

Company number: 2835637

Charity Number: 1048788

Women's Health Matters

Report and financial statements
For the year ended 31 March 2026

Women's Health Matters

Reference and administrative information for the year ended 31 March 2026

Charity name Women's Health Matters

Company number 2835637

Charity number 1048788

Registered office and operational address

Until 16 March 2026: 44a-48 The Refinery, Sugar Mill Business Park, Oakhurst Avenue, Leeds, LS11 7DF

From 16 March 2026: Great Eastern House, Junction 7 Business Park, Wakefield Road, Leeds, LS10 3DQ

Trustees

Trustees, who are also directors under company law, who served during the year and up to the date of this report were as follows:

Hannah Jones	Chair of Trustees
Amita Fearon	Treasurer
Sarah Salahuddin	Vice Chair of Trustees
Federica Angeli	
Emma Dickens	resigned 9/10/2025
Megan Fletcher	appointed 15/12/2025
Lucy Graham	appointed 18/6/2025
Georgia Griffiths	appointed 25/6/2025
Lydia Harford	appointed 01/08/2025
Tessa Johnson Jones	resigned 29/01/2026
Carol Lever	
Loli Sara-Ann Mziray	appointed 3/12/2025
Hannah Montague-Millar	appointed 17/10/2025
Jade Popple	appointed 23/06/2026
Nicola Rhodes	
Aimee Ward	
Sandra Watson	appointed 10/7/2025

No trustees are related or live at the same address

Key management personnel

Rachel Kelly	Chief Executive
Bridget Walker	Finance and Office Manager

Bankers

Unity Trust Bank plc
4 Brindley Place, Birmingham, B1 2HB

Solicitors

Ison Harrison
Duke House, 54 Wellington Street, Leeds, LS1 2EE

Independent examiner

Jennifer Daniel FCCA DChA
Slade & Cooper Limited
Beehive Mill, Jersey Street, Manchester M4 6JG

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Trustees' annual report for the year ended 31 March 2026

The Trustees present their report and the unaudited financial statements for the year ended 31 March 2026.

Reference and administrative information set out on page 1 forms part of this report. The financial statements comply with current statutory requirements, the memorandum and articles of association and the Statement of Recommended Practice - Accounting and Reporting by Charities: SORP applicable to charities preparing their accounts in accordance with FRS 102.

Objectives and activities

Women's Health Matters' Objects (as set out in the company's articles of association on the Charity Commission)

The Charity's objects are restricted specifically to:

- (a) preserve and protect the good health, both physical and mental of Women in Leeds and the surrounding area;
- (b) the prevention or relief of poverty of Women and Girls and their families, residing or working within Leeds and the surrounding areas; and
- (c) the advancement of education to improve knowledge and understanding of the rights and freedoms for the benefit of disadvantaged Women, and Girls and their families, so they have a fair chance at a better life

In particular by:

- (a) the provision of advice, counselling, assistance, training, and other support services;
- (b) providing grants to individuals in need and/or charities, or other organisations working to prevent or relieve poverty

Our Vision: All women and girls are safe and healthy.

Our Purpose: Supporting disadvantaged and marginalised women and girls to have a fair chance at a better life.

Our Mission: Women's Health Matters exists to support women and girls to live safe and healthy lives. We achieve this by providing a holistic, trauma-informed service for women and girls who are socially, economically, or politically marginalised. This includes, but is not limited to, those affected by domestic abuse, those whose children live elsewhere, those accessing maternity services, women seeking asylum, women with disabilities, and women and their children experiencing trauma.

We take a woman-centred holistic approach, creating a safe, nurturing environment to help women and girls recover their confidence, explore their own needs, regain control of their lives, and build secure and healthy relationships.

Our Values:

By women, with women

A women-led organisation, working with, and responsive to, the needs of women, their families, and girls.

Warm

We are respectful, compassionate, and kind. We provide welcoming and safe spaces and remove barriers to engagement.

Brave

We are bold, resilient, and courageous in our approach, and encourage bravery and strength in those we support.

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Empowering

Women are the experts in their own lives. We work holistically to empower, inspire, and support them.

The women we work with face significant health inequalities. From our 2025/26 survey of women and girls we intensively support, over half live in the top 3% most deprived wards in England and almost all live in the 20% most deprived wards. There are 482 Lower-layer Super Output Areas (LSOAs) in Leeds. Of which 82 (23%) are ranked amongst the most deprived 10% nationally. We worked across the 11 areas in Leeds ranked in the most deprived 1% nationally, by the Index for Multiple Deprivation (2025).

The State of Women's Health in Leeds report noted 23% of women live in the most deprived areas of Leeds, with only 8% in the wealthiest. In addition, that deprivation has a major impact on the health of the population with the mortality rate in women in the more deprived areas of Leeds 40% higher than that in the wealthiest areas.

In the latest reported year, West Yorkshire Police recorded just over 78,000 domestic incidents or occurrences. This represents a 5% increase compared to the previous year. The figures include a range of incidents, from domestic abuse to other related crimes. These figures are based on police data, and the actual number of domestic abuse incidents will be higher, as it is estimated that less than 24% of domestic abuse incidents are reported to the police.

A significant percentage of women who experience domestic violence also experience mental health problems. Studies indicate that women experiencing domestic abuse are at a significantly higher risk of developing mental illnesses, with research suggesting they are three times more likely to develop a serious mental illness. Approximately 49.5% of women who presented to their GP with domestic abuse had already been diagnosed with some form of mental illness according to the University of Birmingham. Furthermore, research suggests that women with mental health problems are also more likely to experience domestic abuse, with 60% of women with mental health problems having experienced domestic violence according to the Mental Health Foundation.

We specialise in group work, peer support, and providing one to one support. We work intensively with women and girls who are most at risk. Where capacity allows, we undertake outreach work that enables us to broaden our reach to a wide range of women who have often found it more difficult to work with statutory services. We also deliver training to professionals, building on our expertise and including input from experts by experience.

We recognise that there are disadvantaged groups in our society and affirm that the charity has a responsibility for combating the causes of these disadvantages. We strive to ensure that all women have full access to employment, voluntary work, services provided and Board of Trustees membership. It is fundamental that no one is treated less favourably by WHM on the grounds of race, colour, nationality, religion, disability, age, marital status, class, sexual orientation, or responsibility for dependants. Our aim is to make our services accessible. All are provided free of charge for service users. We work in ways that help overcome barriers to participation, for example specific services working with women with learning disabilities, women seeking asylum with interpretation support, women whose children live in the care of others, care experienced women, and young women. We build in costs (where funding permits) for crèche, interpreters, and

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access costs and travel into our services, and use safe and accessible venues from which to run services and events.

Our funding limits the number of women we can help. We hold waiting lists when necessary. We ensure that women have information about other services available in the city and are referred appropriately when additional support is required or is not within our remit.

We undertake equal opportunities monitoring to try to ensure women from multiple backgrounds are accessing and delivering our services. We have an Equity, Diversity, and Inclusion policy to ensure equitable, inclusive, and accessible services for all women who engage with our organisation. It is designed to ensure that no woman is treated unfairly or faces barriers to participation due to their personal characteristics or lived experiences. We have an Equal Opportunities Policy and monitoring for staff, trustees, and volunteers that supports recruitment, monitoring, induction, training and all the services we deliver.

We ensure that staff members are experienced, trained, supported, and supervised to carry out the work of the charity and we strive not to embark on areas of work that will cause detriment or harm. Volunteers and students support some services to achieve their aims and objectives. They receive induction and ongoing support as well as out of pocket expenses.

The trustees review the aims, objectives, and activities of the charity each year. This report looks at what the charity has achieved and the outcomes of its work in the reporting period. The trustees report the success of each key activity and the benefits the charity has brought to those groups of people that it is set up to help. The review also helps the trustees ensure the charity's aims, objectives and activities remained focused on its stated purposes.

