



**Trustees’ Annual Report for the period May 2020 to August 2021**

This report covers the period from the start of the last AGM (20<sup>th</sup> May 2020) until the date the report was submitted for approval by the Board of Trustees (19<sup>th</sup> August 2021). This includes a period (20<sup>th</sup> May 2020 to 3<sup>rd</sup> November 2020) prior to our registration as a charity and prior to our incorporation.

However, the financial information in the report, and the accounts accompanying this report relate, for accountancy reasons, only to the period 3<sup>rd</sup> November 2020 (incorporation) to 8<sup>th</sup> August 2021 (end of financial year).

Details of Trustees has been updated to the date of signature of the report (5<sup>th</sup> October 2021)

**Charity name: TRANSPORT AND HEALTH SCIENCE GROUP**

**Charity registration number: 1192138**

**Objectives and Activities**

<p><b>Summary of the purposes of the charity as set out in its governing document</b></p>	<p>The purposes of the charity as set out its governing document are: -</p> <p>a) The advancement of education for the public benefit by adding to collective knowledge and understanding of the subject of transport and health.</p> <p>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’</p>
<p><b>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.</b></p>	<p>As with most organisations, activities were reduced due to Covid-19. For example, key Officers, who are honorary appointments and work for THSG in their spare time, were heavily involved in local public health responses to the pandemic. So were our workstream leads, some of whom indicated that they would have to suspend their role until 2022 and others of whom were less active than they normally would have been. This has diminished the achievements that we are able to report.</p> <p><b>CONFERENCES AND SEMINARS</b></p> <p><i>2020 Seminar</i></p> <p>The seminar held concurrently with the 2020 AGM included sessions on</p> <ul style="list-style-type: none"> <li>• climate change,</li> <li>• gender and transport,</li> <li>• migration during the pandemic and the impact on refugee women,</li> <li>• the impact of coronavirus on transport</li> <li>• a new costing tool for community severance</li> <li>• the Middle Out perspective</li> </ul>

- the impact on transport policy of current debates internationally about conservative philosophy.

### *International Conference on Transport and Health*

The 6<sup>th</sup> International Conference on Transport and Health was held between 9<sup>th</sup> June and 30<sup>th</sup> June 2021 on Zoom. THSG participated in the organisation in partnership with our sister organisation IPATH.

83 abstracts were submitted of which 80 were regarded as appropriate for presentation. There was an increase in interest in the Pecha Kucha format of presentation. 113 people registered for the conference, with a mean age of 41.6 and with 56% being female. There was a roughly even spread of applicants between the UK, North America, Asia and Australia, with a smaller number of registrants from other parts of the world.

An important problem in organising an international conference by remote methods is that it is always 3.00am somewhere in the world. To address this, all sessions were recorded and it was possible for those registered for the conference but unable to attend at the specific time to view them later. Times were spread across the full range of the 24 hours so as to be fair to all participants.

An important innovation in this year's conference were the two Global South sessions, organised by THSG's Latin American section MoviSaL. These were trilingual in English, Spanish and Portuguese.

There were important presentations on the issue of covid and public transport. An important study in New York showed that when masks were worn the use of public transport was not a significant risk factor for acquiring the infection. This suggests that much of the damage to public transport caused by the pandemic was unnecessary. There were also studies from various parts of the world showing the impact of lockdown.

The economics of public transport was also covered by a number of presentations, with research from Latin America showing the positive contribution of public transport to economic growth, employment and physical activity, research from China showing its positive impact on equality, and research from Saskatchewan and Minnesota documenting its powerful positive cost/benefit.

Placemaking was a theme both of keynote sessions and of presentations. Transport must not only move from a concern with movement of vehicles to a concern with movement of people and goods, it must also further to a concern with creating places in which movement is facilitated at minimum energy cost. There were a number of presentations from various parts of the world showing successful traffic calming schemes. Many of these, such as one using rocks in the road as a traffic calming obstacle, and others in New Zealand and Canada using public art, challenged the conventional vision of traffic engineering as embodied in many official street design guidelines and street sign regulations.

There were a number of presentations which showed how 3D models could be used in planning and in consultations.

