

A charitable incorporated organisation

England & Wales charity number 1192138

Trustees' Annual Report for the period October 2023 to October 2024

This report covers the period from the date of our last report (19th October 2023) until the date the report was submitted for approval by the Board of Trustees (29th October 2024).

However, the financial information in the report, and the accounts accompanying this report relate, for accountancy reasons, to the period 1st June 2023 (start of financial year) to 31st May 2024 (end of financial year).

Charity name: TRANSPORT AND HEALTH SCIENCE GROUP CIO

Charity registration number: 1192138

Objectives and Activities

Summary of the purposes of the charity as set out in its governing document

The purposes of the charity as set out its governing document are: -

- a) The advancement of education for the public benefit by adding to collective knowledge and understanding of the subject of transport and health.
- b) The promotion of good health and the preservation and protection of health for the public benefit by educating and informing the public in general, scientists, social scientists, engineers, public health professionals, transport professionals and decision-makers in relation to the wide range of impacts transport and health have on each other and in doing so seeking transport solutions which positively impact on health or minimise harm to health'

Summary of the main activities in relation to those purposes for the public benefit, in particular, the activities, projects or services identified in the accounts.

HEALTH ON THE MOVE 3

Health on the Move 2 was published in 2011, 13 years ago, and we are now engaged in a revision.

The writing of *Health on the Move 3* has been the Group's major activity in 2023/4.

Systematic Reviews

The first step in this has been the commissioning of a series of systematic reviews of the evidence on particular areas. This was published by Elsevier on 29th May 2024 under the title *Health on the Move 3: The Reviews*. There will also be a special issue of the *Journal of Transport and Health* including shorter versions of many of the reviews.

The following areas have been reviewed

- What are the impacts on children's health, wellbeing and education of active travel to school?
- How effective are different interventions to increase active travel?
- Shifting community perceptions about interventions to reduce car use
- Gender, health and transportation issues, including the contribution each of the factors affecting gender differences in travel patterns makes
- What are the impacts of disability on travel?
- What are the impacts of area-wide 20mph [30kph] speed limits?
- What are the economic and social impacts of public transport and how do these relate to health?
- What policies are effective in reducing congestion?
- Health outcomes of public transport: a systematic review
- Transport & Loneliness
- Costs of transport and mental health and wellbeing
- Can transport interventions contribute to health equity? A systematic review of whether the effects of transport interventions on major transport-related influences on health differ by ethnicity and socio-economic status.

Summaries of other important advances in transport and health have been included under the heading of the 3 As (the health benefits of transport):

- Access
- Activity
- Attractive environments

and the 8 Cs (the harms caused by transport):

- Couch potatoes - sedentary behaviour or active travel
- Crashes and injuries
- Contamination (air, road and water)
- Carbon emissions
- Cacophony (noise pollution)
- Community severance (the barrier effects of busy roads)

- Congestion
- Concern (stress and other psychological issues)

Summaries have also been prepared of the lessons from existing systematic reviews on:

- Travel behaviour
- Rurality
- Free-range children
- Promoting cycling and walking

There were issues we would have liked to have included but were unable to include:

- How important is travel mode in determining injury and fatality rates related to travel? (Review commissioned but not produced)
- The effectiveness of cycle helmets and the impact on cycling levels of requiring or actively promoting them (Advocates of compulsory cycle helmets repeatedly ignored requests to participate in a balanced debate with opponents)

Policy Reviews

We are also undertaking a review of the policies that were set out in *Health on the Move 2*. The policy review is projected to lead to the publication of *Health on the Move 3: The Policies*.

We have so far reviewed policies on:

- Congestion and road charging
- Climate change and biodiversity
- Animal-based transport
- Infrastructure
- Planning
- Placemaking
- Public Transport
- Railways

Early drafts have been prepared for policy reviews on

- Disability
- Autonomous vehicles

Reviews are under way on the following areas

- Transport injuries
- Migration, race and colonialism
- Gender

- Inequalities

Future policy reviews are planned for 2025 on

- Children and Young People
- Older People
- Highways
- Road Danger Reduction & Risk
- Transport, health and climate change
- Finance
- Freight
- Medical Education and Research
- Structural Questions and Coordination
- Legislation
- Regional Strategies

The Guidelines

Guidelines on good practice will also be produced and published as *Health on the Move 3: The Guidelines*.

The Update

Towards the end of the process, the text of *Health on the Move 2* will be revised to incorporate changes, and the revised document will be published as *Health on the Move 3: The Update*. *Health on the Move 3* will then consist of these four documents

CONFERENCES AND SEMINARS

2023 Seminar

The seminar held concurrently with the 2023 AGM included sessions on

- COP28 (global climate changes and countries' responsibilities)
- Disability
- Placemaking and the Health of Children and Young People

Other Meetings and Seminars

Meetings have been held on

- Transport Poverty (two meetings, one of them jointly with the UK Faculty of Public Health)
- Poverty, Inequalities and Transport
- The Future of Roads: why the UK Treasury gets transport investment wrong

- In conjunction with the University of Chile, School of Public Health, launching of their policy document on active mobilities and health
- On-line seminar in Spanish Bella TV: 1. Chile, ¿no es Holanda? Movilidad y movimientos para ciudades justas;
- On-line seminar in Spanish Bella TV: 2. Violencia y Equidad: desafíos para la sustentabilidad with Richard Wilkinson;
- On-line seminar in Spanish Bella TV: 3. World Bicycle Day, Movilidad Activa al servicio de la justicia sustentable.
- A presentation on North Carolina radio WUNC

International Conference on Transport and Health

A considerable amount of work has been done in preparation for the 8th Journal of Transport and Health International Conference on Transport and Health (ICTH), planned for the second quarter of 2025 with hybrid sessions in Darlington, Toronto and Santiago de Chile. This will be the first occasion that we have organised the conference without combining it with the IPATH Annual Meeting, but IPATH has decided to separate the two conferences. Other partners have been found – CEDEUS in Chile, Parachute in Canada and FUSE in the UK.

JOURNAL OF TRANSPORT AND HEALTH

The Journal of Transport & Health (JTH) is devoted to publishing research that advances our knowledge on the many interactions between transport and health and the policies that affect these. In general, we will prioritise papers that evaluate or inform the development of interventions and policies to improve population health, or that make a genuinely original contribution, rather than being basic descriptive studies. The journal aims to cover transport and health issues in all countries; in general, studies should have a context, or lessons, that can be transferred to other locations.