Declining funding has been an issue in this year, with highly competitive processes with some trusts and foundations lowering income levels, and others 'spending out' or shutting down. Rising misogyny and an increase in hate crimes and speech levied against our beneficiaries, staff, and trustees has also made this year more challenging. 70% of our staff and trustees have declared lived experiences of Domestic Violence and Abuse.

The trustees have referred to the guidance contained in the Charity Commission's general guidance on public benefit when reviewing the charity's aims and objectives and in planning its future activities. In particular, the trustees consider how planned activities will contribute to the aims and objectives that have been set.

Achievements and performance

The charity's main activities and who it tries to help are described below. All its charitable activities focus on women and girls in disadvantaged areas of Leeds and surrounding areas, and with groups of women and girls who experience additional disadvantage. Activities are undertaken to further Women's Health Matters charitable purposes for the public benefit.

In 2025/2026, [Women's Health Matters](#) (WHM) worked directly with 1847 women and girls (2024/2025: 1702); 1428 women and girls accessed intensive group and 1 to 1 support (2024/2025: 1376) and a further 419 were reached through lighter touch

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support. We directly supported 235 children (2024/2025: 311) and had an impact on a further 1400. We ran 970 group sessions, 1518 one-to-one sessions and 97 creche sessions.

We delivered our work across 25 [services](#) during the year:

Art Therapy
Being You Leeds
Bluebirds 1:1 Support
Bluebirds Group
Breastfeeding Peer Support
Breathe Free
Creche
Cuppa & Connect (Women's Health Matters Drop In)
Digital Support and Inclusion
Emergency Fund, Household Support Fund, and Product Bank
Family Canvas
Feel Good
Inside Out
Leeds Domestic Violence Service (LDVS) Support Groups
LDVS Sanctuary Support
Maternity and Neonatal Voices Partnership
Pregnancy Choices Advocacy Service
Rainbow Hearts
Referrals and Short-Term Work
Rosebuds
The Key Change
Women & Girls' Alliance, Leeds
Women's Health Matters external training and workshops for professionals
Women's Health Matters Student Placements Programme
Women's Health Matters Volunteering Programme

Since the last annual report and our plans for the future contained within it:

- **Work within our 3-year strategy**

We continued to work and deliver services within Women's Health Matters' Strategic Priorities for April 2024 – March 2027:

Priority 1: Identify the needs of women and girls and develop effective services in response.

We provide a supportive, holistic, trauma-informed approach to women and girls with a range of complex, interconnected issues. It is imperative that we maintain this safe, non-judgemental, and effective approach, and increase our capacity in Leeds and surrounding areas, to provide the best quality services to women and girls who need them the most.

Priority 2: Ensure that we can continue to meet the needs of women and girls.

We will develop income from diverse sources, continually monitor and review our working practices, and expand our partnerships and influence, to ensure women and girls are supported fully, and that we can deliver value for money to our supporters.

Priority 3: Give voice to the experience of women and girls.

We support women and girls to build their confidence; to work towards a more positive future for them and their children; and to find and use their voice to influence and improve the systems in our society, which could help women and girls in the future.

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- **Continue to prioritise our staff wellbeing with regular and meaningful support**

At WHM we understand that empathetic engagement with survivors of trauma can have a detrimental impact on team members emotional well-being and increase the risk of vicarious trauma. To reduce that risk we prioritise the physical and emotional safety of staff through trauma-informed practice. We do this by ensuring that team members understand the signs of vicarious trauma. We have an open-door policy which includes emotional check ins, ensuring that team members do not carry the weight and responsibility of support by themselves. We allocated additional staff hours to the role of Staff Guidance & Support Manager.

We hold and deliver:

- Regular 1-1 internal supervision
- Weekly peer support and reflective practice which supports both individual and team well-being. Each session provides a safe, guided space to share experiences, build knowledge, share expertise, and allow for reflection. In addition, this works to ensure that the team has a greater sense of being supported and aids in enhancing resilience to stress
- Monthly staff well-being sessions which support team members to take care of themselves and build resilience
- Monthly full team meetings
- 6 weekly safeguarding reflective practice meetings
- Access to three designated Safeguarding Leads
- Access to external supervision or coaching
- Access to support from the Mindful Employer Plus Assistance Programme which offers 24-hour telephone support and counselling if needed

- **Ensure a high level of quality beneficiary support across our projects through access to staff training, regular supervision and feedback, and our Internal Quality Assurance Process**

In addition to mandatory training for staff, each individual is given a personal training budget to be used on areas they are interested in, or feel could be enhanced in their practice, or will give greater depth and expertise to their roles. A standardised form is used for 1-1 supervision and feedback to ensure that there is consistency across discussion points in 1-1s across different managers. Since launching in 2024, the Internal Quality Assurance Programme is working well, with regular reviews taking place at least every year across all projects, and any findings addressed accordingly. The process ensures that Women's Health Matters provides a consistent high-level service to all women who access our projects and that Project Leads and Project Workers are all working to the same high standard and embracing our values.

- **Audit and overhaul our IT systems, database and associated policies to ensure these are fit for purpose**

This process is still underway and remains a focus for the current year. A new funders and supporters management system has been introduced and is being rolled out.

- **Investigate new premises that are accessible, suitably located, affordable, and meet our needs**

We were delighted to move in March 2026 to new premises. These offer brighter, cleaner, more professional surroundings and we have increased our group room capacity enabling multiple groups to run at the same time.

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- **Develop and deliver training courses and workshops for professionals**

Development continues in this area and in addition to regular courses being held for professionals in our setting, sessions have been delivered in universities to social work students, and in prisons to prison officers and support workers. This includes [Survivors' Voices: Domestic Abuse Awareness Training](#) and [Understanding the Impact of Child Removal on Women: A Compassionate Approach](#). We also deliver workplace workshops such as [Menopause Training Session](#).

- **Continue to assess and develop the diversity of our funding base and prioritise funding bids to sustain and continue the growth of our services for women whose children are at risk of or have been taken into care, those who have or are experiencing Domestic Violence and Abuse, and those seeking asylum**

This year, we have continued to have success with many funding applications. We have in the region of 30 different funding streams. Declining funding has been an issue, with highly competitive processes with some trusts and foundations lowering income levels and others 'spending out' or shutting down. The area where this has been most challenging has been securing funding for delivery of support to women whose children live in the care of others. The need for this work remains. We continue to support this cohort and have used reserves to support this work. Women with children removed from their care are frequently told by Social Workers and the Family Court that to stand any chance of children being returned, they must complete a parenting course. Inside Out was Leeds' only course available for women who've experienced repeat removals. This remains a priority.

- **Investigate an increase in our work with women and their children together**

We developed a new programme called Our Circle and successfully applied for funding to start in 2026/27. Our Circle is a support group for women and girls who are pregnant or have a child under the age of five and have had experience of the care system. It provides a safe, welcoming space where participants can feel supported, understood, and free from judgement. The group offers a trauma-informed environment where women can engage positively with their children, strengthen their relationships, and share their experiences with others. It also supports participants to build confidence in their parenting and develop new skills in a nurturing and empowering way. Each session is thoughtfully planned and tailored to meet the specific needs of the women involved, ensuring the support is relevant and meaningful.

- **Explore the extension of our work in schools into primary settings**

The funding received for Key Change did not enable us to carry out this extension into specific primary settings; however we did secure additional funding to deliver in healthy relationships work with girls in Specialist Inclusive Learning Centres (SILCs).

- **Explore a system and process to gather information around sustained improvements for women after support has ended**

In 2025/26, we launched a Sustainable Improvements Process. This six-month follow-up is designed to help Women's Health Matters understand the longer-term impact of support provided to women who have accessed services. The survey focuses on whether changes made during support have been sustained over time and identifies areas where support may be strengthened for future service users.

- **Ensure our practices, policies, and procedures are in line with ongoing changes and enhancements to employment law, SORP, and the Supreme Court ruling on the Equality Act**

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Changes have been made accordingly to policies and practice in these areas. The Supreme Court ruling on single sex spaces is still an ongoing issue with no further guidance received in 2025/26. Further guidance has now been made available at the start of 2026/27.