Autonomous vehicles were a theme both of a keynote speaker and of presentations. There are concerns with the safety of level 3 vehicles (those which require driver oversight but do not demand regular driver intervention) due to drivers becoming lulled into a non-alert state. There are also concerns with the detection of pedestrians and cyclists with all levels of autonomy. Research from Belgium and from China shows high levels of public awareness of these problems, and a balanced understanding of the issues. This balance unfortunately is not duplicated in the industry or amongst policy makers around the world.

As always, the conference included many high-quality abstracts relating to cycling and to the ways that cycling can be promoted effectively and that cycle schemes can be effectively delivered.

There were a number of presentations relating to disability and this will be an important theme in the future.

It was interesting to see presentations from the United States on the decommissioning of urban high speed roads and the positive benefits that this created for local communities and local economies by opening up new green spaces and removing community severance.

## JOURNAL

We continue to sponsor the 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. Interactions between transport and health include, for instance:

- \* the impacts on public health and inequalities of:
    - \* active modes of transport;
    - \* noise and air pollution generated by transport;
    - \* road travel injuries (see below);
    - \* community severance;
  - \* road danger and its reduction (see below):
    - \* actual safety and security hazards associated with transport;
    - \* perceptions of danger and factors affecting these;
  - \* factors affecting transport choices:
    - \* urban form;
    - \* location and accessibility of health and other facilities;
    - \* age, gender, health and disability;
    - \* socio-economic inequalities;
    - \* rurality;
    - \* leisure travel;
  - \* synergies between sustainability and health impacts of transport;
  - \* economic and health impact assessments
  - \* methodological advances, including considerations of complex systems;
- and
- \* policies and interventions that promote or discourage healthy and sustainable transport modes, transport systems and communities (see below).

We wish the Journal of Transport & Health to publish 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.

A detailed report on progress of the Journal has been submitted to the AGM and is available on request.

Submissions have steadily increased from 195 in 2016 to 481 in 2019 and 497 in 2020 and this seems to be continuing as there had been 359 already by July 2021.

Articles accepted for publication in 2020 and in 2021 to the end of July were from the following: -

North America 54

Europe (excluding UK and Turkey) 42

Australia 24

East Asia (including Turkey, the Arab world, Israel and Iran) 17

China (including Hong Kong and Taiwan) 13

UK 13

South Asia 12

South East Asia 11

New Zealand 10

Latin America 9

Caribbean 2

Africa 2

We would like to encourage more high-quality submissions from Africa, Asia and South America. Often these papers are rejected as being out of scope, more than other regions, but also rejected after review more than any other country.

Journal of Transport and Health's cite score in 2020 is: 5.1

2713 citations/531 documents (2017-2020)

It is ranked 9<sup>th</sup> out of 78 social science safety journals.

It is ranked 29<sup>th</sup> out of 113 transport journals.

It is ranked 77<sup>th</sup> of 526 public health journals.

#### ACTIVE TRAVEL

In the United Kingdom we have reconvened the Partnership for Active Travel, Transport and Health. Organisations which have joined the partnership include ourselves and also the Faculty of Public Health (FPH), British Medical Association (BMA), Royal Society of Public Health (RSPH), British Cycling, Cycling UK, Ramblers' Association, Living Streets, Sustrans, Chartered Institute of Logistics and Transport (CILT), Chartered Institute of Highways and Transport (CIHT) Chartered Institute of Water and Environmental Management (CIWEM), Open Spaces Society, Urban Transport Group, Town and Country Planning Association (TCPA), and Medical Women's Federation (MWF). The partnership will work to achieve collaboration and exchange of information and in particular to ensure that public health knowledge is available to organisations working in this field.

In the United Kingdom we have submitted evidence to an APPG enquiry into the Cycling and Walking Investment Strategy. We have particularly drawn the APPG's attention to important recent findings presented at the ICTH, including research into the effectiveness of different methods of traffic calming.

We responded to Government consultations on pavement parking.

#### CLIMATE CHANGE

We have established a workstream on climate change. Our climate change leads have identified a programme of work to disseminate information on transport and climate change. The first step in this is the production of a podcast, and work on this has started.