The Journal of Transport & Health publishes articles at the cutting-edge that are significant for policy and practice. The readership is international and multi-disciplinary; articles need to be understood by intelligent readers from a broad range of specialties and places. We are particularly keen to encourage submissions that are cross-disciplinary or inter-disciplinary. The journal has three particular aims:

1. to promote dialogue and collaboration between the two research communities it serves;
2. to improve the methods and the quality and appropriate use of data to better understand the relationships between transport and health; and
3. to encourage transfer of research into practice

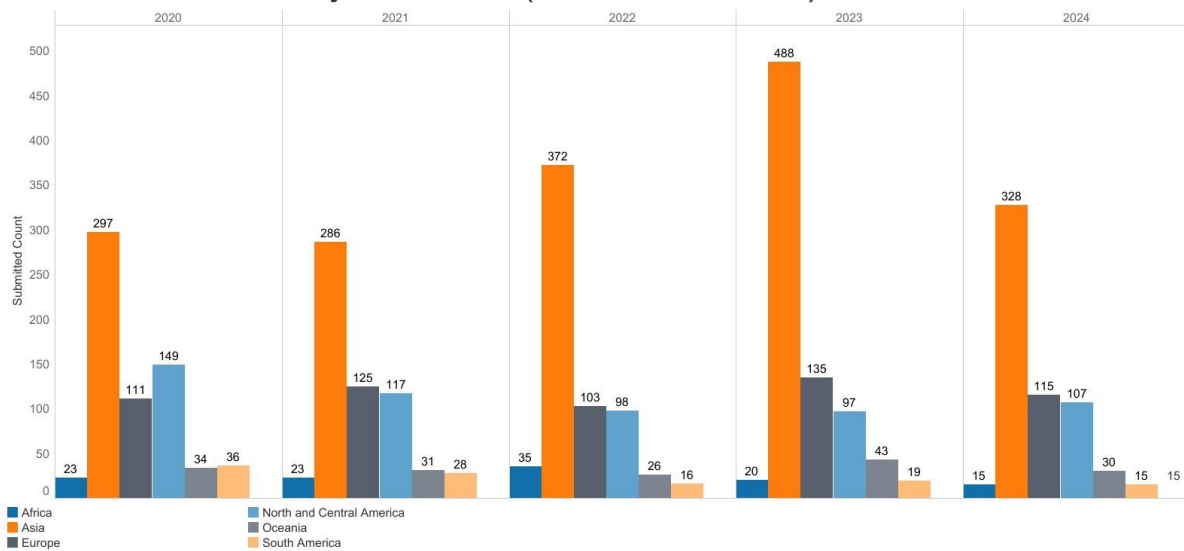
Submissions remain steady in number, although are very slightly down in number this year (610 have been submitted up to 24th October 2024, compared to 802 in 2023, 650 for whole of 2022 and 611 for the whole of 2021). However, desk rejects are down (63% in 2024, compared to 68% in 2023) and that is reflected in the overall rejection rate being reduced from 82% in 2023 to 77% in 2023.

Articles accepted for publication are probably down slightly from a high in 2021 (n=207); 150 in 2022, 145 in 2023 and 130 to date in 2024 (which a prediction of just over 150 by the end of this year). The 2021 high may be the result of more submissions in 2020 (especially from the United States), perhaps due to increased writing during the pandemic?

We are starting to see a much larger increase in Open Access articles being paid for, 53 in 2023, compared to 43 in 2022, 33 in 2021 and 22 in 2020. In 2024 there is already 61 articles open access to date (so will increase by end of the year, potentially reaching almost 75).

China is the country from which the largest number of submissions was received, but the United Kingdom from which the largest number of articles were accepted, with China second and then the United States third. Submissions from Asia are noticeably down in number compared to 2023. However, the quality of submissions from Asia is higher than in any previous year. We have the highest number of accepted papers from Asia in 2024 to date (42 accepted from 326 submitted). By contrast submissions from North and Central America and South America are all up, but acceptance of articles from North and Central America especially are down (22 accepted out of 107 submitted). Articles from Europe are around a similar number, but acceptance is at an all time high (49 accepted from 115 submitted).

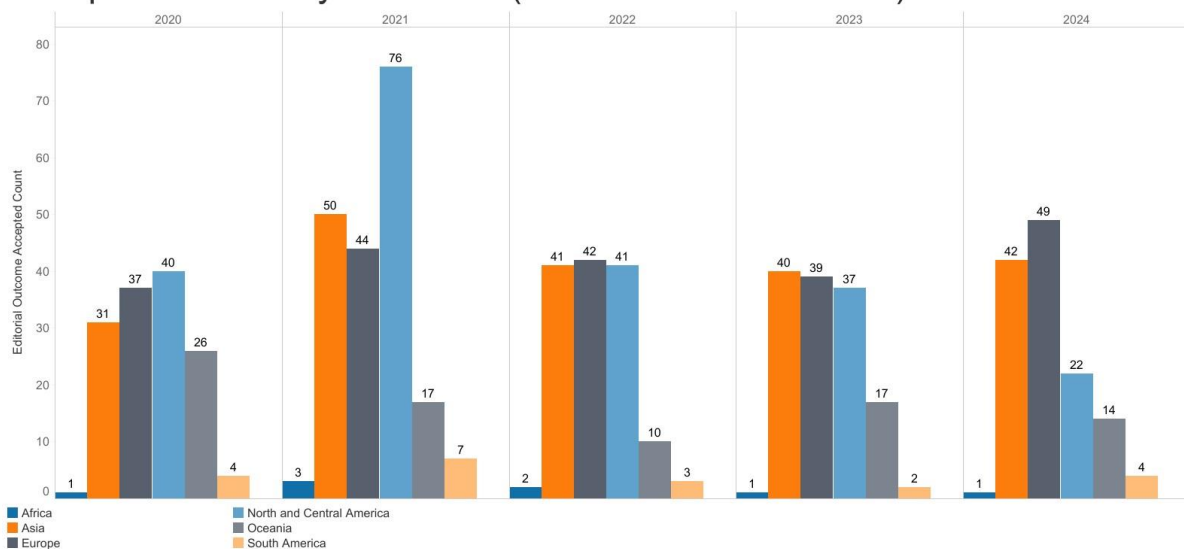
Submitted Articles by Continent (Submission Date)



Journal of Transport & Health

Elsevier Confidential
23 October 2024
Version 2.0

Accepted Articles by Continent (Editorial Outcome Date)



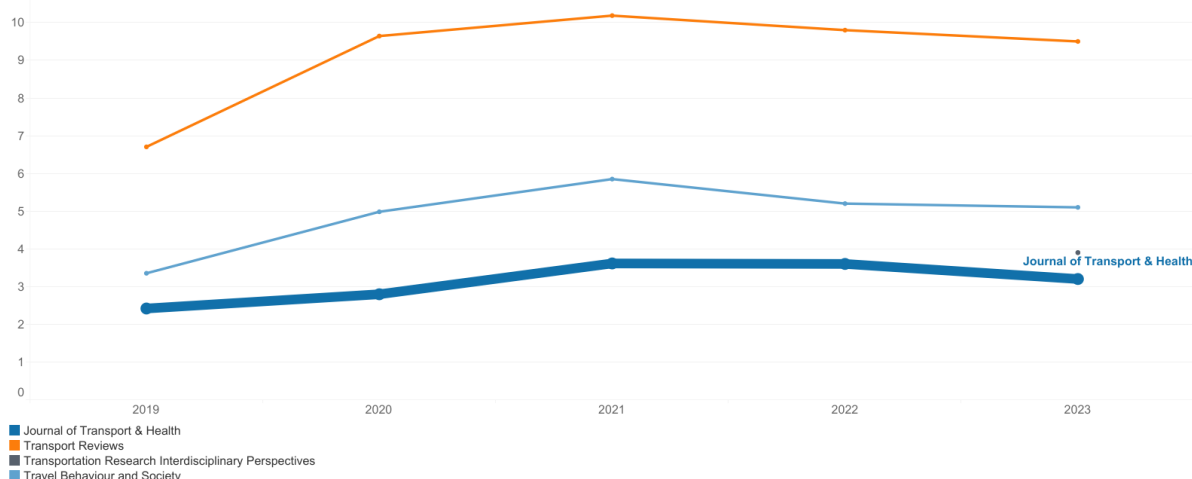
Journal of Transport & Health

Elsevier Confidential
23 October 2024
Version 2.0

Accepted

The Journal of Transport & Health has an impact factor of 3.2. This has been steadily growing over the past few years, though is slightly lower than 3.6 gained last year. The Impact Factor is calculated by dividing the number of citations in the year by the total number of articles published in the two previous years. So, each article in JTH published over the past two years has been cited 3.2 times on average. It is in the second quartile for public health and third quartile for transportation

Journal Comparison Clarivate Impact Factor



Elsevier Confidential
23 October 2024
Version 2.0

Downloads have been growing, with 2024 set to be around if not slightly above 2023 (should end up with over 500,000 downloads again). United States consistently have highest downloads of all time, followed by United Kingdom, China and then Australia. China's figures appear to have fallen this year, as do Canada, while Australia's will have grown by the end of 2024.