- **Regularly revisit our Safeguarding procedures and test their effectiveness**

We are proud of our robust safeguarding procedures and policies which are regularly reviewed. In line with current guidance, we have separate Safeguarding policies for Adults and Children. These are reviewed at least annually. Safeguarding Process audits are carried out regularly. Staff and volunteers undertake regular Safeguarding training, internally and externally. There is a standing agenda item of Safeguarding for Trustees' meetings, and a report is produced by the Safeguarding Lead. All trustees have a minimum of Safeguarding Level 1 and complete internal safeguarding training.

- **Recruit new trustees as appropriate, including former service users**

We have recruited eight new trustees to the board since 1 April 2025 up to the date of this report. Our trustee board currently numbers fifteen, and is representative of the women we support, with trustees from a range of personal and professional backgrounds and lived experiences, nationalities and ethnicities, sexual orientation, and disabilities. 70% of our staff and trustees have declared lived experiences of Domestic Violence and Abuse.

- **Continue to develop opportunities for women currently involved in our services to support our work through helping at events and activities and through formal, regular volunteering after support has ended**

This has been an area of success in this year (please see volunteering section). We are delighted that women who have accessed our services have gone on to volunteer, and in some cases, access paid work at WHM, utilising what they have learnt and sharing their experiences to help others.

- **Continue to develop our external volunteering offer, student placements, and contributions from external workers**

In 2025/26, we engaged with 102 volunteers, including trustees, supported 6 student placements, and worked with 29 sessional and external workers.

- **Hold a celebration event for WHM women in 2025**

We delivered our [annual celebration event](#) in October 2025 bringing together service users, volunteers, students, staff, and trustees, to reflect on the past year and celebrate the power of community. This year's theme, '**Stronger Together**,' captured the spirit of the day perfectly, as women came together to share stories, experiences, creativity, and connection. All enjoyed a shared lunch together, and transport costs and a creche for pre-school children were provided.

- **Update and complete our annual snapshot survey**

We updated and completed our annual snapshot Survey in November 2025 – February 2026. The results can be found below in the Beneficiaries of our Services section.

Beneficiaries of our services

As of 31 March 2026, 28% of women and girls directly supported by WHM were aged under 26, 53% of women supported by WHM were aged 26-45, and 17% were aged over 45 (2% unanswered).

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42% of women and girls identify as having no religion, 12.5% as Muslim, 21% as Christian, 2.5% as another religion including Buddhist, Hindu, and Sikh. 22% chose not to disclose this information.

40% of women and girls report having a disability including physical or learning disability, mental health, or long-term health condition. Of those with a disability, 37% report multiple disabilities.

44% of women and girls are not White British. 7% chose not to disclose this information. 30 different languages are spoken, and 41 different nationalities are represented in the women we support including Afghan, Albanian, Eritrean, Iranian, Iraqi, Nigerian, Pakistani, Palestinian, Polish, Sudanese, Syrian, and Ukrainian.

With regards to residency status, 22% of women state they are not British nationals, of these 47% are seeking asylum, 30% are refugees, 6% have discretionary or indefinite leave to remain and 2% have settled status. The remaining 15% include those on a spousal visa, those with unknown or unclear status, and those under humanitarian protection.

Our 2026 survey of beneficiaries ran between November 2025 and February 2026:

Our snapshot survey provides valuable insights into the experiences and needs of the women accessing our services. 29% of women in service at the time took part in the survey (100 out of 334).

This year's findings suggest a return to patterns more consistent with previous years, after the heightened levels of need identified last year. Women continue to face significant challenges, and our services remain critical in delivering sustained support and positive outcomes.

School/Work/Benefits

- 69% currently receiving benefits (2025:71%)
 - o 26% of these have had their benefits stopped, sanctioned or delayed (2025:20%)
- 65% currently unemployed (2025:74%)
 - o 90% of these women have been unemployed for more than 6 months

Statutory Services

- 53% have had Children's Social Work Service Involvement either as a child themselves or as an adult with their own children (2025:43%)
- 11% have currently or previously had adult social care involvement (2025:16%)
- 9% were in care as a child (2025:10%)

Finances

- 82% have or have had money worries and have been unable to afford basic things (2025:78%)
- 55% have used a foodbank (2025:56%)
- 36% are currently or have been homeless (2025:35%)
 - o 7% currently
 - o 29% in the past

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- 49% are or have previously been vulnerably housed (2025:51%)
 - o 11% currently
 - o 38% in the past
- 24% are in or have been in emergency accommodation (2025:31%)
 - o 4% currently
 - o 20% in the past

Police Contact

- 71% have had contact with the police as a victim of crime (2025:65%)
- 9% have had contact with the police as an alleged offender (2025:18%)
- 11% have been arrested (2025:20%)
- 2% have been charged with a criminal offence (2025:7%)
- 2% have been convicted of a criminal offence (2025:5%)
- 0% have been to prison (2025:2%)

Health, Disability and Emotions

- 91% identify as currently having or have had mental health problems (2025:90%)
 - o 68% currently (2025:72%)
 - o 23% in the past (2025:18%)
- 46% identify as currently having or have had a long-term health condition (2025:63%)
 - o 36% currently (2025:40%)
 - o 10% in the past (2025:23%)
- 34% identify as currently having or have had a physical health condition or disability (2025:50%)
 - o 26% currently (2025:30%)
 - o 8% in the past (2025:20%)
- 23% identify as currently having or have had a learning difficulty/disability (2025:35%)
 - o 17% currently (2025:30%)
 - o 6% in the past (2025:5%)
- 98% have a lack of self-confidence (2025:85%)
 - o 75% currently (2025:71%)
 - o 23% in the past (2025:14%)
- 93% are, or have felt, lonely (2025:90%)
 - o 69% currently (2025:72%)
 - o 24% in the past (2025:18%)
- 60% are currently, or have a history of self-harming (2025:55%)
 - o 23% currently (2025:23%)

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- o 37% in the past (2025:32%)
- 59% are currently, or have historically experienced suicidal thoughts (2025:66%)
 - o 25% currently (2025:35%)
 - o 34% in the past (2025:31%)
- 37% currently have, or have had, problems with alcohol use (2025:26%)
 - o 7% currently (2025:7%)
 - o 30% in the past (2025:19%)
- 21% currently have, or have had, problems with substance misuse (2025: 24%)
 - o 5% currently (2025:8%)
 - o 16% in the past (2025:16%)
- 2% currently have, or have had, problems with gambling (2025:6%)
 - o 1% currently (2025:1%)
 - o 1% in the past (2025:5%)
- 65% currently have, or have had, problems with eating / food (2025:66%)
 - o 38% currently (2025:39%)
 - o 27% in the past (2025:26%)
- 71% currently take, or have historically taken, antidepressants or other medication for mental health problems (2025:67%)
 - o 48% currently (2025:51%)
 - o 23% in the past (2025: 16%)

Personal Experiences

- 39% have had a termination (2025:18%)
- 24% have had a pregnancy loss/miscarriage (2025:38%)
- 7% have experienced the death of a child (2025 data)
- 76% have experienced a close bereavement (2025 data)
- 80% have experienced unhealthy or abusive relationships as an adult (2025:95%)
 - o 64% experienced physical abuse (2025:70%)
 - o 78% experienced emotional abuse (2025:95%)
 - o 54% experienced sexual abuse (2025:61%)
 - o 30% have been sexually exploited (2025:23%)
 - o 71% have been the victim of violence (2025:71%)
- 44% have experienced unhealthy or abusive relationships as a child
 - o 49% experienced physical abuse
 - o 56% experienced emotional abuse
 - o 42% experienced sexual abuse (2025:54%)
 - o 33% have been sexually exploited
 - o 35% have been the victim of violence