We have sent a detailed submission to the Government's Zero Carbon Transport Board.

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 been given a seat on the Faculty's Climate Change Committee.

#### LOW TRAFFIC NEIGHBOURHOODS

We have commenced the preparation of 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 DfT examining community severance which culminated in the development of an assessment methodology. We have been pleased to see steps are being taken to disseminate this methodology.

#### PROFESSIONAL TRAINING

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.

#### LATIN AMERICA

In May 2021, Henry Hernandez and Lake Sagaris were invited to join the Transport & Health Science Group board, as representatives from Latin America. Since then they have participated in regular board meetings. This, mostly focused on contributing to the statutes that will enable Movisal to function suitably within THSG, and, more recently, starting to pull people together, generate some basic reference documents, and help to generate a presence for transport and health as a constituency, within Latin America, and for Latin America and the Global South, transport and health research and other relevant initiatives.

In this sense, we have made some significant progress toward deeper collaborations, specifically, preparation of a report on Transport, Equity and Health, in Spanish, available on the website [cambiamos.cl](http://www.cambiamos.cl), <http://www.cambiamos.cl/transporte-salud-y-equidad/>, and other researchers' sites, including THSG. Based on this report we are completing what we hope will become a guest editorial in a Spanish-language journal, to be submitted in early September.



## TRANSPORTE SALUD EQUIDAD

Acercamientos urgentes  
en un mundo con  
COVID-19

Una colaboración del grupo de

del Transport & Health sobre las interacciones

MOVISAL es una colaboración del grupo de Salud en América Latina (Movisal) del Transport & Health (Reino Unido), para difundir información sobre las interacciones Vitales entre estos temas, en nuestra región.

Contamos con dos representantes en la directiva de THSG: Henry Hernandez-Vega (henry.hernandezvega@ucr.ac.cr) y Lake Sagaris (lsagaris@uc.cl), y encargo es ayudar a este espacio, vital para en soluciones integrales de los desafíos socio-ambientales y de salud.

¡Les invitamos a participar!

Más informaciones:  
[www.transportandhealth.org.uk](http://www.transportandhealth.org.uk)

con el apoyo del Centro de Desarrollo Urbano Sustentable y el Centro BRTs, Pontificia Universidad Católica de Chile, por la oportunidad de producirlo, y al Laboratorio de Cambio Social (Chile) por la coordinación del diseño, en manos de Sandra Aguilera, y producción, Ximena Vásquez.

© Laboratorio de Cambio Social, 14 de junio

El propósito de este Informe es apoyar la difusión en América Latina de temas importantes relacionados con salud, transporte y equidad. Por lo mismo invitamos a tomadores de decisiones, organizaciones ciudadanas, académicos, estudiantes y otras personas a utilizar el material que contiene para sus propios trabajos, siempre citando la fuente.

Para citar:

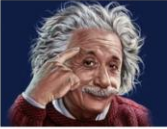
Sagaris, L., Mindell, J., Rojas-Rueda, D., Cortínez-O'Ryan, A., Sadarangani K., Casanave-Macias, J., González-Sánchez, Y., Hernández-Vega, H. (2021) Transporte, Salud, Equidad Acercamientos urgentes en un mundo con y post-Covid 19 from Santiago, Chile. cambiamos.cl

Sabiendo que esta mirada integral sobre salud, transporte y equidad es bastante novedoso en América Latina, destacamos la inclusión de una bibliografía bastante extensa, con referencias claves para los distintos temas de mayor relevancia.

During June, we were able to participate in the coordination of a special two-day session during the International Conference on Transport and Health, which allowed us to highlight our work, introduce Movisal to a broader audience and underline the importance of global dialogue that brings together very diverse perspectives to consider issues of transport, equity and health.

The session was entitled: Changing perspectives following global disruption, WHAT IF WE TURNED THE WORLD UPSIDE DOWN? . It included two keynotes, two Hot Topic Workshops from the Global South, with partners in India, Africa, Latin America, Europe and North America.