UK

Active Travel

Last year we reported concerns about level crossing closures and the attitude of Network Rail who do not accept that health and safety on the railway must be weighed against safety issues and health issues away from the railway. This continues to be an issue and we continue to support the Ramblers Association on this issue.

Last year we reported concerns about the Highways Agency infilling bridges over old railway lines disrupting their potential use for active travel or for rail reopening. We reported that we were one of many objectors who successfully objected to a retrospective planning application for infilling of a bridge at Great Musgrave in Cumbria. The infilling is now being removed, although the Highways Agency delayed to the last possible moment. We reported that Ministers have asked the Highways Agency to discontinue the practice. Despite this, the Highways Agency continues to discuss it, and we remain concerned.

Last year we supported walking and cycling organisations in their request for deferment of the cut-off date for claiming historical rights of way. The necessary surveys to identify these rights of way had not been undertaken because of austerity. We were preparing a campaign to involve medical and health organisations in supporting deferment, but were pleased to learn that the Government had accepted deferment, indeed complete repeal.

Unfortunately, the Government has now reneged on this commitment and has merely deferred, so a campaign for proper resources to update maps is again necessary.

We have offered epidemiological support to Living Streets in their work relating to trips and falls.

We continue to pursue the issue of better cycling facilities on trains.

PATTH

Over the past year the Partnership for Active Travel, Transport and Health continued working to bring public health support to the transport organisations and ensure that health members had access to transport policy support. The membership grew with the recruitment of ADEPT, the Association of Directors of Environment, Planning, and Transport. Current members are listed below*.

Substantial discussions were held on the following topics:

Transport and Health Inequalities

Promoting Healthy Transport

Low Traffic Neighbourhoods

Sustainable Commuting

Parking

Active School Travel

Interventions that Increase Active Travel

Sustainable Travel in the NHS

Gender and Transport

Road Danger Reduction

The member organisations shared ideas about their input into the UK General Election. PATTH signed the letter by the international organisation PATH on the subject of COP23 .

***Current PATTH Members**

The major public health organisations

- ☐ Association of Directors of Public Health,
- ☐ British Medical Association,
- ☐ Faculty of Public Health,
- ☐ Medical Women's Federation,

- Royal College of General Practitioners
- Transport & Health Science Group (THSG)
- UK Health Alliance on Climate Change UKHACC

The major transport-related engineering institutions

- Chartered Institute of Highways and Transport
- Chartered Institute of Water and Environmental Management
- Chartered Institute of Logistics and Transport
- Transport Planning Society

The major transport and active travel campaigning organisations

- Action Vision Zero,
- Campaign for Better Transport,
- Cycling UK,
- Living Streets,
- Ramblers Association,
- Sustrans,
- Transport Action Network
- Urban Transport Group

Town and Country Planning Association

ADEPT

Low Traffic Neighbourhoods

We continue work on a guidance document summarising the evidence on the question of low traffic neighbourhoods.

Community Severance

THSG was a participant in a project led by UCL and funded by three Research Councils examining community severance which culminated in the development of an assessment methodology. Subsequent research showed that community severance in Great Britain costs 1.6% of GDP, at a conservative estimate. We have been pleased to see progress in disseminating this methodology both in the UK and overseas. The research also led to a

follow-up consultancy projects to Highways England (now National Highways) and several small projects and student dissertations.

Professional Training

We reported last year that we have obtained approval for the placement of public health specialist trainees, full time or part time, with THSG. In order to obtain this approval, we prepared a detailed work plan and detailed educational strategy, demonstrating the educational outcomes that would be achieved by reference to the competencies to be acquired

We now have a specialist registrar who will be starting a part-time placement with THSG shortly. We will report on this in the 2025 annual report.

Faculty of Public Health Transport Special Interest Group

The Faculty of Public Health Transport Special Interest Group has continued to meet quarterly. The group has produced [policy briefs](#) based on related THSG policy statements regarding the Climate Crisis, Congestion and Public Transport. It is also working on a policy brief on Transport and Spatial Planning and updating a summary statement on Transport and Health. The group has contributed to FPH consultation responses including on the English Department for Transport consultation on *Adapting the UK's transport system to the impacts of climate change* and the draft *National Planning Policy Framework for England*. The group also held a webinar on Transport Poverty in September, jointly with the FPH Poverty and Sustainable Development Special Interest Groups. This had one of the highest attendances of FPH webinars this year (140+ participants) and the recording is available on the [TSIG website](#)

Representations to the new UK Government

Representations were made to the new UK Government

To the Treasury we have made the following points:

- Currently most transport funding is spent on roads but it would be much healthier to promote walking and cycling. Road spending does not improve congestion but investment in railways *has* been shown to improve congestion.
- The rigid separation of different forms of transport funding prevents efficient use of the total pot of funds. For example, rolling motorways (high frequency vehicle-carrying trains) may be a better use of highways funding than a road scheme but cannot be funded from the same monies.
- Transport has an important impact on economic growth and borrowing for investment which increases GDP will not necessarily increase the debt to GDP ratio if its effect on the denominator (GDP) is as great as its effect on the numerator (debt).
- In the funding of rail schemes, too little attention has been paid to benefit capture. We believe it should be possible to capture the land value benefits of rail schemes. It should also be possible to sell the environmental impacts on the emissions trading system.

- Funding is needed for local government and for public health
- We support the Mayor of London's proposal for taxing impermeable land coverings, to reduce flood risk.
- Poor health and lack of mobility have important economic effects, which should be borne in mind in funding transport and public health.
- Insufficient attention has been paid to the work of Stuckler et al., which shows that for some forms of expenditure, including health, education, welfare and community services, the Keynesian multiplier exceeds the level at which it generates the economic growth to pay for itself.
- Research has shown that community severance has an impact of at least 1.6% of GDP.
- We have set out a list of ways in which assessment of transport schemes is currently distorted by incorrect assumptions.
- Public expenditure processes currently confuse funding and finance, confuse spending and investment, fail to account for depreciation of assets, fail to offer a coherent setting to business and neglect new technology

To the Treasury, the Secretary of State for Transport, The Minister for the Future of Roads and the Secretary of State for Housing, Communities and Local Government we have described proposals for converting the motorway system into a railway with the highways function replaced by a so-called "rolling motorway" (high frequency vehicle-carrying trains) but with some capacity given over to a high-speed rail network using maglev trains and some capacity given over to a national multimodal freight network. The motorways should be screened with Dutch-style thick Perspex sound barriers the lower parts of which could be covered in climbing plants and the upper parts of it in solar panels creating 1,800 hectares of solar panelling. The necessary funding could be raised partly by the electricity generation and partly by capturing the land value benefit of making it possible to develop housing much closer to the motorway.