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- 51% have witnessed domestic abuse as a child or teenager (2025:52%)
- 1% have experienced Female Genital Mutilation (FGM) (2025:5%)
- 3% have been trafficked (2025:6%)
- 3% have experienced forced marriage (2025:6%)
- 23% have taken on a carer's role for a friend or someone in their family (2025:34%)
- 31% have been sexually assaulted or raped as a child (2025 data)
- 48% have been sexually assaulted or raped as an adult (2025 data)

Feelings

- 99% strongly agree or agree that they feel able to get the support that they need from WHM (2025:100%)
- 64% strongly agree or agree that they also feel able to now get the support needed from other services, not including WHM (2025:76%)
- 50% agree or strongly agree that statutory services now listen to them (2025:62%)
- 78% strongly agree or agree that they worry about what people will think if they know about the challenges they have faced (2025:88%)
- 95% agree or strongly agree that they received help from WHM that they couldn't have got anywhere else (2025:96%)

Support Received

- 93% agree or strongly agree that they have increased their self-confidence (2025:92%)
- 94% agree or strongly agree that they feel better about themselves (2025:88%)
- 90% agree or strongly agree that they feel better able to stand up for themselves (2025:84%)
- 95% agree or strongly agree that they feel better able to make their own choices following support (2025:93%)
- 96% agree or strongly agree that support received has improved their mental wellbeing (2025:93%)
- 79% agree or strongly agree that support received has improved their physical wellbeing (2025:83%)
- 95% agree or strongly agree that they feel safer following support (2025:91%)
- 93% agree or strongly agree that they feel less anxious following support (2025:81%)
- 92% agree or strongly agree that they have widened their support network following support (2025:87%)
- 89% agree or strongly agree that they feel less lonely following support (2025:83%)

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- 83% agree or strongly agree that they have made friends who understand them following support (2025:87%)
- 94% agree or strongly agree that they feel more positive about the future (2025:87%)
- 81% feel more ready to get a job, access training, or volunteer following support, if they wanted to (2025:78%)
- 100% agree or strongly agree that they understand what abuse is following support (2025:96%)
- 98% agree or strongly agree that they are better able to respond to abusive relationships following support (2025:96%)
- 91% agree or strongly agree that they can leave or feel able to leave an abusive relationship if they wanted following support (2025:94%)

Say in Sessions

- 90% felt they got to choose what they did or discussed throughout their support (2025:92%)
- 100% felt happy with the service they received from WHM (2025:100%)

Financial Support

- 80% have received food/clothing/items/financial support from WHM
- 53% have received food, clothing or beauty items (2025: 60%)
 - o 84% of these said it helped with the cost of living (2025:89%)
- 27% have received digital devices (not including the loan of a laptop) (2025:19%)
 - o 100% of these said it helped with the cost of living (2025:100%)
- 36% have received financial support (2025:21%)
 - o 94% of these said it helped with the cost of living (2025:95%)
- 70% have received support with travel costs to attend sessions (2025:62%)
 - o 92% agree that they would not have been able to attend sessions without travel costs (2025:84%)

Children

- 48% of women supported have children under 18 living with them or elsewhere (2025:58%)

Of those who have children:

- 87% are single mums (2025:79%)
- 26% have a child in someone else's care (2025:20%)
- 22% currently have Children's Social Work Service involvement (2025:22%)
- 56% have had social care involvement in past (2025:34%)
- 57% have a child(ren) with a learning disability/difficulty (2025:30%)
- 35% have a child(ren) with behavioural problems (2025:33%)

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- 7% have a child(ren) with a physical disability (2025:2%)
- 22% have a child(ren) with mental health problems (2025:32%)

Supporting Children

- 92% of those with children agree or strongly agree that they have increased their confidence about parenting following support (2025:96%)
- 91% of those with children agree or strongly agree that they have improved their parenting skills following support (2025:96%)
- 93% of those with children agree or strongly agree that their children feel safer after support (2025:97%)
- 95% of those with children agree or strongly agree that their children have improved mental wellbeing following support (2025:97%)
- 83% of those with children agree or strongly agree that their children have made friends following support (2025:85%)
- 92% of those with children agree or strongly agree that their children have increased their confidence following support (2025:97%)
- 92% of those with children agree or strongly agree that their children have learnt new things following support (2025:95%)

Creche Support

- 27% of women with children accessed creche support (2025:28%)
- 92% would not have been able to access support without creche provision (2025:64%)
- 100% felt safe and comfortable leaving their children in WHM's creche (2025:100%)

Feedback from women:

"Women's Health Matters has changed my life. I feel seen and understood, I feel accepted and cared for."

"I've found new passions that I'm excited about, I'm much more calm in how I handle difficult situations and I am actually excited and ready for the future to be positive again."

"Women's Health Matters helped me understand that the way I'm feeling is normal, and I'm not alone."

Further information about each of our services and examples of key activities are included below with case studies:

Domestic violence and abuse work

Bluebirds

Overview: Funded by the Ministry of Justice, Bluebirds is a project for women and girls aged 11+ who have experienced domestic abuse and/or sexual violence and, as a result, are experiencing mental ill-health. Bluebirds offers an online group programme for women to support trauma recovery. The project also offers short-term, one-to-one support sessions that can explore emotional well-being and personal safety and includes

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coping strategies and referrals or signposting to other services, depending on individual need.

Referrals received: 98

Women / girls supported: 87

Group sessions: 27

1 to 1 sessions: 51

Light touch support: 136

Highlights: One key highlight this year has been delivering the Bluebirds trauma recovery content within the Rosebuds group, a well-established WHM group for women whose children live elsewhere. This has provided an opportunity to extend trauma-informed support to an existing group with strong engagement, allowing women to access learning around trauma, its impact on the brain and body, and practical coping strategies. The integration of this content into Rosebuds has been well received, with women responding positively to the sessions and valuing the space to explore these topics within a trusted and supportive group environment.

Another highlight has been that women and girls accessing one-to-one sessions have reported that the support is highly accessible, with options to engage via phone, video call, or face-to-face. Within some of the sessions, women asked to explore safety plans, which have been particularly beneficial. Many participants shared that having a safety plan in place helps them feel more prepared and in control, giving them clear steps to follow during difficult situations. These plans have supported them to identify trusted support networks, recognise warning signs, and make informed decisions about their next steps. Alongside this, many are now more aware of wider services and regularly use the tools they have learnt to support their wellbeing and mental health.

Challenges: One challenge with the Bluebirds Group this year has been maintaining consistent engagement within an online setting, as some women have experienced fluctuating attendance due to personal circumstances and attending other appointments. This has sometimes made it difficult to maintain group continuity and build deeper peer connections. Additionally, Bluebirds one-to-one support had a long waiting list due to a high volume of referrals, which meant women and girls had to wait longer than the initial expected timeframe to receive support. However, we developed and implemented a manageable plan to reduce waiting times and improve access to support.

Looking to the future: The focus for the coming year is on introducing Calm subscriptions for women participating in the Bluebirds project. This will provide ongoing access to guided meditation, sleep support, breathing exercises, and wellbeing tools outside of the sessions. The aim is to help women continue practicing coping strategies independently, strengthen emotional regulation, and support their trauma recovery between and after group sessions. We aim also to continue supporting women and girls' emotional wellbeing and personal safety through one-to-one sessions. We will continue to offer resources and tools, such as safety and wellness plans, alongside holistic wellbeing approaches like journaling, breathing exercises, and sharing information about community connection opportunities. Through this, we hope women and girls feel empowered in their journeys of wellbeing and recovery.

Case Study:

Bluebirds Online Group Support: E was referred to the group by the Community Mental Health Team to receive additional support with the impact of trauma on their mental health and wellbeing. E had a significant history of childhood abuse and later abusive relationships in adulthood, which contributed to ongoing anxiety, low self-esteem, and increasing social withdrawal.

During the programme, E engaged with sessions focused on understanding trauma, emotional responses, and developing coping strategies to manage anxiety and distress. At the beginning, E found it difficult to contribute to group discussions and often

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remained quiet, observing rather than participating. However, as the sessions progressed, E began to feel safer within the group environment and gradually increased their level of engagement. By the end of the programme, E demonstrated improved confidence, a greater awareness of their emotional triggers, and an increased ability to use grounding and coping techniques to manage anxiety. The group provided E with a supportive space that helped reduce feelings of isolation and encouraged steps towards improved emotional wellbeing.

