequal, with power and wealth continuing to accumulate in the hands of an ever smaller number of individuals.

This is why, for the last five years, Medact has been developing a platform for the health community to generate belief and hope that the world can be better, fairer and safer.

But we need more than just conventional public health interventions. We need big picture social, political, economic and cultural interventions that will improve and protect global health through systemic and structural change. We need redistribution of power and wealth across society, within and across countries. We need programmes of tolerance that will build bridges across cultural, religious and ethnic divides. And we need models of thinking and behaviour that will allow us to relate to our planet and nature in less violent and destructive ways.

The health community should be at the heart of these changes. That's why Medact exists, working to build a progressive and ambitious movement that works across a broad canvas of work, including climate change, economic inequality, militarisation and refugee health, amongst other things.

It's also why Medact works in partnership with many other organisations, whether they be Greenpeace and Friends of the Earth who share our concerns about ecological degradation, or the New Economics Foundation, who are developing new economic models that work as if people and the planet matter.

Since it was relaunched in 2013, Medact has been on an upward trajectory, becoming established as a well known and independent public health charity that looks squarely at the big picture, while also making many pragmatic contributions to change at a smaller level. This report outlines the wide range of activities which Medact has undertaken in the past year, and the hard work and amazing contributions made by the staff, volunteers and members of Medact.

Medact must continue to grow and flourish. Crucially, it is time for it to be run by a full time Director who can focus exclusively on the organisation. For this reason, I am happy to say that this will be my last report as a Director. But I look forward to supporting Medact's further development in a new capacity.

**Dr David McCoy** Director

# Refugee Access to Healthcare

The right of everyone to 'the highest attainable standards of physical and mental health' is enshrined within the 1966 UN International Covenant on Economic, Social and Cultural Rights (ICESCR) placing both a moral and a legal imperative on the UK to produce policies that do not infringe on the rights of all those that live within its borders. Yet within the UK, over the past decade or more, we have witnessed an increasingly restrictive policy around entitlement to healthcare for those without a defined immigration status.

Medact's Refugee Solidarity Group (RSG) has worked with Doctors of the World UK to deliver a training package covering refugee and migrant rights to healthcare and the potential challenges to their accessing NHS services. Eight members of the RSG attended a Train the Trainer (ToT) session, enabling them to deliver the training package across the country. So far, almost 250 doctors and medical students have received the training within university settings, as well as at the Medact conference and AGM. Further members of the RSG will participate in ToT sessions in August 2017.

In November 2016, the RSG also campaigned against St George's Hospital Trust's proposal to require women to provide proof of their immigration status before being allowed to access maternity care. An open letter, signed by more than 200 doctors and medical students, called on the Trust to cancel this pilot scheme.



 $\label{thm:mediact} \mbox{Mediact's Refugee Solidarity Group exists to promote and support the healthcare rights of a vulnerable segment of the population$ 

## Treatment of prisoners & detainees

In May 2017, Medact supported the Physicians for Human Rights Israel (PHRI) campaign against force feeding and force treatment of Palestinian prisoners in Israeli jails. Director David McCoy sent letters of concern to both the British Medical Association and the World Medical Association. Discussions are currently taking place with the International Advocacy team at PHR-I about the possibility of partnering on future research projects.

## Medical Peace Work online course

A free six-week eLearning Medical Peace Work MOOC (massive open online-course) for healthcare workers was released this year, with modules on: (1) Recognising signs of domestic violence in clinical practice (2) Recognising and healing the effects of torture (3) Providing appropriate healthcare for refugees (4) Conflictsensitive peace-health work in war and postwar areas (5) Preparing for the health effects of climate change (6) Responding to a nuclear explosion. Medact was involved with producing three of the modules as part of the European Medical Peace Work Partnership, and Medact members are now employed as course facilitators. The course is now being offered on a rolling basis by the University of Bergen in Norway.