More information at: [www.tphlink.com/global-south-2-day.html](http://www.tphlink.com/global-south-2-day.html)

	<p style="text-align: center;"><b>ICTH Global South</b></p> <p style="text-align: center;"><b>WHAT IF WE TURNED THE WORLD UPSIDE DOWN?</b></p> <p>ICTH is excited to host a 2-day event featuring the <b>Global South</b> including South America, India and Africa. This event is included in the ICTH registration. You DO NOT need to register separately. <i>Translation services will be provided in three languages; English, Spanish and Portuguese.</i> Your host will be Lake Sagaris. Lake will lead design thinking discussions on automobility and its impacts on global health, road safety, violence, women's participation and children's development as a global phenomenon. The focus will be on the cause-effect relationships and how transport and health play out very differently beyond the main power centres of North America, Australia and Europe, in what were once considered "third world" or "developing" countries.</p> <div style="display: flex; align-items: flex-start;">  <div style="margin-top: 5px;"> <p><b>Insanity is doing the same thing over and over again, but expecting different results.</b> <i>Albert Einstein</i></p> <p>A new way of thinking is needed to present opportunities that have the ability to unleash new potentials for social and urban change in the Global South. Perhaps, instead of thinking about these regions as "behind" or "backward", we should embrace lessons learned from a culture rooted in high levels of walking, cycling and public transport use.</p> </div> </div> <p>The MoviSaL website is also now available in Portuguese. Thanks to Hannah Arcuschin Machado for the translation.</p> <p><b>TRANSPORT SAFETY</b></p> <p>We explored some issues relating to bus safety arising from the financial pressures created by the pandemic.</p> <p>We also responded to two consultations on revising the Highway Code, particularly about safe passing of people riding cycles or horses.</p> <p>A number of issues relating to the safety of autonomous vehicles were raised in papers at the 2021 6<sup>th</sup> International Conference of Transport &amp; Health and we have arranged to consider them further at our 2021 Seminar with a view to identifying action that should be taken.</p> <p>The Transport Injuries Prevention Network is one of the areas of activity adversely affected by covid.</p>
<p><b>Statement confirming whether the trustees have had regard to the guidance issued by the Charity Commission on public benefit</b></p>	<p>Standing Order 110A of our financial standing orders states</p> <p>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</p> <p>All trustees have confirmed compliance with this requirement.</p>

## Additional information

<b>Policy on grant making</b>	Grant making is not a substantial part of the charity's activities at present.
<b>Policy on social investment including program related investment</b>	Social investment is not a substantial part of the charity's activities at present.
<b>Contribution made by volunteers</b>	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.
<b>Training of trustees</b>	All but two of the current Trustees were involved in the charity registration process and the discussions with the Charities Commission coupled with discussion of the associated documents (such as educational strategy, knowledge management strategy, guidelines on political activity, bye laws, financial standing orders, privacy policy and bribery policy) constituted an important training process. The trustees were supplied with and required to read <i>Charity Commission Guide for Charitable Trustees</i> and the document " <i>Certificate in Charity Law and Governance: - Stewardship of Funds and Assets</i> " produced by the Chartered Governance Institute.



## Achievements and Performance

<p><b>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.</b></p>	<p>Our main achievements over the year have been</p> <ul style="list-style-type: none"> <li>• Together with our North America based sister organisation IPATH we organised a highly effective international conference. This has contributed to the advancement of knowledge especially in relation to the links between transport and placemaking, to the safety and environmental impact of autonomous vehicles, to the health and social benefits of public transport and to the effectiveness and benefits of low traffic neighbourhoods and traffic calming. The dissemination of this information should support important areas of professional practice around the world.</li> <li>• We secured approval of a formal placement for trainee specialists by the Faculty of Public Health of the Royal Colleges of Physicians of the United Kingdom. When this placement is put into effect, following the decline in the current pressures of the pandemic, it will contribute to the training of consultants in public health.</li> <li>• We have produced material about transport and health in Spanish and in Portuguese considerably assisting in the dissemination of knowledge in the field to practitioners in Latin America, Spain and Portugal.</li> <li>• The Journal of Public Health has received an increased number of submissions and improved its cite score. This assists in the dissemination of knowledge and the improvement of professional practice.</li> <li>• We have re-established a partnership between walking, cycling and environmental organisations and organisations from the field of medicine and public health. This will benefit the activities for the public benefit of all the member organisations.</li> </ul>
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## Additional information