We also believe the motorways should be roofed over with a light railway, an auto-flow road (a container-carrying conveyor belt, similar to the one projected between Tokyo and Osaka (this would help fund the project)), a moving pavement for pedestrians, moving at 17mph so that somebody walking at 3mph could be accelerated to 20mph – Leicester to London in five hours (acceleration/ deceleration strips would be needed as you cannot accelerate 17mph in one step), a similar moving pavement for cyclists; and a path for horses

This would also be roofed over, with the upper roof consisting either of forest, wildflower meadows, parkland, or linear villages providing 4,000,000 trees, 1,250 hectares of parkland, 1,250 hectares of wildflower meadow and between 300,000 and 1,200,000 houses.

To the **Secretary of State for Transport** and her junior Ministers we have also written about the importance of active travel, of promoting the combination of the cycle and train as a distinct transport mode able to compete with the car, of bus services, of an integrated public transport network and of rail developments similar to those described elsewhere in

this report as our submission to the rail services review. We have made the points that we made to the Treasury and also pointed out that interventions to promote active travel should not *only* address behavioural or social aspects of active travel. Instead, environmental and infrastructure changes are required to make walking, cycling and wheeling feel safer and more pleasant. These should include road space reallocation.

We have pointed out that to live a normal life, disabled users need accessible trains, buses and stations, universal demand responsive services, and accessible and relevant information about all of these. We have said it is important to distinguish roads, streets and local lanes. Only motorways, A and B roads, rural class III roads and other designated through routes should be regarded as existing for through traffic. Other urban streets should be regarded as existing primarily for pedestrians, cyclists, community use and access to premises.

We have advocated a pavement code equivalent to (or included within) the *Highway Code*. It should include prohibition of parking on the pavement. There should be safe provision for cyclists without them needing to use the pavement for safety, but inexperienced cyclists should not be forced into the road. It should be made safer to walk to school. Speed limits, escorted “walking buses”, and school crossing patrols each have an important role. Play matters. We need free-range children playing in greenspace, not battery-reared children playing in cyberspace. Communities should have the right to choose a low traffic neighbourhood and living street.

We have advocated a return of sailing ships is feasible with electrical controls to furl and unfurl the sails, an auxiliary electric motor for days when there is no wind, and solar panels to power the electrical equipment. We advocate that our proposed rolling motorway should also carry boat cradles, making it possible to use the new network not only as a highway and a railway but also to fill in gaps in the canal network, or to allow freight to be carried by canal more rapidly for much of its journey, and the British canal system is linked into the European canal system by the development of BACAT services across the Channel and the North Sea.

On security matters, we believe that cycle theft, crime on paths, crime on trains, buses and trams, and the sense of insecurity that many people (especially women) feel waiting alone at bus stops or railway stations are all important policing, prevention and design issues. The safety of women walking alone, especially at night, is important if women are to be encouraged to use active travel. Indeed, prevention of all forms of gender violence is essential to guarantee equal access for all to society’s benefits: culture, education, work, recreation and health services being particularly important to mental and physical health.

We have written about security to the **Home Secretary** and have emphasised the importance of prioritising freedom from all forms of violence and a feeling of safety among those using public transport and women walking or cycling alone. Along with speeding, a central cause of road-based violence, these elements should be priorities for prevention, design and policing, along with other forms of social control (license suspension or revocation, for example).

To the **Secretary of State for Housing, Communities and Local Government** we have referred to:

- the potential for our proposals for replacing motorways to contribute to targets for renewable energy and housing provision.
- play matters – we need free-range children playing in greenspace, not battery-reared children playing in cyberspace.
- the recently advocated idea of taxing impermeable land, as a contribution to flood prevention.
- Greenspace-compatible development, including green (vegetated) roofs and green (vegetated) walls
- Changing the official application form for planning applications so that instead of listing slates, tiles and other as the options for roofing a property, the application form should list solar tiles, roof garden and vegetated roofs as options, with the final category being “Other (please explain why you are not using an ecologically desirable roof covering)”
- Placemaking and the need for transport in the National Planning Guidance.
- Providing that health and transport are both material factors in planning applications. Indeed, we believe that where planning applications are turned down on the advice of a Director of Public Health, the local authority should be completely protected against costs awards on the basis that it cannot be unreasonable to give priority to the health of the people in accordance with competent official professional advice.
- Another factor that should be built into the NPG is the health damage and harm to community networks of traffic in streets
- Community severance

To the **Secretary of State for Education** we have written about the importance of climate change in curricula, the importance of active travel to school and the importance of play.

In her role as **Minister for Women and Equalities** we have also referred to the following issues relating to gender:

- Women are more likely to lack access to a car or to be the secondary user in a single-car household.
- Public transport systems are organised around radial routes to places of shopping, working and business but women are more likely to trip-chain (for example picking up children on the way home from work and then doing some shopping). Unless public transport is a network with both radial and orbital routes planned around the needs of such journeys it will be less likely to serve their needs.
- This will in turn make it harder for them to arrange for children to travel to school without using a car, a matter on which we have also written to you in your role as Secretary of State for Education.
- Women are more likely to feel afraid whilst waiting at bus stops or lonely stations, especially at night.
- Women are more likely to feel afraid using public transport or walking.

We have also described issues relating to disability.

To the **Ministers responsible for health and social care** we have referred to the issue of centralisation (which increases transport need) and the issue of transport to hospital and we have set out the issues described above in relation to disability and pointed out the centrality of transport to any plans for independent living.

To the **Minister for Public Health** we have drawn attention to the need for cross-departmental working, the need to strengthen public health structures, the importance of active travel in social prescribing, and the existence of our evidence reviews.

Buses

A Buses Workstream has been established.

Buses (large for fixed route, small for demand response) are critical to provide connections between transit hubs and outlying neighbourhoods and work sites. In that respect, bus services are important to reduce transport poverty as the public transport mode most used by low-income populations, enabling lower income people to reach healthcare, work, and shopping.

It is, however, important to reduce emissions. Diesel buses idling at transit hubs or schools create a risk for those with asthma in particular. Both Diesel and Compressed Natural Gas use add to global warming. Alternatives include propane, full electric (either battery or hydrogen fuel cell), or diesel/electric hybrid.

The working group met several times during the year and members of the group contributed to events including the FPH Transport Poverty webinar and the Transport and Health conference in Bristol. The group has collated some initial literature on buses and health and is working to identify capacity for a review of literature on links between bus services and health.

Local Government Elected Members

A Local Government Elected Members Workstream has been established. It is hoped that it will link with groupings of Directors of Public Health and of local government officers.

Discussions with the Chief Medical Officer for England

Discussions have been held with the Chief Medical Officer for England. With his role as medical adviser to Active Travel England, we arranged for him to be provided with a complimentary copy of *Health on the Move 3: The Reviews*.