# Sustainable Food Systems, Diets & Health

### Promoting healthy & sustainable diets



"The food on our plates not only impacts our individual health, but also has significant implications for the health of the planet upon which human health is reliant, and for our ability to feed current and future generations equitably. Any discussion of healthy eating, must focus on diets which consider both environment and nutrition." Medact/Eating Better Alliance policy briefing

In March 2017, Medact worked with the Eating Better Alliance to:
a) produce a policy briefing that made the case for urgently shifting towards more sustainable diets; b) examine the UK dietary guidelines (The Eatwell Guide); and c) make recommendations to the government on how they can drive the change towards more sustainable eating. The briefing focused on the need to promote the key health and sustainability message to reduce meat and dairy consumption and eat

more plant-based foods. Medact is now working on an exciting collaboration with the Lambeth GP Food Co-op to establish food growing gardens in GP surgeries and NHS trusts across London.

### Healthy & sustainable hospital food

Hospitals should provide a food environment that is both healthy and sustainable, for patients, visitors and staff. All too often this is not the case. In 2016 Medact worked with the Campaign for Better Hospital Food, UNISON, CASH and the Soil Association to put pressure on commercial retailers operating in hospitals to comply with NHS England's Commissioning for Quality and Innovation (CQUIN) payments framework around High Fat Salt and Sugar (HFSS) foods. This work resulted in the publishing of a Healthy Hospital Food League Table which encouraged retailers to commit even further to meeting CQUIN targets, in order to move up the table.

Medact has also worked with the Soil Association to support the Campaign for Better Hospital Food implement a survey of hospital food survey in 30 of London's 39 acute hospitals. The findings formed the basis of Taking the Pulse of Hospital Food, a review of NHS hospital food standards across London.

To further campaigning on this issue, Medact has helped interested health professionals in Oxford to set up a local group focused on improving hospital food; and is currently finalising two publications to further inform campaigners. The first, a situational analysis of the hospital food legal and policy environment, provides background to the current landscape, while an accompanying campaign toolkit will provide resources for campaigning for change.

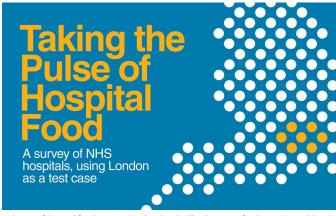
### Food systems & sustainability in undergraduate medical education

Medact is collaborating with Nottingham University's School of Health Sciences to develop a suite of open-source Reusable Learning Objects (RLOs) on food, health and sustainability which can be easily integrated into teaching among medical, nursing and dietetic students.

Medact has also given lectures and run workshops on food, health and sustainability at numerous universities in the past 12 months, as well as delivering a workshop at the International Congress of Dietitians in Granada on mainstreaming sustainability in food policy.



Delivering a workshop on sustainable food for medical students in Glasgov



Survey of hospital food provision undertaken by The Campaign for Better Hospital Food with support from Medact

# Antibiotics use in farming & antimicrobial resistance

Following our successful conference on the subject in 2016, Medact has continued to work on the danger of mass medication of intensively farmed livestock.

In November 2016, Medact co-ordinated an open letter to Secretary of State for Environment, Farming and Rural Affairs Andrea Leadsom and Secretary of State for Health Jeremy Hunt, published in the Telegraph and signed by 15 health leaders (including the Royal College of GPs, Royal Society of Medicine, Royal College of Paediatrics and Child Health, Royal College of Physicians, Faculty of Public Health, Royal College of Nursing, British Medical Association, Royal College of Emergency Medicine, President, Royal College of Pathologists and the Royal Pharmaceutical Society, among others). The letter was widely covered by industry media and called for the adoption of stronger domestic policy around antibiotic use in farming.

Dialogue with the alliance for Responsible Use of Medicines in Agriculture (RUMA) has led to an invitation to discuss and observe veterinary antibiotic stewardship first hand. Medact has arranged a visit for various health leaders (including at least 11 Presidents and Executives from various Royal Colleges, as well as the CMO) to a working farm, with the aim of strengthening relationships between health and animal medicine, and engaging the livestock industry on the issue of antibiotic resistance.

Medact has also worked with the Food Climate Research Network at Oxford University to develop four chapters on antibiotic use in livestock farming for their FoodSource website which provides information to support those teaching, learning and communicating about food systems and sustainability.

## Healthy Planet, Better World

On 9-10 December 2016, Medact's fourth annual conference, Healthy Planet, Better World, brought together researchers, campaigners, health professionals and the public to discuss the links between human and planetary health.