<p><b>Achievements against objectives set</b></p>	<p>Because of the pressures upon the public health system resulting from the pandemic the 2020 AGM felt unable to set objectives.</p>
<p><b>Performance of fundraising activities against objectives set</b></p>	<p>The fundraising objectives in the May 2018 business case were dependent on registration as a charity and work on implementing them was not able to commence until early in 2021.</p> <p>It is therefore too early to report on fundraising progress as, apart from one application made by MoviSaL, only preparatory work has so far been done.</p>
<p><b>Investment performance against objectives</b></p>	<p>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.</p>

## Financial Review

<p><b>Review of the charity's financial position at the end of the period</b></p>	<p>For 21 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.</p> <p>All of the assets of the former Transport &amp; 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.</p> <p>The charity in its general funds has assets of £3,644.87 of which £250 is a loan from the residual Transport &amp; Health Study Group. There was a surplus of £145.07 over the year. There are also funds held for it by IPATH, the up to date amount of which will not be calculable until the accounts for ICTH have been completed. There will have been a surplus on this account also. In addition to cash the charity's other assets are intellectual property.</p>
<p><b>Statement explaining the policy for holding reserves stating why they are held</b></p>	<p>On 18<sup>th</sup> 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."</p> <p>No reserves are currently held</p>
<p><b>Amount of reserves held</b></p>	
<p><b>Reasons for holding zero reserves</b></p>	
<p><b>Details of fund materially in deficit</b></p>	<p>There are no material deficits</p>
<p><b>Explanation of any uncertainties about the charity continuing as a going concern</b></p>	<p>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.</p>

### Additional information (optional)

You may choose to include further statements where relevant about:

<p><b>The charity's principal sources of funds (including any fundraising)</b></p>	<p>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.</p>
<p><b>Investment policy and objectives including any social investment policy adopted</b></p>	<p>Not currently applicable.</p>
<p><b>A description of the principal risks facing the charity</b></p>	<p>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 has demonstrated the importance of that risk, but has also given us the added confidence that</p>

	<p>comes from knowing that we were still able to maintain significant activity even during this difficult time.</p> <ol style="list-style-type: none"> <li>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.</li> <li>3. Our relationship with IPATH is central to the success of the International Conference on Transport and Health but we see no current problems.</li> <li>4. 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.</li> </ol>
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## Structure, Governance and Management

<b>Description of charity's trusts:</b>	The charity currently has only a single trust. The THSG portion of subscriptions by IPATH members is not immediately paid to THSG but is managed on our behalf by IPATH so as to facilitate the financial arrangements for ICTH as a joint activity. Some expenditure connected with ICTH is made from these funds and the surplus being paid over to THSG funds in due course.
<b>Type of governing document</b>	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.
<b>How is the charity constituted?</b>	Until 3 <sup>rd</sup> November 2020 it was an unincorporated association and was not registered as a charity. Since 3 <sup>rd</sup> November 2020 it has been constituted as a CIO.
<b>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</b>	<p>Trustees are</p> <ul style="list-style-type: none"> <li>• elected by the AGM – four have currently been so elected, of whom one resigned towards the end of the year. A fifth post, which would normally be entitled to Trustee status, that of Webmaster, was filled by the AGM but the individual elected chose not to become a Trustee.</li> <li>• appointed by Board to fill vacancies – one was so appointed (to fill the vacancy for Secretary).</li> <li>• appointed by Board to fill the office of Deputy Treasurer – this recently-created post has not yet been filled.</li> <li>• elected or appointed by one of our Regional Councils (currently two each for UK, Europe, Latin America (also known as MoviSaL) and 1 for New Zealand) -five have so far currently been elected and 2 are vacant (one in Europe and one in New Zealand)</li> <li>• appointed by an organisation which acts as our agent in managing a Regional Council (IPATH appoints two to represent North America), the Health Topic Hub of the New Zealand Transport Knowledge Hub may appoint one of two New Zealand representatives but has not so far done so</li> <li>• the Editor of the <i>Journal of Transport &amp; Health</i>, appointed by a competitive process jointly by ourselves and our publisher, Elsevier, is also a Trustee.</li> </ul>