Rail and Urban Transport Review

We gave evidence to the rail and urban transport review calling for

- Simpler and quicker processes for approval of rail projects in a context of a transport strategy oriented towards the promotion of active travel, public transport and multimodal freight.
- Changes in Treasury financial analyses which overvalue road schemes and undervalue rail schemes.
- Benefit capture and externality charges to be treated as part of the market not part of the tax burden
- Rolling motorways (vehicle-carrying train services at a sufficiently high frequency to fulfil a highways function), to be considered as alternatives to road schemes.
- The importance of devolving power rather than blame and of adequate budgets. Coordination is important but does not require centralisation (as the Swiss public transport timetable, a masterpiece of coordination produced by 70 different organisations) shows.
- Community participation and involvement
- The rail/cycle combination to be seen a transport mode which has the capacity to compete with the private car for flexibility and speed, and we suggested that it should be actively promoted. This should include cycle parking at stations, cycle hire at a range of potential cycle railheads, cycle vans on all trains and some rail developments, including new stations, focused on the cyclist.
- Proposals for motorway conversion as described earlier
- An international high-speed rail network to replace most existing aviation (flights across oceans and polar ice caps, local transport in trackless wastes, and flights to islands, being, in our view, the only situations where trains cannot replace planes)
- High speed international sleeper service
- Restoring local stopping services on main lines using tram-trains which have less impact on track capacity as they can decelerate and accelerate more quickly, it is easier to provide passing loops and additional platform faces, and it can be diverted onto adjacent roads or streets at pinch points or where grade-separated junctions need to be established
- Use of the technology which can operate a standard gauge train at 200mph to operate a 15" gauge train at 50mph, reopening many disused railway lines as rail-greenways in which a cycle route runs parallel to a high-speed miniature railway.
- Reopening branches and spurs using not only conventional railways but also people-movers, gondelbahns, moving pavements and rail-link buses.

We discussed how an excessive bureaucratic approach to safety can not only make rail development more difficult but can itself damage health and safety.

We emphasised the importance of listening to disabled people.

We emphasised how this entire strategy needs to be set in the context of a vision for public transport and we discussed the issue of how to promulgate and win support for that vision, emphasising that it should be a positive vision of opportunity.

LATIN AMERICA

Movisal has two representatives on the THSG board, both from Brazil, with Lake moving into the position of co-chair, during this period, which greatly reinforced the presence of a perspective from the Global South in THSG/Movisal activities.

In Chile, Lake Sagaris has focused on building relations with the Centre for Sustainable Urban Development, CEDEUS, at the Catholic University of Chile, where she remains an Associate Researcher. She has also worked to build stronger ties with the Ministry of Health and the School of Public Health at the University of Chile, where she contributed the preface to a major policy document, published in 2024, and also was keynote speaker for the 80th Anniversary of the School of Public Health, a great honour.

Bella TV, a communications for action research initiative being developed in Dr. Sagaris' Laboratory for Social Change, is also showing good potential to highlight transport and health work throughout Latin America and elsewhere in the world. Early episodes have focused mainly on water and neighbourhood development, due to an earlier commitment with the Bellavista neighbourhood association, but several episodes involved experts from the Netherlands and the UK, with plans to organize a special episode on working for transport and health, with partners from THSG-UK, and Barcelona's Super Blocks placemaking strategy, before year's end.

We were able to advance in collaboration with Paula Barros, from Belo Horizonte, Brazil, attending her on-line presentation on the creation of microspaces for children and underserved communities; supporting a grant application led by Paula —Conselho Nacional de Desenvolvimento Científico e Tecnológico (CNPq) 2023, entitled 'Small-scale interventions to return public free spaces by children: a step towards independent children's mobility'—which has been awarded and will lead to exchanges, we hope face to face, with the participation of Jenny Mindell and Lake Sagaris, both from THSG.

This experience also facilitated a second funding application, with Paula participating in the "Walking for Equity, Health & Joy -- Transforming embodied automobility through Advocacy and Social Movements for walking as standalone and feeder mode for public transport" research project proposal (short title, Walking for Joy), led by Lake in Chile, and involving colleagues in Brazil, Uruguay and, in Africa, South Africa and Uganda, as well as Jenny Mindell, from THSG, and colleagues in Canada.

Paula has led an interdisciplinary effort to write an article on children's independent mobility based on research conducted in three highly different contexts in Belo Horizonte (Brazil)—favela Morro do Papagaio, central area of Belo Horizonte, and vertical housing for low-income communities. Jenny Mindell and Lake Sagaris are co-authors.

In Brazil, Paula has been invited to speak at a local event organised by the Department of Geography at UFMG about children's independent mobility.

Paula has supervised Mariana Protázio, a master's student who has developed research to explore the values children attribute to placemaking initiatives in the context of favelas (informal settlements). Mariana has written a paper on the topic in collaboration with Paula Barros, Anna Diniz and Marcela Sanches at Encontro de Sustentabilidade em Projeto (ENSUS), a national conference. The paper was awarded the best in the field of architecture and urbanism. The journal MIX SUSTENTÁVEL invited the team to write an

article in English based on the paper awarded. It has already been approved and is due to this October. From children's perspectives, placemaking initiatives help them enjoy many rights as stated in the United Nations Convention on the Rights of the Child. Children associated placemaking with positive outdoor experiences, a step towards the increase in children's independent mobility. Mariana's dissertation connects with research funded by CNPq 2023.

As the lead lecturer of the co-design studio PRJ096, Paula has developed pilot studies to define a more robust platform for conducting collaboratively the research funded by CNPq 2023. In the first semester of 2024, children from the favela Morro do Papagaio co-designed small-scale, low-cost, and colourful structures made of (re-used) cardboard with architecture students. These structures were temporarily installed on the pavement alongside their school to explore whether colourful artistic interventions may attract and retain children in urban open spaces. This semester, low-cost temporary interventions with colourful tubular elements made of cardboard (reused) and green elements (medicinal plants) will be co-designed with children. This structure will be temporarily installed in the exact locations to gather richer data on the potential of small-scale changes promoting children's independent mobility.

Our work remains ambitious in its goals, but relatively modest in advances, to accommodate the overloaded schedules of many academics and practitioners in our different regions. We have made significant progress, however, in the two focus countries, Chile and Brazil. We believe that work to prepare the Journal of Transport & Health 8th Global Conference, in the way it is planned, will contribute greatly to showcase existing work, and invite new researchers and practitioners to add their voices and experiences to this rich vein of collaboration.

EUROPE

THSG Europe has been revived in the past year. We have a new Vice Chair for Science (Dena Kasraian) and Vice Chair for policy (Carolyn Daher). We have advertised for and recruited new members. Currently we have representatives from Belgium, Cyprus, Germany, Greece, Ireland, Israel, Malta, the Netherlands, Portugal, Spain, Sweden, Switzerland, and UK. We are investigating how to establish working relationships for WHO Regional Office for Europe on the topics we have track record/ are interested in (e.g. placemaking, heat, disability, road danger reduction and preparing for extreme events).

NORTH AMERICA

The US Department of Transportation's focus for all modes including Active Travel is Safety "for those walking, biking, and rolling on our roadways and sidewalks". The DOT FY 2022-2026 Strategic Plan target of a 150% increase in the percentage of person trips by transit and active transportation modes cannot be achieved without major improvements in Safety, especially for walking and cycling. USDOT and the USDOT Volpe National Transportation Systems Center is celebrating the fourth annual Pedestrian Safety Month in October 2024. Their 2022 guide, Improving Safety for Pedestrians and Bicyclists Accessing Transit, is a relevant and useful resource.