The conference hosted over 65 speakers from a broad range of partner organisations, and was attended by over 450 members of the health community. The two days of the conference provided opportunities first to learn about the issues at hand in lectures and panel discussions to develop solutions in talks and workshops. Interconnecting streams on the Friday took delegates from underlying, systematic drivers that challenge sustainability and health, through their health impacts, and on to steps for mitigation - with a particular focuses on our current economic, energy & food systems. The Saturday began with plenaries inspiring and challenging in equal measure, covering the possibilities, and difficulties, for effecting change; followed by a number of skill shares on both campaigning and approaches for health professionals in their every-day practice.

Beyond the central programme, the conference also served as a platform for individuals and organisations to develop new networks; and cultural events each evening provided a welcome space for reflection on the challenges at hand. Finally, the Saturday of the conference saw delegates join in the launch of Medact's new Doctors Against Diesel campaign.

Resources from the conference, including videos, audio recordings and slides from many of the sessions are available on the Medact website.



"We need to meet everybody's rights, to food, to health, to education, but at the same time, we ultimately depend upon the health of our planet. What I think is wonderful about this conference is that it's precisely aiming to bring them into the same conversation and look at their interdependencies, any tensions between them, to bring people who often work in completely different fields, into one conversation together"

Kate Raworth, Doughnut Economics

HEALTHY PLANET
BETTER WORLD
CONFERENCE PROGRAMME

oose health. Choose a green energy supplier. Choose walking CYCLING INSTEAD OF DRIVING. CHOOSE A SUSTAINABLE HEALTH SERVI CHOOSE EATING LESS MEAT AND MORE PLANTS, ENGAGING WITH NATU ND BANKING WITH AN ETHICAL PROVIDER, CHOOSE NOT TO FLY, CHOO CAMPAIGNING ON THE ISSUES THAT MATTER TO YOU, AND VOTING FO POLITICIANS WHO ARE COMMITTED TO ACTION ON CLIMATE CHANGE HOOSE NOT PRESCRIBING ANTIBIOTICS UNLESS ABSOLUTELY NECESSA IOOSE YOUR FUTURE. CHOOSE THIS BAG. CHOOSE A HEALTHY PLANET A BETTER WORLD. CHOOSE HEALTH. CHOOSE A GREEN ENERGY SUPPLI OOSE WALKING OR CYCLING INSTEAD OF DRIVING. CHOOSE A SUSTAIN ALTH SERVICE. CHOOSE EATING LESS MEAT AND MORE PLANTS, ENGA ITH NATURE AND BANKING WITH AN ETHICAL PROVIDER. CHOOSE NO FLY. CHOOSE CAMPAIGNING ON THE ISSUES THAT MATTER TO YOU, AT VOTING FOR POLITICIANS WHO ARE COMMITTED TO ACTION ON CLIMA CHANGE. CHOOSE NOT PRESCRIBING ANTIBIOTICS UNLESS ABSOLUTE CESSARY. CHOOSE YOUR FUTURE. CHOOSE THIS BAG. CHOOSE A HEA ANET AND A BETTER WORLD. CHOOSE HEALTH. CHOOSE A GREEN ENI UPPLIER, CHOOSE WALKING OR CYCLING INSTEAD OF DRIVING, CHOOS SUSTAINABLE HEALTH SERVICE. CHOOSE EATING LESS MEAT AND MOR ANTS, ENGAGING WITH NATURE AND BANKING WITH AN ETHICAL PRO

"The way that governments change their minds, do new things, is through pressure from their voters. So the more that we can join hands and make the same arguments from different perspectives, the sooner change is going to happen. It was great to interact with Medact and with health professionals to bring our agendas together"

Sonja Vermeulen, Head of Research CGIAR

"The work of Medact over the years has been extremely important. It's been incredibly useful, vital in fact, to have voices from the medical community giving hard evidence and persuasive arguments for action"