Bluebirds 1 to 1 Support: D accessed Bluebirds one-to-one support following a referral from the NHS Primary Care Team. D has experienced long-term domestic abuse in the form of coercive control and physical abuse by her partner. D previously reported the abuse to the police in 2024 and remained in the relationship due to fear of reprisals of ending it. D experiences PTSD, anxiety, suicidal thoughts, and depression, and has been supported by a Primary Care Mental Health Nurse over the past year. Within the one-to-one sessions, a support plan was developed to explore what would best support D's safety and mental health. A DASH risk assessment and domestic abuse safety plan were completed jointly with D. The DASH assessment indicated moderate risk; however, using professional judgement and with D's consent, a referral was made to MARAC. This was accepted, and D is now receiving support from LDVS, who are working with her to manage risk and explore options for safety and reporting to the police. D also attended a Legal Drop-In service at WHM to speak with solicitors about potential protection orders. In further Bluebirds one-to-one sessions, a Wellness Recovery Action Plan and a mental health safety plan were completed to support D's emotional wellbeing. Opportunities for community connection were also explored, including Linking Leeds and Being You Leeds, and D has expressed a willingness to engage with these services to strengthen her support network and coping strategies.

Breathe Free

Overview: Breathe Free is a 3-year, trauma-informed group programme delivered by Women's Health Matters and funded by The National Lottery Community Fund. It supports women aged 16+ who have experienced domestic violence and abuse and complex trauma through a structured 19-week course focused on stabilisation, understanding abuse, and future planning.

Referrals received: 166

Women supported: 115

Group sessions: 156

1 to 1 sessions: 257

Light touch support: 286

Women supported by Impact North: 21

Women who have accessed High Speed Training: 61

Highlights: This year, Breathe Free supported 115 women through group programmes and over the year we received 166 referrals, an increase of 50 compared with year 1. Outcomes were particularly strong, with 100% of women reporting improved understanding of abuse and its impact, and 94% reporting increased confidence and self-esteem. Additionally, Women enrolled on the Breathe Free project were able to access counselling with Impact North and online training courses with High Speed Training. The programme continued to provide opportunities and support for women moving into volunteering and co-facilitation roles, demonstrating meaningful recovery and empowerment beyond the group.

Challenges: The programme has continued to respond to the complex and changing circumstances women experience, including safety concerns, caring responsibilities, and emotional readiness. While some women were not always able to complete the programme due to these factors, this has strengthened our commitment to flexible,

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trauma-informed delivery and ongoing outreach. We have enhanced our support offer by introducing a specialist one-to-one worker, providing tailored, individual support alongside the group programme. This has enabled women to access more in-depth support around areas such as self-harm, boundary setting, and safety planning, helping them to remain engaged and continue their recovery journey in a way that feels safe and manageable.

Looking to the future:

In 2026/2027, Breathe Free will build on the past year's success by expanding delivery and restructuring cohorts to reduce waiting times and improve access to support. The programme will continue to strengthen progression opportunities, including the development of a creative Photovoice evaluation project led by former co-facilitators alongside a professional photographer, creating meaningful leadership and creative pathways for women. We will also deepen partnerships to support long-term stability, including introducing an additional session with Linking Leeds to further strengthen routes for further support and independence.

Case Study: G was referred to Breathe Free after experiencing emotional abuse and coercive control, including ongoing post-separation abuse. She initially felt unable to seek support or set boundaries due to fear of professional involvement and concerns about the impact on her child. Through the programme, G received both group and one-to-one support, including safety planning and access to legal advice, which helped her better understand her rights and options. Over time, G developed increased confidence and began to assert boundaries more effectively. Her understanding of her experiences shifted, with reduced self-blame and increased self-compassion. She independently sought support from external services, demonstrating greater agency and confidence in engaging with professionals. By the end of the programme, G had strengthened her safety, widened her support network, and taken steps towards further involvement in Breathe Free, reflecting significant progress in her recovery journey.

Leeds Domestic Violence Service (LDVS)

Overview: The LDVS Domestic Abuse Education and Support Groups provide practical and emotional support to women affected by domestic abuse. Grounded in years of frontline experience, the project recognises women as experts in their own lives and places their voices at the centre of all support. The programme delivers a 14-week rolling course that combines education, empowerment, and peer support. It offers a safe, trauma-informed space where women can share experiences, rebuild self-esteem, and develop resilience. Through a holistic approach, the course addresses the complex and far-reaching impacts of domestic abuse, including emotional wellbeing, social isolation, loss of identity, and the effects on parenting and family relationships. Each session focuses on key themes such as understanding abuse (including coercive control), the impact of trauma, self-care, boundaries, safety planning, and supporting children. The content is shaped by the lived experiences of women and reflects best practice in trauma-informed care, prioritising safety, dignity, choice, and collaboration. The primary aim of the project is to support women to increase their safety while empowering them to make informed decisions, build supportive networks, and regain control over their lives.

Women / girls supported: 184

Group sessions: 195

1 to 1 sessions: 390

Light touch support: 368

Highlights: One of the highlights of the year has been the progression of women who have previously attended the group into active roles within the service. One woman transitioned from participant to volunteer and is now engaged on a freelance basis,

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supporting the delivery of group sessions. In addition, following extensive training, a former Breathe Free co-facilitator has developed her skills and confidence to take the lead in delivering one of the groups. These achievements reflect the impact of the programme in building confidence, skills, and pathways into meaningful involvement and leadership.

Challenges: One of the challenges of the year has been the increasing demand for support, often exceeding available capacity. Alongside this, many of the women accessing the programme present with complex and multiple needs, including mental health difficulties and experiences of social isolation. This has required a flexible and responsive approach to ensure that each woman receives appropriate support while maintaining the safety and integrity of the group environment.

Looking to the future: Looking to the future, we are in the process of building a working relationship with Money Buddies to strengthen the support available to women experiencing domestic abuse, particularly in relation to financial abuse and economic instability. This partnership will bring together trauma-informed emotional support with specialist financial guidance, enabling women to access practical help around debt, benefits, and financial independence alongside their engagement with our services. By developing a more integrated and holistic model of support, we aim to reduce the financial barriers that can prevent women from leaving or recovering from abusive situations, while increasing long-term safety, stability, and resilience.

Case Study: O began attending the group after separating from her abusive partner, with whom she shares three children. Prior to joining the programme, she had experienced a pattern of abuse in which her partner used manipulation and coercive control to draw her back into the relationship after periods of separation. This cycle left her feeling confused and emotionally vulnerable. At Christmas, her ex-partner attempted to repeat this pattern, using the children to re-establish contact and placing emotional pressure on her during an already difficult time. Through her engagement with the group, O was able to recognise these behaviours as coercive control and identify the risk they posed. With support, she contacted the police, who subsequently arrested her ex-partner after recognising an established pattern of coercive and controlling behaviour. This marked an important step in her safety and recovery, supported by increased awareness, confidence, and external validation of her experience.

Leeds Domestic Violence Service – Sanctuary Support Scheme

Overview: The Leeds Domestic Violence Service (LDVS) Sanctuary Support Scheme started in January 2022. A partnership of 9 organisations led by LDVS, the Sanctuary Support Scheme aims to provide long-term, one-to-one support for women experiencing Domestic Violence and Abuse. The project provides support with safety planning, accessing sanctuary measures and ongoing emotional support, to ensure tailored one-to-one support for marginalised groups who have experienced domestic abuse. These groups include LGBTQIA+ people, people seeking asylum, culturally diverse and migrant communities, those with disabilities, those experiencing forced marriage and “honour-based” violence, older people, and those who are pregnant.

Disability Specialism

This role focuses specifically on supporting individuals with physical, sensory, learning, and mental health disabilities, ensuring barriers to safety, engagement, and recovery are identified and addressed.