The AME70 Transportation and Public Health Committee Meeting at TRB 2025 is Tuesday, January 7, 2025. This would be an opportunity to engage with and committee members and friends and recruit and a representative will attend the latter half at minimum. This is an opportunity to engage with potential members.

In Canada links have been established with the Canadian Association of Road Safety Professionals and with Parachute.

NEW ZEALAND

A Vice-chair (Science, New Zealand) has been elected and is working to draw together researchers in New Zealand to bring the Health Topic Hub of the New Zealand Transport Knowledge Hub back into activity. The interested researchers plan to gather shortly, and will have done so by the time this report is considered at the AGM, to share their current projects and look for opportunities to collaborate and develop research in health and transport in NZ, in the context of a very challenging Minister of Transport.

WESTERN PACIFIC

The Board has discussed transport in the Philippines.

AFRICA, EASTERN MEDITERRANEAN, SOUTH EAST ASIA

We have no activity to report in these WHO Regions.

INTERNATIONAL

Transport Safety

The Transport Injuries Prevention Network has met once.

It reviewed the existing THSG policies on safety and on risk and identified potential partners for reviewing them. It recognised that existing policies were scanty, UK-focussed and lacked a clear structure and set in progress a process for developing a framework for an updated policy. It considered the significance of relevant WHO policies.

Disabilities

A substantial review of transport and disability was undertaken for *Health on the Move 3*. A Disabilities Workstream has been convened and is currently drafting a policy statement, which is being designed so that it will help us provide professional support to organisations within this community.

Placemaking

Substantial work has been done on a policy document exploring the links between transport and placemaking, developing on the discussions at our 2021 Seminar. A

preliminary policy on spatial planning has been issued and work is now well under way on a more fundamental document.

Plans are also under way to link with other organisations on a major initiative on placemaking which is likely to be launched just after the closing date of this report. This THSG/Movisal generated report has also served as a key reference in several book chapters, on active transport, prepared during 2024.

A THSG/Movisal collaborative research process, carried out in Chile during 2023, with participation from Dr. Paula Barros (Brazil) has also been the subject of an article, just published in Energy Research and Social Science (October 2024).

Climate Change

We have produced a revised statement on climate change and biodiversity.

We included a session on climate change in our 2023 AGM.

We have reported in the UK section of this report on our work on climate change with the Faculty of Public Health and in the MoviSal section on the work with Bella TV.

In the UK, The Transport Special Interest Group of the Faculty of Public Health, which we administer, has made an input on transport matters into the Faculty's plans for climate change and the Group has a seat on the Faculty's Climate Change Committee and is involved in the Faculty's input to COP28. The Faculty has made climate change a major part of its objectives.

In the UK, We wrote to the General Medical Council expressing concern at the disciplining of doctors arrested on climate change protests.

Air Quality

Air quality has become an increasingly important issue for public health around the world and is playing an increasingly important role in our discussions.

Statement confirming whether the trustees have had regard to the guidance issued by the Charity Commission on public benefit

Standing Order 110A of our financial standing orders states:

All trustees must acquaint themselves with their duties towards the management of funds for the public benefit by reading the Charity Commission Guide for Charitable Trustees and the document “Certificate in Charity Law and Governance: - Stewardship of Funds and Assets” produced by the Chartered Governance Institute

All trustees have confirmed compliance with this requirement.

Additional information

Governance Policies and Procedures	We have reviewed our standing orders and bye-laws, our governance policies and our procedures to ensure that they comply with good practice and legal requirements.
Policy on grant making	Grant making is not a substantial part of the charity’s activities at present.
Policy on social investment including program related investment	Social investment is not a substantial part of the charity’s activities at present.
Contribution made by volunteers	The charity has no paid staff and is entirely run by volunteers. Volunteers manage and administer the charity (as officers, trustees, and members of our regional councils and local and national groups), edit and peer-review the <i>Journal of Transport and Health</i> , contribute as speakers, organisers and facilitators to our conferences, provide intellectual input to the process of knowledge management, write material for us and maintain our website. We are deeply grateful to them for the contribution they have made.
Training of trustees	The trustees were supplied with and required to read Charity Commission Guide for Charitable Trustees and the document “Certificate in Charity Law and Governance: - Stewardship of Funds and Assets” produced by the Chartered Governance Institute. Three trustee training sessions have been held. These were on The Role of Trustees, Risk and Rules, and Governance Policies.

Achievements and Performance

Summary of the main achievements of the charity, identifying the difference the charity's work has made to the circumstances of its beneficiaries and any wider benefits to society as a whole.	• Publishing the major set of systematic reviews of evidence is a major benefit to advancing and disseminating the body of knowledge. These reviews will be an important contribution to research and to professional practice. Publication during 2024-2025 of various 'open access' papers in the <i>Journal of Transport and Health</i> will bring these reviews, in some cases updated and expanded, to a wider audience, free of charge. • The work on placemaking has become an important focus drawing together various organisations, a major advance to go beyond engineering or design issues, and identify good practice as it involves communications, behavioural change and citizen participation • In the UK, PATTH has provided important coordination for a range of organisations concerned with active travel. • We have made organisational progress by establishing a local government elected members group; by recruiting additional representatives in more European countries; and finalising a Memorandum of Understanding with the New Zealand Transport and Health network and establishing a vice-chair of THSG from that group.
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Additional information

Achievements against objectives set	We set ourselves the objective of reconvening the European Committee. This objective was achieved with the recruitment of two trustees and representatives of 11 EU member states and 3 other countries. We set ourselves the objective of establishing links with international walking and cycling organisations and were successful in creating links with the International Federation of Pedestrians. We set ourselves the objective of reviving our organisation in New Zealand and were able to recruit a trustee who was able to convene a group of researchers. We set ourselves the objective of recruiting supporters of our railway policies but success has been limited. Success has also been limited in the objective of persuading people active in the Journal to become active in the wider group. We set ourselves the goal of reviewing our policies by the end of 2024 but this goal has slipped to some time in 2026. In part this is because of a review of the purposes and structures of the policies and the development of a process of using them to develop guidelines of good practice, which we had also set as an objective.
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Considerable progress has been made on our goal of developing understanding of transport and gender, progress has been made on the goal of developing understanding of disability and transport, but progress on developing understanding of the impact of migration, race and colonialism on transport has so far been very limited.

Progress has also been limited on developing a policy on promoting healthy human behaviour.

We have successfully convened the Transport Injuries Prevention Network as an international group.

We set ourselves a number of ambitious goals in relation to climate change, including the creation of a youth network, the production of podcasts and links to the COP process. These have not been achieved but the Bella TV programme series has been successfully developed as an alternative step forward, and we also produced a statement on biodiversity.

We set ourselves the goal of organising the 8th JTH International Conference of Transport and Health and we are on track to achieve that.

Having developed an excellent policy on placemaking we set ourselves the goal of promoting it but there has been little progress on this, although there have been other discussions of placemaking.

We set ourselves the goal of developing MOOCS and a library of tools and resources but have repeatedly deferred discussion of these.