Ashok Sinha, London Cycling Campaign



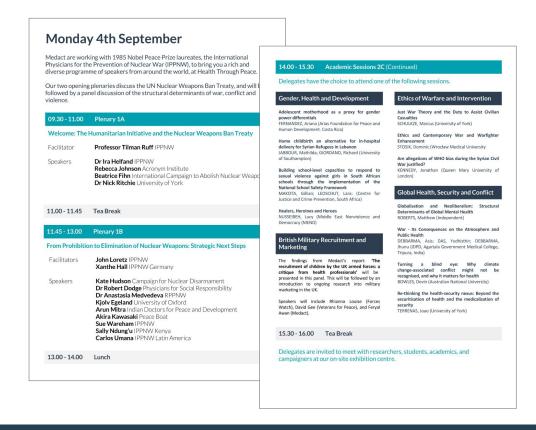
# Health Through Peace 2017

In September 2017, Medact and the International Physicians for the Prevention of Nuclear War (IPPNW) will bring together health professionals and peace activists to debate, educate and advocate for social justice and demilitarisation. Taking place over three days in York, Medact's largest conference yet will coincide with the 21st IPPNW World Congress, which returns to the United Kingdom for the first time since 1982.

Building on the momentum created by the 2015 Health Through Peace Conference, the congress already features a packed programme of plenaries, academic sessions and workshops. Key speakers include former Director of London School of Hygiene and Tropical Medicine (LSHTM) Professor Sir Andrew Haines, President-Elect of the World Medical Association Dr. Yoshitake Yokokura, General Secretary at Campaign for Nuclear Disarmament Kate Hudson and Archbishop of York Dr John Sentamu; and many more experts from the worlds of academia and campaigning, both on the peace and medical sides, are involved.

Delivering such a wide and comprehensive programme is only possible with the support of a wide network of partner organisations. IPPNW, the University of York and the Hull York Medical School (HYMS) are all joining with Medact in co-hosting the event. More broadly, the conference provides the opportunity for Medact to develop long-term strategic relationships with organisations including Medecins Sans Frontieres (MSF), Health Poverty Action and Scientists for Global Responsibility.

The residential accommodation at the University of York will offer a unique opportunity building relationships and networks between members of Medact, IPPNW and the wider peace and health communities. A formal congress dinner on the opening night, in the year of the adoption of the nuclear weapons ban treaty, is set to be a particular highlight and focus for this.









4-6th Sept 2017

**University of York** 

**HEALTH** 

through **PEACE** 































ORG 5





# Militarisation & arms control

# The medical case against child recruitment by the UK armed forces

The UK stands apart from most countries worldwide in recruiting children (under-18s) into the armed forces. It is the only European nation, and only permanent member of the UN Security Council, to recruit 16 year-olds.



Launch of the new report, hosted by Medact Brighton

In October Medact published a detailed report outlining the medical arguments against encouraging 16 and 17 year-olds to join the British military. The report found that military recruitment marketing takes advantage of adolescent cognitive and psychosocial vulnerabilities, and that current practices for recruiting children fail to meet the criteria for voluntary and informed consent. Moreover, child recruits are more vulnerable to PTSD, alcohol abuse, self-harm, suicide, death and injury during an armed forces career when compared to adult recruits.

The report garnered a significant amount of media coverage upon its release and was covered by the Guardian and Reuters, among others. In February, the report was cited as evidence by Plaid Cymru MP Liz Saville Roberts when tabling a motion on the issue for debate in the House of Commons.

As a follow up to this work, Medact is now working with Forces Watch on a report on the techniques used in recent and current UK military advertising campaigns to attract young people from disadvantaged backgrounds.

# Campaigning against UK arms sales to Saudi Arabia on health grounds

UK arms sales to violent and oppressive regimes enable, fuel and escalate human rights violations, violent conflict and poverty, as well as causing astronomical environmental damage. This year, sales of around £3.3billion worth of combat aircraft and bombs to Saudi Arabia have been directly involved in the armed conflict in Yemen, which has forced 2.4 million people to flee their homes and left over 22 million people in need of humanitarian support.

Medact's Militarisation and Arms Control Group campaigned for the UK to cease arms sales to Saudi Arabia in light of the Saudi Arabian-led coalition's war crimes in Yemen, including the targeting of hospitals and health facilities. In September 2016, the group wrote an open letter signed by leading health professionals calling for an embargo of arms sales to Saudi Arabia. This was followed up by a personal plea to former GP and Secretary of State for the Department of International Trade Dr Liam Fox from Medact member and GP trainee Sarah Al-Hulail.