Pregnancy and Maternity Specialism

This role works with women who are pregnant and includes those who have young children, ensuring barriers to safety, engagement, and recovery are identified and addressed.

Women supported: 33

1 to 1 sessions: 184

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Light touch support: 778

Highlights: Over the past year, the project made strong progress in supporting individuals affected by domestic abuse through a person-centred, trauma-informed approach. A key focus was improving safety, emotional wellbeing, and long-term stability, achieved through consistent advocacy, practical support, and close multi-agency working. Positive outcomes included improved access to mental health services, successful engagement with therapeutic support, increased confidence and awareness of abusive dynamics, and progress toward safe housing and future planning. These outcomes reflect the project's core aim of empowering survivors to rebuild stability, independence, and resilience. Another key success has been facilitating effective multi-agency meetings involving all professionals and the individual we support. These meetings have helped to reduce feelings of overwhelm, providing a safe and supportive space for individuals to express their thoughts and feelings openly, while ensuring their voices are heard.

Challenges: This year presented challenges linked to the complexity of needs faced by the women supported through the project, particularly in relation to ongoing trauma, fluctuating mental health, and safeguarding concerns, which often required intensive, responsive support and coordination across multiple services. A key issue arose around role clarity within a multi-agency context when external mental health support was withdrawn on the basis that support was already being provided through the Sanctuary Support Scheme. This created the need to clearly communicate the scope of this one-to-one support, ensuring it was understood that the work focuses on safety planning, domestic violence and abuse support, risk assessment, and emotional support, rather than providing mental health counselling or therapy. Navigating health and housing systems also proved difficult at times, with delays, thresholds, and initial refusals increasing distress and risk. Relapses in mental health and hesitancy to engage with some interventions further highlighted the importance of flexibility, persistence, and trust-building within support delivery. These experiences reinforced the importance of maintaining clear professional boundaries, effective multi-agency working, and ensuring individuals are appropriately supported by the relevant services so that their needs can be met in a coordinated and effective way.

Looking to the future: The Sanctuary Support Scheme has been extended until March 2026, allowing the project to continue delivering one-to-one support to women experiencing high-risk domestic abuse. The two Sanctuary Support Workers, based at Women's Health Matters, will maintain focus on supporting women who are pregnant those with young children, as well as those with disabilities. We hope to secure further funding beyond this period to enable the continuation of this vital work, ensuring ongoing support for women who need it most.

Case Study:

Disability Specialism: P was referred to the project after experiencing domestic abuse and was living with Post-Traumatic Stress Disorder, ongoing mental health challenges, and Attention Deficit Hyperactivity Disorder. At the start of support, P had low confidence, high anxiety, and found it difficult to plan ahead. Using a person-centred, trauma-informed approach, safety and longer-term goals were explored together. It became clear that staying locally placed, P was at risk due to past experiences, including being sectioned and their son being abducted by an ex-partner. Through strong multi-agency work with education, legal services, and the police, safeguarding improved, and sustained advocacy led to a successful challenge of a housing decision. Within four months, P relocated to safe accommodation closer to family, reducing risk and increasing emotional security. During the support period, P experienced fluctuating mental health, including a crisis early on that required urgent medical support. Advocacy ensured timely GP follow-ups and access to medication, helping to stabilise their wellbeing. P also accessed counselling, supporting them to begin processing trauma and to reduce feelings

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of guilt and self-blame. Over time, P grew more confident at recognising unhealthy relationship patterns and disengaging safely. Engagement increased, with P preparing to join group recovery work and taking positive steps toward independence, including learning to drive and planning to retake GCSEs with a long-term aim of training in midwifery. After nine months, P is more stable, confident, and able to plan for the future, reflecting the project's focus on safety, recovery, and empowerment.

Case Study:

Pregnancy And Maternity Specialism: Q's support has recently been ended, as Q expressed that she no longer felt she needed support in relation to Domestic Abuse, marking a significant and positive step in her journey. Throughout her support, she has demonstrated courage, determination and safety planning to rebuild her life and focus on her future with optimism. She is now focusing on her university music course, which has become an important and positive outlet for her whilst feeling safe and supported by the University. As part of her move towards safety, Q has recently moved home to a new area that is unknown to her ex-partner, while also being closer to her trusted support network. This has contributed to her increased sense of security and stability and a mark of being able to 'move on with her life'. Q continues to receive strong and consistent support from her Children's school, which has played a valuable role in maintaining a sense of routine and intervention for her family. She told me she is feeling more optimistic about her future, with a growing sense of safety and confidence as she moves forward with her life. Q shared how grateful she was for the support she received.

The Key Change

Overview: The Key Change project is funded by The Masonic Charitable Foundation, which supports girls aged 11-18 in a school setting who are experiencing, witnessing, or at high risk of abusive relationships. This includes both intimate partner abuse and domestic abuse within the family home. The course focuses on achieving three outcomes to help girls better identify and respond to abuse, improve their mental well-being, and build wider support networks. In addition to core topics, we have also covered areas identified by the girls themselves, such as managing emotions and self-harm.

Girls supported: 117

Group sessions: 60

Light touch support: 13

Highlights: Over the past year, we delivered 60 group sessions focused on our core themes of healthy and unhealthy relationships and wellbeing. A key development has been our increased emphasis on co-production, ensuring that sessions are shaped by the voices and needs of the girls we support. We have also partnered with two new schools this year, expanding our reach to young people we haven't worked with before. As a result, we expanded our offer to include tailored sessions on topics identified by the girls, such as managing emotions, body image and eating disorders, self-harm awareness approach has strengthened engagement and ensured our support remains relevant, meaningful, and impactful.

Challenges: One ongoing challenge this year has been establishing partnerships with new schools. Despite reaching out to several schools, we have not always received responses, which has limited the pace at which we can expand our reach. We remain committed to continuing our outreach, building relationships, and ensuring that more young women and girls can access our project in the coming year.

Looking to the future: Over the next year, we will continue to deliver the project and support young women and girls, building on this year's successes. Our plans include expanding our reach to new schools and settings that we have not previously partnered with, allowing more young women and girls to benefit from our sessions. We will also focus on strengthening relationships with existing partner schools to ensure continuity

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and sustained engagement. Additionally, we will continue to adapt and develop session content to meet the needs of the young women and girls, ensuring that every young person receives relevant, supportive, and impactful sessions.

Case Study: Y, a 14-year-old, had recently moved schools and felt socially isolated. The school had reported that Y was experiencing loneliness and anxiety, with limited awareness of where to seek support for her mental health. The transition left her struggling to form connections and often unsure how to cope with anxiety or manage peer relationships. In group sessions, Y initially found it difficult to engage. She lacked confidence in social situations, frequently withdrew during discussions, and hesitated to participate in activities. Her anxiety sometimes made her reluctant to speak in front of the group. Facilitators provided tailored support, encouraging Y to contribute and pairing her with supportive peers during activities. They introduced her to services, including Childline, Kooth, and MindMate, and reinforced self-care, kindness, and the importance of seeking help. The group also focused on healthy and unhealthy relationship patterns. Through discussions and activities, Y learned to identify red flags, recognise controlling or harmful behaviours, and understand strategies to respond safely. This knowledge helped her feel more confident in recognising potentially unhealthy relationships and empowered her to make safer choices. By the end of the programme, Y said, "I've learned to be kind to myself and others and know who I can talk to when I'm struggling." She demonstrated increased confidence, emotional awareness, and the ability to identify and respond to unhealthy relationships.

The Key Change in SILCs (Specialist Inclusive Learning Centres)

Overview: Funded by Bartlett Group since October 2025, the Key Change in SILCs supports girls aged 11–18 in school settings who are experiencing, witnessing, or at high risk of abusive relationships. This includes both intimate partner abuse and domestic abuse within the family home. The project focuses on achieving three core outcomes: helping girls better identify and respond to abuse, improving their mental well-being, and building wider support networks. We worked with Specialist Inclusive Learning Centres (SILC) to tailor the mainstream Key Change course for girls with learning disabilities, consulting with teachers and adapting materials to meet each girl's learning age and needs.