We set ourselves the goal of developing links with WHO Regional Offices. Preparatory work has been done.

We set ourselves the goal of developing our governance procedures and considerable progress has been made.

We set ourselves the goal of developing links with CEDEUS and this has been achieved.

We have not achieved our goals relating to fundraising and recruitment.

THSG UK set itself the goal of responding to consultations and has made a number of responses.

THSG UK set itself the goal of strengthening PATTH. PATTH has successfully held a number of good quality discussion events but the development of joint activity has been less effective.

THSG UK set the goal of strengthening the Faculty of Public Health Transport SIG. TSIG is now thriving and organised a highly successful seminar on transport poverty as well as inputting into the Faculty's work on climate change.

THSG UK set itself the goal of participating in the debate around general election manifestos and produced a high quality document to influence manifestos. The early calling of the election prevented that being as effective as had been hoped but it has been used to make representations to the new Government and it was also circulated to other countries where elections are under way.

We have not been successful in our objective to mobilise health professional organisations around representations to move away from roadbuilding towards a healthier transport system.

We have achieved our objective of establishing a Buses Workstream

Performance
of fundraising
activities
against
objectives set

We have not yet secured any external funding. This is disappointing.

Investment
performance
against
objectives

The funds held are currently limited and investment has been limited to holding funds on deposit. The trustees are aware that this will need to change if the fundraising objectives set in the business case are successful.

Financial Review

	For 25 years the organisation has functioned as a predominantly volunteer-based organisation with very limited funding mainly derived from membership subscriptions. Registration as a charity was pursued in order to implement a business case to change that but the change will take time and our situation has not yet changed.
Review of the charity's financial position at the end of the period	All of the assets of the former Transport & Health Study Group were transferred to the charity on completion of its registration, most of them as an absolute transfer but £250 as a loan since the former organisation remains as a residual entity for a few non-charitable purposes. The Study Group still received some income which is paid to the charity and some of which (£110 this year) is added to the loan. To avoid such income steadily increasing the amount of the debt thereby eroding the protection of charitable funds there is provision to write down the debt if it should ever come to exceed 10% of the assets held by the charity. Rounding to the nearest pound, the charity in its general funds has assets of £3,513, of which £320 is a loan from the residual Transport & Health Study Group. There has been a surplus of £210 ignoring the loan to the Study Group (£125 net of that loan) In addition to cash, the charity's other assets are intellectual property (nominally valued at £100) and two bad debts (valued, after discounting, at £27).
Statement explaining the policy for holding reserves stating why they are held	On 18th February 2021, the Board resolved "It was agreed that we would need a reserves policy in the future but this was not necessary at the moment. There was some discussion as to the level of funding which would require a reserves policy and it was recognised that the issue would not be the level of funding but rather the presence of recurring commitments."
Amount of reserves held	No reserves are currently held as we have no substantial recurring commitments.
Reasons for holding zero reserves	
Details of fund materially in deficit	There are no material deficits
Explanation of any uncertainties about the charity continuing as a going concern	Although our business case envisages the raising of funds which would allow us to become a staffed organisation, that is not currently the case. At the moment, our continuation as a going concern is dependent on the continued availability of volunteers. We see no immediate threat to that.

Additional information (optional)

You may choose to include further statements where relevant about:

The charity's principal sources of funds (including any fundraising)	Our current principal source of funds is member subscriptions, although our business case envisages us seeking grants and that was the purpose of our recent reorganisation, incorporation and registration as a charity.
Investment policy and objectives including any social investment policy adopted	Not currently applicable.
A description of the principal risks facing the charity	We have written a new Risk Policy, which was accepted by the Board of Trustees on 13th August 2024. 1. The principal risk facing the charity as an organisation dependent more on volunteers than on funding relate to the availability of volunteers. The adverse impact of the coronavirus pandemic (continuing after the pandemic in its impact on public health professionals) has demonstrated the importance of that risk, but has also given us the added confidence that comes from knowing that we were still able to maintain significant activity even during this difficult time. 2. The principal risk the charity could face in relation to the Journal would be a difficulty in our relationship with Elsevier but we have no current reason to expect any such problem. 3. The success of the business case for our expansion depends on successful pursuit of grant applications. Factors which could adversely affect the prospects of this include austerity and the range of competing demands for health and environment funding

Structure, Governance and Management

Description of charity's trusts:	The charity currently has only a single trust.
Type of governing document	The charity uses, with only minor modifications, the recommended governing document for a CIO with members. There has been no change in this document since registration. The governing document is augmented by bye-laws, regulations of regional councils and standing orders.
How is the charity constituted?	Until 3rd November 2020 it was an unincorporated association and was not registered as a charity. Since 3rd November 2020 it has been constituted as a CIO.

Trustees are

Trustee selection methods including details of any constitutional provisions e.g. election to post or name of any person or body entitled to appoint one or more trustees

- elected by the AGM – six have currently been so elected, of whom one resigned towards the end of the year.
- appointed by Board to fill vacancies – none have been so appointed in the period of this report
- appointed by Board to fill the office of Deputy Treasurer
- elected or appointed by one of our Regional Councils (currently two each for UK, Europe, Latin America (also known as MoviSaL) and North America and one each for Western Pacific, New Zealand, South East Asia, Eastern Mediterranean and Africa. Nine have currently been elected: two from the UK, two from Europe, two from MoviSaL, two from North America and one from Western Pacific. Three others have been vacant throughout the year (one in each of South East Asia, Eastern Mediterranean and Africa)
- appointed by an organisation which acts as our agent in managing a Regional Council. The Health Topic Hub of the New Zealand Transport Knowledge Hub may appoint one of two New Zealand representatives. This is in process and an interim appointment has been made.
- The Editor of the *Journal of Transport & Health*, appointed by a competitive process jointly by ourselves and our publisher, Elsevier, is also a Trustee.

Additional information (optional)

You may choose to include further statements where relevant about:

Policies and procedures adopted for the induction and training of trustees

We have continued to identify a portion of each Board meeting as a training session for the trustees.

The charity's organisational structure and any wider network with which the charity works

The charity has a Board of Trustees and a number of Regional Councils, as discussed already. There are Executive Committees in some of the Regional Councils. There are also working groups pursuing particular workstreams.

We have an arrangement with the Health Topic Hub of the New Zealand Transport Knowledge Hub whereby it administers our New Zealand Council.

We have an arrangement with the Faculty of Public Health of the Royal Colleges of Physician of the United Kingdom whereby we administer its Transport Special Interest Group (TSIG).