# Nuclear Weapons

This long-standing strand of Medact's work has resurfaced in the public consciousness this year, with the renewed threat from global political instabilities, as well as the raised profile of advocates of disarmament in UK parliamentary politics.

Medact continues to believe that all states, powers or authorities which currently possess nuclear weapons must commit to disarm, dismantle and dispose of them all. Efforts continue to highlight the terrible consequences to health, humanity and the environment of the development, testing and use of nuclear weapons.

In the second half of 2016, the Medact-hosted ICAN UK (the UK arm of the International Campaign to Abolish Nuclear Weapons) developed a new campaign to alert the public to the passage of nuclear weapons convoys by road from Faslane to Aldernmaston. The 'Nukes of Hazard' initiative included the publication of a report into the transportation, as well as workshops and public meetings in a number of towns along the route. ICAN UK also attended the Labour Party conference at the invitation of the Labour Action for Peace group.

2017 saw the fruition of many years of work by nuclear disarmament campaigners worldwide with the opening of negotiations at the United Nations on an international treaty banning all nuclear weapons. This followed a vote in favour by the First Committee of the General Assembly in October 2016, with the support of the vast majority of states, but the notable exception of nuclear weapons states including the UK.

United Nations conference to negotiate a legally binding instrument to prohibit nuclear weapons, leading towards their total elimination

22 May 2017

Original: English

New York, 27-31 March 2017 and 15 June-7 July 2017

Draft Convention on the Prohibition of Nuclear Weapons

Submitted by the President of the Conference

The States Parties to this Convention,

Deeply concerned about the catastrophic humanitarian consequences that would result from any use of nuclear weapons and the consequent need to make every effort to ensure that nuclear weapons are never used again under any circumstances,

Cognizant that the catastrophic consequences of nuclear weapons transcend national

A first draft of the ban treaty was released following the first round of negotiations in May, and as of July 2017 the second round of negotiations were approaching completion. Medact has been working on a new report, to be launched in July 2017 following the conclusion of the Ban Treaty negotiations in New York. The report will be used as an advocacy tool to call on the health community and general public to reopen the debate on Trident.

In line with developments on the ban treaty, Medact has continued to put pressure on UK politicians regarding nuclear weapons policy. In March of 2017, the Nuclear Weapons Group (NWG) wrote a letter to Foreign Secretary Boris Johnson signed by a number of medical luminaries in support of the UN Ban Treaty negotiations, asking the United Kingdom to reconsider its decision to vote against the accompanying UN resolutions.

In the run up to the 2017 General Election, Medact and its NWG initiated a letter-writing campaign directed at parliamentary candidates urging them to unequivocally reject the idea of the UK making a "first use" of its nuclear arsenal - following the apparent championing of this possibility of UK by some candidates in the media. Letters sent by Medact to all major political parties urged adoption of a "no first use" policy, as a step towards disarmament.

Medact Scotland have continued their focus on this issue - including producing a 'Let's Get Rid of Trident' leaflet, and sending one of their members to New York for the ban treaty negotiations

Medact Trustee and NWG member Frank Boulton has also been working with the Pugwash-based 'Weapons of Mass Destruction Awareness Group' on a project to train young ambassadors to spread awareness among young people.

Left: The initial draft text of the UN ban treaty - "A legally biding instrument to prohibit nuclear weapons, leading towards their total elimination"

## Fossil Free Health

Medact has continued its work to encourage major health organisations to divest from fossil fuel companies this year.

In particular, Medact has been working with the BMA, the Royal Colleges, and their members on moves towards divestment of their portfolios.

As part of Global Divestment week in April 2017, Medact released a short film on divestment to highlight the health impacts of the fossil fuel industry and making a case for institutional divestment. Screenings were organised in Liverpool, London, Edinburgh and Bristol.

In May Medact launched "How To Divest A Health Institution" a carefully researched guide that outlines the steps needed for institutional divestment, including a discussion about the potential risks The guide, which acts as a companion piece to our 2015 report Unhealthy Investments, was shared with global network of medics interested in divestment, including supporters of the Guardian's "Keep it in the ground" campaign. It has been taken up by health professionals and campaigners across EU and as far afield as Canada, India, and Australia.



Medact guide to institutional divestment - taken up by campaigners as far afield as Canada, India, and Australia.