### Additional information (optional)

You may choose to include further statements where relevant about:

<b>Policies and procedures adopted for the induction and training of trustees</b>	A Board meeting has been scheduled for October to discuss training of new trustees and further training of existing trustees. We have decided to join the National Council for Voluntary Organisations which provides useful services in this field.
<b>The charity's organisational structure and any wider network with which the charity works</b>	<p>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.</p> <p>We have an arrangement with the International Professional Association for Transport and Health, an international scientific society similar to ourselves which is incorporated as a not for profit organisation in Michigan. All IPATH members become members of THSG (and it collects their membership fee for us) and it acts as our agent in North America whilst we act as its agent in the UK. We have representatives on its Board.</p> <p>We have an arrangement with the Health Topic Hub of the New Zealand Transport Knowledge Hub whereby it administers our New Zealand Council.</p> <p>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). TSIG drafted Faculty comments on the cycling and walking investment strategy and has contributed to the Faculty's development of a climate change strategy. TSIG has been given a seat on the FPH Climate Change Committee.</p>
<b>Relationship with any related parties</b>	Apart from research collaboration there have been no transactions with related parties.
<b>Significant events</b>	There have been difficulties in our banking arrangements because of the failure of our bank to advise us that we should open a new bank account upon our change of status and its consequent failure to change the name of our account. This has affected the development of our new membership administration system. Thus, although the THSG website was updated and a system for collecting membership fees through an online platform was initiated, the full online membership application form and payment system are not yet functioning.

#### Reference and Administrative details

<b>Charity name</b>	<b>TRANSPORT AND HEALTH SCIENCE GROUP</b>
<b>Other name the charity uses</b>	<b>THSG    MoviSaL</b>
<b>Registered charity number</b>	<b>1192138</b>
<b>Charity's principal address</b>	<b>Land O' Cakes, 48, Middle Hillgate, Stockport, SK1 3DL</b>



## 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	Jenny Mindell	Co-chair (Science)		AGM
3	Andree Woodcock	Secretary	Resigned 06/07/21	AGM
4	Beverley Hoyle	Secretary	Appointed 19/08/21	Board filled vacancy
5	Tom Fitzgerald	Treasurer and Company Secretary		AGM
6	Martin Rathfelder	Vice Chair (Policy, UK)		UK Council of THSG
7	Adrian Davis	Vice Chair (Science, UK)		UK Council of THSG
8	Karyn Warsow	Vice Chair (Science, North America)	Acted for the whole year but changed role from Policy to Science on 4.10.21	IPATH
9	Randy Rzewnicki	Vice Chair (Policy, Europe)		European Council of THSG
10	Henry Fernandez Vega	Vice Chair (Science, Latin America)	Appointed 21/4/21 but there was a delay in registration	MoviSaL
11	Lake Sagaris	Vice Chair (Policy, Latin America)	Appointed 21/4/21	MoviSaL
12	Charles Musselwhite	Editor, Journal of Transport & Health		Elsevier, subject to THSG approval
13	Steve Jaffe	Vice Chair (Policy, North America)	Appointed 4/10/21	IPATH

### 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**

<b>Description of the assets held in this capacity</b>	None
<b>Name and objects of the charity on whose behalf the assets are held and how this falls within the custodian charity's objects</b>	Not applicable
<b>Details of arrangements for safe custody and segregation of such assets from the charity's own assets</b>	If we were to come into possession of such funds (for example for FPH or IPATH) 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

Type of adviser	Name	Address

**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

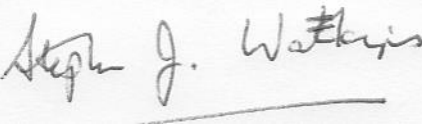
Other optional information

## Declarations

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

Signed on behalf of the charity's trustees

Signature(s)

	Signature confirmed by e mail 1/10/21 0718
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Full name(s)

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

Co-chair (Policy)	Treasurer and Company Secretary
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Date

5.10.21
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