Girls supported: 27

Group sessions: 25

Highlights: Our funding with the Baily Thomas Foundation ended in June 2025.

Following this, we were successful in securing funding from the Bartlett Group, which has enabled us to continue delivering our Key Change sessions to additional schools. This transition has ensured the continuity of the project. Building flexibility on the course has been particularly beneficial, as it allows us to adapt the content to meet the needs of different groups and individual learners. This has been especially important when working with a variety of specialist inclusive learning environments, where needs can vary significantly.

Challenges: One challenge this year has been ensuring the sessions meet the needs of a wide range of girls with different abilities and starting points. Different girls' needs varied significantly, sessions often needed to be adapted in the moment to keep everyone engaged and ensure the content is accessible for all participants. While the group is designed to be flexible, this can sometimes be challenging for facilitators, as it requires quick adjustments of pace and delivery to suit the group effectively.

Looking to the future: The focus for the coming year is to further develop and refine our session resources to make them even more adaptable and accessible for a wider range of learners. This includes improving how activities are tailored so that facilitators can more easily adjust content to different ability levels in real time. By strengthening

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the structure and clarity of materials, we aim to increase consistency across delivery and enhance the overall learning experience for participants.

Case Study: Z was referred to the group by their school to support their understanding of healthy and unhealthy relationships, as well as to further develop their emotional wellbeing and communication skills. Z initially found it difficult to engage in group discussions and often struggled to communicate thoughts and feelings, particularly around more personal or emotional topics such as anxiety and panic attacks.

Throughout the programme, Z took part in a range of structured and supportive sessions covering themes including healthy relationships, wellbeing, anxiety, and coping strategies for panic attacks. With consistent encouragement and a safe, familiar environment, Z gradually became more comfortable participating in activities and responding to prompts. Over time, there was a noticeable increase in Z's confidence and engagement, with Z beginning to contribute more to discussions and showing a stronger understanding of emotional regulation and positive relationships.

Pregnancy, parenting, and support for women whose children are being cared for by someone else

Breastfeeding Peer Support

Overview Breastfeeding Peer Support is a working with partnership with Health for All and funded by Leeds City Council Public Health, it provides one-to-one and group support and advice from specialist trained advisors to breastfeeding mums. It offers 11 weekly groups across the city in community settings as well as peer supporters on the maternity wards. It also provides a breast pump hire scheme for women who would be unable to access one without it.

Women supported (WHM element): 151

Children supported: 151

Group sessions: 54

1 to 1 sessions: 192

Light touch support: 286

Highlights: Many of our regular group spaces have been closed down in the last year, fortunately we have managed to secure other, free centres in appropriate areas for these groups to meet. In the time between having secure venues, we were able to deliver groups in cafes and other community settings, meaning we were able to continue offering support to parents who needed support and advice around breastfeeding.

Challenges: Many of the groups meet in Children's Centres in Leeds, a service provided by Leeds City Council. However in the past year, Leeds City Council has closed many centres to save money. This meant that the project lost 6 venues where groups were being delivered. This has meant trying to find new, free venues, that are in the same communities where we lost centres that were still central and accessible, for both mums and the volunteers.

Looking to the future: We are looking at delivering peer support training to women seeking asylum to train them up to be community supporters. Historically, women from this community have not accessed our groups, and we hope that by offering training to women in the community they will be able to offer informal support in their own communities. We hope to bridge a gap that exists between the women who access support and those who don't.

Case Study: F is a new mum who has physical disabilities. She is lonely and isolated, with very little support in this country as her mum and family live outside the UK. She was suffering from very low confidence in her ability to meet her baby's needs. Her partner works nights and so wasn't around very much. From coming to group, she really built up her self-confidence and made a couple of friends in the group. Within the group

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she had the chance to talk about mental health, her rights at work and other parenting issues as well as breastfeeding. She recently moved to another side of Leeds, near to where the support worker attends another breastfeeding group. After she moved, she attended the new group where referrals were made to other local mum and baby groups.

Creche

Overview: Creches are provided for the Breathe Free groups that Women's Health Matters runs; for four of the Leeds Domestic Violence groups that are run by Women's Health Matters; for Cuppa & Connect; Sister Songbirds; for family work in the school holidays; and for special events that are run by Women's Health Matters, such as the Celebration Events.

Children accessing creche: 73

Creche sessions: 97

Inside Out

Overview: Inside Out was a parenting course aimed to offer education and support to mums with Social Care involvement or who had children removed from their care. Over 13 weeks, the course looked what children need from their parents, and what might be the barriers for parents who have experienced trauma and abuse from understanding what those needs are and meeting them. The aim of the course was to help strengthen parenting skills and improve mental well-being through understanding of how trauma impacted on their parenting. Sessions include understanding the impact of domestic abuse on women and children, understanding child development, managing stress and anxiety, and developing boundaries. In this year, we saw the final two weeks of the last course funded by the Albert Gubay Charitable Foundation. The final course was funded by Women's Health Matters.

Women supported: 23

Children impacted: 45

Group sessions: 15

1 to 1 sessions: 35

Light touch support: 15

Highlights: We saw 10 women who reported an improvement in their relationship with Children's Social Work Services – this related to their confidence in their ability to communicate their needs to their Social Worker and feeling that they were being listened to because of this. Of these women, 8 saw an improvement or increase in the amount of family time they had with their children.

Challenges: Unfortunately, despite good outcomes for the women who attended the course, we were unable to secure funding for the project, and the final course was funded from WHM reserves.

Looking to the future: We continue to seek further funding for this work, as there is nothing else in Leeds which offers this type of support and learning to women who have experienced child removal or have involvement from Social Care.

Case Study: N is a mum in her 40s, who had two children removed from her care due to the impact on her mental health of domestic violence and abuse. Her children were placed in foster care. N was vulnerably housed and moving between hostels. When we first met N, she had recently been hospitalised after being badly beaten up by two men when engaging in sex work in exchange for drugs. N was very nervous about coming to group initially, and despite being referred for support, she felt very suspicious of staff. She completed the course and has also now attended two other groups at Women's Health Matters and is hoping to become a volunteer, offering support to other women. She is now securely housed and does not take drugs or use alcohol. She has good coping strategies and can keep herself well. Her contact with her children has increased, is no

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longer supervised and Children's Social Work Services are looking at the possibility of her children being able to go to her house to spend time with her there. They have also said that they are looking at offering her an assessment to begin the process of having her children back in her care.

Maternity & Neonatal Voices Partnership (MNVP)

Overview: The Maternity and Neonatal Voices Partnership is a partnership of third sector organisations, service users, and staff at Leeds Teaching Hospitals Trust. The Partnership Lead works collaboratively with all stakeholders to identify areas of concern in care within Maternity and Neonatal services, and to develop solutions. Critically, the partnership aims to improve the safety of services for all service users, prioritising the voices and experiences of those experiencing health inequities.

1 to 1 sessions: 90

MNVP parent representatives: 45

Highlights: A key highlight was working collaboratively with LTHT Health Equity midwives to plan and run a multi-disciplinary staff training event for seventy midwifery and neonatal staff members. The training day focused on key areas of health inequity, ensuring service user experiences were embedded throughout the day. The event provided space for third sector organisations to share the challenges their community members experience when navigating health services, and best practice for supporting them. The training received positive feedback, and amplified voices often not heard from.

Challenges: Throughout the past year, Leeds Maternity and Neonatal services have been the focus of national attention seeking to investigate concerns related to their outcomes, safety, and trauma informed care. This has been an anxious time for current service users, and the Maternity and Neonatal Voices Partnership has had to adapt to an environment which has been difficult for both staff members and service users.

Looking to the future: Throughout 2026/2027, the MNVP will seek to develop relationships with third sector and community organisations, amplifying the concerns and issues they are hearing from diverse communities across Leeds. Regular walk arounds of maternity and neonatal spaces will review their accessibility and safety, working collaboratively with staff and service users to find tangible solutions.