# Doctors Against Diesel

In December, at the Healthy Planet, Better World conference, Medact launched the Doctors Against Diesel campaign in Euston Square Gardens. Doctors, nurses, medical student, and health professionals called for diesel fuels to be banned in urban areas and to be progressively phased out elsewhere - receiving extensive media coverage from outlets including the BBC, the Huffington Post and the Evening Standard.

The launch of the campaign follows the growing body of research demonstrating that both long-term and short-term exposure to small particles and gases from fossil-fuel derived air pollution have major adverse consequences on health - and the realisation that, in London at least, nearly 40 per cent of all NOx emissions and PM10 pollution comes from diesel vehicles.

In January 2017, London breached NOx limits just five days into the new year. Doctors Against Diesel responded to this with a letter to Theresa May calling for a ban on diesel vehicles. Nearly 300 doctors, nurses and other health professionals signed the letter, receiving a great deal of media coverage. In March, Theresa May responded with an acknowledgement of the fact that diesel is a significant contributor to air pollution - the first Medact is aware of to a campaign group.

10 DOWNING STREET

THE PRIME MINISTER

9 March 2017

Down Professor Congs

I am writing to thank you and your co-signatories for your letter of 14 February about diesel vehicles and air quality.

The Government remains committed to improving air quality across the UK. Poor air quality is the fourth largest risk to public health, behind only cancer,

Following this, Medact organised a letter to Philip Hammond, calling for an increase in vehicle excise duty (VED) on diesel vehicles in the March budget.

After the publication of the government's draft Air Quality Plan to tackle unsafe air pollution, Doctors Against Diesel marched to Downing Street to deliver a giant Prescription for Clean Air to the Prime Minister in response to the weakness and inadequacy of the proposals. Medact also produced a formal response to the plan during its consultation phase, and encouraged members and supporters to do likewise.

To coincide with National Clean Air Day in June, Doctors Against Diesel launched a new campaign website and Facebook page, in a view to growing the body of support for action from the medical community in the coming year.



"Get diesel vehicles off the road, urge doctors" - The Times, 15 February 2017 (p8-9)

Left: Doctors Against Diesel delivered a giant petition for clean air to 10 Downing St

# Treasurer's Report

Medact had another good year financially in 2016/17. Total funds at 31 January 2017 increased to £165,000 from £150,000 at 31 January 2016.

Overall income increased by around 27%, from £279,000 to £356,000 in round numbers, reflecting additional grant income and consequent project activity. Grant income for our Food Systems & Health project (£84,000, up from £32,000 last year) and our Conflict & Health work (£27,000 in this financial year) were the principal contributors to this increase.

Grants to ICAN UK, which is treated in the accounts as a separate restricted fund, rose from £28,000 in 2015/16 to £55,000 in 2016/17.

Overall, expenditure increased from £196,000 to £341,000, giving a surplus of £15,000 versus the £83,000 achieved in 2015/16.

This reduction in surplus is in line with the forecast set out in the last Treasurer's Report, and relates to investment in office space and additional core staffing, around which core fundraising will continue to be a priority in the 2017/18 financial year.

Overall voluntary income in the form of donations and subscriptions (but excluding the necessarily more unpredictable legacy income (of which none this year) dropped from £87,000 to £79,000, with Gift Aid also dropping from £12,000 to £8,000, but this was largely balanced by new 'commercial' income of £14,000 related to the provision of hosting and staffing services to our friends at the Centre for Health & Public Interest (CHPI). The separate Hiroshima appeal brought in £8,500 rather than £10,000 this year, and will need to be better integrated with a wider membership drive in the 2017/18 year.

In terms of expenditure growth, staffing costs were of course the main element, up overall from £56,000 to £194,000 between 2015/16 and 2017, reflecting both project growth and concomitant increases in staffing. Specific management & administration fees rose from a very low base of £39,000 to a still manageable £63,000, with some of this increase reflecting improved office IT provision as well as £21,000 additional cost for premises, up from £9,000 to £30,000

Overall, Medact's financial position remains strong, though of the £165,000 total reserves at 31 January 2017 some £112,000 is restricted in its use, and work will need to be done this year to build free reserves through membership & donations growth, earned income, and appropriate full cost recovery on project-specific income. This is especially so in the context of the plans to appoint a full-time director.