	In the UK we administer the Partnership for Active Travel, Transport and Health (PATTH).
Relationship with any related parties	Apart from research collaboration, there have been no transactions with related parties.
Significant events	None

Reference and Administrative details

Charity name	TRANSPORT AND HEALTH SCIENCE GROUP
Other name the charity uses	THSG MoviSaL
Registered charity number	1192138
Charity's principal address	4, St Andrew's Place, London NW1 4LB

Names of the charity trustees who manage the charity

	Trustee name	Office (if any)	Dates acted if not for whole year	Name of person (or body) entitled to appoint trustee (if any)
1	Stephen Watkins	Co-chair (Policy)		AGM
2	Lake Sagaris	Co-chair (Science)		AGM
3	Beverley Hoyle	Secretary		AGM
4	Jennifer Mindell	Company Secretary and Deputy Treasurer	(Deputy Treasurer since 13 th August 2024)	AGM
4	Tom Fitzgerald	Treasurer		AGM
5	Martin Rathfelder	Vice Chair (Policy, UK)		UK Council of THSG
6	Adrian Davis	Vice Chair (Science, UK)		UK Council of THSG
7	Paulo Anciaes	Web Officer		AGM
8	James Adamson	Deputy Web Officer		AGM
9	Steve Yaffe	Vice Chair (Policy, North America)		North America Council of THSG
10	Jennifer Hall	Vice Chair (Science, North America)		North America Council of THSG
11	Paula Barros	Vice Chair (Science, Latin America)		MoviSaL
12	Paulo Henrique Guerra	Vice Chair (Policy, Latin America)		MoviSaL
13	Dena Kasraian	Vice Chair (Science, Europe)	Since 28 th March 2024	European Council of THSG
	Janet Massey	Vice Chair (Policy, Europe)	Until 4 th April 2024	European Council of THSG
14	Carolyn Daher	Vice Chair (Policy, Europe)	Since 28 th May 2024	European Council of THSG

15.	Ben Wooliscroft	Interim Vice Chair (Science, New Zealand)	Since 13th August 2024	New Zealand Transport Knowledge Hub
16.	Robert Siy	Vice Chair (Western Pacific)		THSG Western Pacific part of the Asia-Africa-Pacific Council of THSG
17	Charles Musselwhite	Editor, Journal of Transport & Health		Elsevier, subject to THSG approval

Corporate trustees – names of the directors at the date the report was approved

The above list of trustees is the list of directors.

Name of trustees holding title to property belonging to the charity

The charity is an incorporated organisation and holds title to its own property.

Funds held as custodian trustees on behalf of others

Description of the assets held in this capacity None

Name and objects of the charity on whose behalf the assets are held and how this falls within the custodian charity's objects Not applicable

Details of arrangements for safe custody and segregation of such assets from the charity's own assets If we were to come into possession of such funds (for example for FPH) we would establish them as a separate financial management unit and there is provision for this in our financial standing orders, including provision for the appointment of specific trustees to be accountable for them and the drawing up of separate accounts.

Additional information (optional)

Names and addresses of advisers (Optional information)

Type of adviser	Name	Address
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Name of chief executive or names of senior staff members (Optional information)

We have no paid staff / employees

Exemptions from disclosure

Reason for non-disclosure of key personnel details

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Other optional information

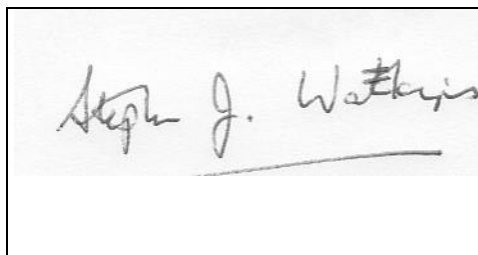
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Declarations

The trustees declare that they have approved the trustees' report above.

Signed on behalf of the charity's trustees

Signature(s)

	
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Full name(s)

Dr Stephen Watkins	
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Position (eg Secretary,
Chair, etc)

Co-chair (Policy)	.
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Date

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Transport and Health Science Group CIO

Annual Accounts 2024

Accounting period: 1st June 2023 to 31st May 2024

Opening balance (1 st June 2023)	Cash at bank	£4,109.45	Note 1
	Less transactions in progress	-£806.83	
	Intellectual Property	£100.00	Note2
	Monies held by IPATH and bad debt provisions	£27.49	Note3
	Less debt to Transport & Health Study Group	-£235.00	Note4
	Total opening balance	<u>£3195.11</u>	
Income	Subscriptions	£302.77	Note 5
	Interest	£6.00	
	Donations	£403.14	Note 6
	Gift Aid from HMRC Charities	£61.29	Note 7
	Bank account adjustments	£100	Note 8
	Total Income	<u>£873.20</u>	
Expenditure	Trustee expenses	£433.80	Note 6
	Increase in debt to Transport & Health Study Group	£85	Note 9
	Bank charges	£50	Note10
	Meetings	£179.34	Note11
	Total Expenditure	<u>£748.14</u>	
Closing Balance (31 st May 2024)	Cash at bank	£3,438.58	

	Balance with Pay Pal	£74.10	
	Intellectual property	£100.00	Note2
	Monies held by IPATH and bad debt provision	£27.49	Note3
	Less debt to Transport & Health Study Group	-£320.00	Note4
	Total closing balance	<u>£3,320.17</u>	Note12
2023/4 Surplus	Surplus	<u>£125.06</u>	Note12

Notes

1. Money has been held in our account at Barclay's, and in accounts at Santander
2. Intellectual property is valued at a nominal sum. It has actually increased as a result of the work on Health on the Move 3 but we have continued to show it at the same nominal sum
3. The opening balance includes a sum for monies held by IPATH less a substantial bad debt provision reflecting the unlikelihood of IPATH paying that money. This sum has been shown at the same figure as last year, based on a debt of \$348.65, depreciated by 90% as a bad debt provision, with a further depreciation of 34p to reflect a counterclaim which we regard as utterly absurd. It was then converted to sterling at the exchange rate applicable on 1st June 2023. We have kept the same sterling cash value and have not updated the exchange rate as adjusting it by about 20p would imply a greater degree of precision than the estimate of value actually embodies. This entry in the accounts now also includes a debt of £39.37 from SERA reflecting its share of the costs of a joint meeting. This is also unlikely to be paid and no value has been ascribed to it.
4. The Transport & Health Study Group remains in existence as a residuary organisation for certain non-charitable purposes. All its funds and income have been transferred to the Transport & Health Science Group but £250 of the opening transfer and some of the income have been designated as loans which may be repaid to the Study Group should it need them for non-charitable purposes. The Trustees have considerable discretion as to the circumstances in which such repayments will be made, including power to write down the debt should it ever exceed 10% of the charity's assets.
5. This is the sum received net of Pay Pal and Go Cardless charges. It is an increase from £120 last year but it is still disappointing.
6. Trustees who are UK taxpayers were encouraged to claim expenses and then donate them back as Gift Aid donations. This accounts for the bulk of both of these figures. Donations have increased by £190 but most of this is an increase in trustee expenses claimed and then donated back.

7. This relates to Gift Aid claims lodged in June 2023 which mainly relates to donations received in 2022/3.
8. These are compensation for the banking errors reported in last year's annual report.
9. In the current year £110 of income has been attributed to the Study Group and added to the debt. These are the subscriptions of members who requested their non-Gift Aided subscriptions should be so attributed. £25 of the debt was repaid to allow the Study Group to affiliate to Railfuture.
10. These charges arose from CHAPS payments connected with the purchase of Covidence for Health on the Move 3.
11. The major expenditure was the meetings on October 10th 2023 at the Quaker Meeting House in Liverpool.
12. As the repayment of the debt to the Transport & Health Study Group is at the discretion of the Trustees, it is sensible to disregard that debt for certain purposes. If that debt is disregarded the total closing balance is £3,640.17 and the total surplus is £210.06

Comments by the Auditor, Ellis Friedman

The auditor requested some changes in the presentation of the accounts originally approved by the Trustees and the Trustees have made those changes.