#### **Paul Cotterill**

Treasurer

# Balance Sheet

	31 JAN 17	31 JAN 16
ASSETS		
Fixed Assets		
Equipment - Cost	31,073	30,358
Equipment - Depreciation	-29,667	-28,898
Total Fixed Assets	1,406	1,460
Current Assets		
Other Current Assets	31,856	10,400
Accounts Receivable	1,550	
Cash at bank and in hand		
Barclays	11,990	1,790
CAF Bank	13,174	12,797
Co-operative Bank	23,288	66,494
Co-operative Bank No.2	101,350	47,290
Expenses account	61	
HMRC suspense account	85	
Lloyds TSB	2,485	13,465
PayPal	405	
Petty Cash		10
Santander	1,633	7,253
Total Cash at bank and in hand	154,471	149,098
Total Current Assets	187,877	159,498
Current Liabilities		
Accounts Payable	5,743	7,425
Other Current Liabilities	18,519	3,136
Total Current Liabilities	24,262	10,561
NET CURRENT ASSETS	163,615	148,938
TOTAL ASSETS LESS CURRENT LIABILITIES	165,021	150,397
NET ASSETS	165,021	150,397
Funds at year end		
Restricted Funds	108,710	74,538
Unrestricted Funds	56,311	75,859
TOTAL FUNDS AT YEAR END	165,021	150,397

# Income & Expenditure

	FEB '16–JAN 17	FEB '15-JAN 16
INCOME		
Activities to generate funds		
Conference	16,766.53	36,328.44
Consultancy & teaching	1,550.00	
Interest received	70.25	93.09
Other		3,199.90
Total Activities to generate funds	18,386.78	39,621.43
Incoming resources		
Appeals	8,423.21	13,264.38
MCS	3,939.00	
CHPI	14,241.95	
General Donations		
CAF (& JustGiving)	14,342.25	18,516.95
Cheques	64.00	132.00
JustGiving	3,563.24	
One off donations	4,617.95	14,729.68
Regular donations D/D	22,092.25	17,393.00
Regular donations S/O	33,892.00	35,525.26
Total General Donations	78,571.69	86,296.89
Gift Aid	8,485.04	12,011.02
Grants		
Fossil Fuel Divestment	33,000.00	33,000.00
General Funds		500.00
Conflict & Health	27,168.00	
Divestment (Marmot)		3,500.00
Medical Peace Work	11,071.66	10,826.93
People vs PFI		8,340.85
Sustainabilty, Diets & Health	84,000.00	32,000.00
WMDA	14,300.00	
Total Grants	169,539.66	88,167.78
Grants ICAN UK	54,500.00	27,988.10
Legacies		12,000.00
Total Incoming resources	337,700.55	239,728.17
TOTAL INCOME	356,087.33	279,349.60
EVDENCE		
EXPENSE	2 444 94	E 277 22
Fundraising activities	2,666.84	5,277.32
Conferences	28,656.82	37,008.66
Consultants	9,369.87	21,904.81
Salary costs	193,878.31	55,970.62
Management & Administration	2 112 21	1 702 14
Affiliations Board	2,113.21	1,792.16
Communications	9 000 33	25.00
AGM	8,990.33	7,648.16 218.18
	119 20	
Events	118.20	1,218.40
Insurance IT & Website	802.12	420.12
	9,538.52	4,396.62
Legal & Financial	3,290.44	3,653.83
Office expenses Premises costs	2,488.35	2,827.24
	29,540.80	9,478.97
Sponsorship	2 800 31	200.00
Staff & volunteer expenses	2,800.31	4,368.09
Staff recruitment & training	1,969.46 1,580.50	1,971.29 744.14
Telephone, Fax & Data Total Management & Administration	1,589.59 63.241.33	
Hosted ICAN costs	63,241.33	38,962.20
	21,237.10	32,506.19
Other Hosted Project costs	21,644.08	3,720.00
Depreciation Expense TOTAL EXPENSE	769.20 341,463.55	625.20 195,975.00
NET ORDINARY INCOME	14,623.78	83,374.60

# Thank yous

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### Our Board of Trustees:

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