Case study 1: The MNVP runs a feedback forum with women with English as a second language. Women attend this space to provide feedback about Leeds maternity services, and to work with staff to identify solutions to making the service more accessible. One woman in the group is a trained medical practitioner in her home country but is unable to work in the equivalent role in the UK. Through joining the feedback forum, she has been able to attend hospital walk arounds, input on accessibility projects, meet with midwifery staff at LTHT, and connect with the LTHT volunteer team. She has been glad to have a space to share her expertise and ideas.

Case Study 2: K first contacted the MNVP in 2025, to share her experience of Leeds maternity services. Whilst she had seen many examples of positive care during her pregnancy, there were also some areas of concern she felt she had to flag. She spoke to the MNVP on the phone, and from there felt comfortable to come along to an MNVP focus group to share in more detail. Her relationship with the MNVP grew, and she came to two listening sessions held by the MNVP with the senior leadership of the Trust, advocating powerfully for changes that need to be made, whilst also celebrating the power of the positive care she had received. Since then, she has continued to advocate, inputting into several MNVP projects, and supporting on developing a Trust improvement action plan for 2026/27. She is keen to be more involved and will be going onto support the MNVP in a formal volunteer capacity at hospital walk arounds and engagement collection events.

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Pregnancy Choices Advocacy Service (PCAS)

Overview: This work is now funded by Women's Health Matters after the previous funding from the NHS came to an end. PCAS provides impartial one-to-one telephone support for women and pregnant people around their pregnancy choices – providing information on midwifery and termination options, offering support whether the decision is to continue with a pregnancy or access a termination. We provide advice and support around both emotional and practical issues. WHM decided to continue this project as there is no other service offering this kind of support, and we recognise the importance for women to be able to make safe, informed decisions around fertility and pregnancies.

Women supported: 6

Children impacted: 3

Rosebuds

Overview: Rosebuds is a weekly group offering peer support and education for women living apart from their children. Aiming to overcome the isolation and loneliness that comes after the removal of a child, the Wesleyan Foundation has provided funding for the past year. We look at issues such as healthy relationships, self-compassion, coping with change and building resilience alongside therapeutic craft sessions. The women can access the group for up to 6 months.

Referrals received: 52

Women supported: 36

Children impacted: 92

Group sessions: 44

1 to 1 sessions: 68

Light touch support: 42

Highlights: We have worked with other partner organisations in Leeds to widen women's knowledge and confidence in accessing support from other places. Over the past year we introduced women to: LS14 Trust, IT Confidence – Digital Support, Leeds Art Gallery, National Energy Action, Thackray Medical Museum, Salvation Army, Therapy in Nature, Leeds Sexual Health, St Vincent's and Smoking Cessation services.

Challenges: We always have a very long waiting list for this group, and we could deliver two groups a week with the number of women waiting for a place to become available. However, that isn't possible. We struggle to keep up with the demand for the group and the funding for it is coming to an end. It can take women a few weeks to be able to join us at group, due to the nature and levels of their trauma and anxiety, however we want to be able to offer support and understanding around the difficulties they face in being able to start group. The feedback we have from women is that this sensitivity and understanding of their situations really helps them build up trust and attend group. Working in a trauma informed way does mean that it can take women longer to attend group, but the outcomes for women once they do are really positive.

Looking to the future: Our secured funding is coming to an end in August 2026, and we are attempting to seek further funding for this important work. There is very little support available to women living apart from their children, and if this work ends, it would leave a huge gap in support for women which isn't being met elsewhere. Therefore, this programme will be funded from WHM core funds until the end of March 2027.

Case Study: X attended Rosebuds, having initially attended the Inside Out parenting group. She was extremely nervous about attending group, and her anxiety was high. X has recently been diagnosed as being autistic, and on top of her own abuse and trauma she experienced in her childhood together with the removal of her child from her care, she really struggles in social situations. When she first started, she had to get a taxi to

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group as she couldn't get on the bus, she also had to sit at the back of the group and found it hard to engage with the other women. However, she is now able to get buses not only to group, but around Leeds and has also referred to three other groups (mental health and wellbeing, healthy eating, and women's health) which she has attended and enjoyed. There has been such an improvement in her mental health and ability to emotionally regulate that Children's Social Work Services are now allowing her to have unsupervised contact with her child, with the aim of there being overnight contact soon. The improvement in not only how she feels about herself, but her relationship with the wider world has been incredible.

Specialist support for women seeking asylum and refugees

Rainbow Hearts (Leeds City Council Public Health funding)

Overview: Rainbow Hearts is a well-being and social group for women seeking asylum or those who have recently been granted refugee status. It is funded by Leeds City Council, with additional support from the Evan Cornish Foundation, Womble Bond Dickinson Foundation and the Austin and Hope Pilkington Trust. The group offers a variety of informative and social sessions focused on health and well-being, self-care, and the therapeutic arts. Women also have the opportunity to learn English through informal classes with our qualified ESOL volunteer. We aim to help women build support networks, engage in activities that improve their well-being, and become more confident and familiar with their new city.

Women supported: 103

Children impacted: 115

Group sessions: 95

1 to 1 sessions: 70

Light touch support: 36

Highlights: A key highlight has been the move to a new venue, which offers a more private and safe space for the women. The improved facilities have also allowed us to deliver a more varied programme of activities, including cooking and exercise sessions, giving the women more opportunities to develop skills and support their wellbeing in different ways. The group is also now being supported by a qualified ESOL volunteer who is delivering informal sessions tailored to what the women want help with. This flexible and responsive approach has helped the women improve their English in a way that feels relevant and accessible to them.

Challenges: This year has been particularly challenging for many of the women attending Rainbow Hearts. Ongoing hostility towards migrant communities has continued to impact their mental health and wellbeing, alongside an increase in negative Home Office decisions, which has left many feeling stressed and uncertain about their future. Changes and proposed reforms to asylum policies, including Indefinite Leave to Remain and Refugee Family Reunion, have added to this uncertainty, with some women describing feeling "trapped" in the system. Many are also living with the distress of being separated from their children, often in unsafe situations, and not knowing when they will be reunited. While the group remains a vital safe and welcoming space, the increase in support needs has at times been challenging to manage within a group setting.

Looking to the future: Looking ahead to 2026/2027, Rainbow Hearts will keep building on what we're already doing and will continue to offer a welcoming space for women seeking asylum in an increasingly hostile environment. 2026 is a special year, as it marks 15 years of Rainbow Hearts. We're planning a celebration later in the year, bringing together women past and present, along with key partners and stakeholders who have supported us along the way. At the same time, with current funding coming to

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an end in 2027, a key focus for us will be securing future funding so we can continue to provide this much-needed support going forward.

Case Study: U is 49 years old and originally from Iraq. She first came to Rainbow Hearts in January 2024, following dispersal to Leeds. She had no connections in the city and didn't speak any English. At first, U was very quiet in sessions, but being able to communicate in Arabic with our Project Worker helped her feel more comfortable in the group. She became a regular group member, getting involved in everything from trips to creative projects, including the "Found Cities, Lost Objects" photography project with Leeds Art Gallery. Several of her photos were displayed in the gallery, which gave her a sense of belonging. Over time, she built connections with other Kurdish-speaking women and developed a strong support network. She also made good progress with her English, going from not being able to read or speak at all to now being able to communicate at a basic level. As her confidence grew, U naturally began supporting others in the group, especially new women who were nervous or didn't speak English, using her Arabic and Kurdish language skills to help them feel welcome. After receiving her refugee status, she moved into a volunteer role with Rainbow Hearts, helping to set up sessions, welcome new members, and provide informal interpreting. This has given her a sense of purpose, and she feels proud to be giving something back to the group that supported her.

Rainbow Hearts (Migration Team funding)

Overview: At the beginning of 2024, we received funding from Leeds City Council's Migration Team to expand our support for women seeking asylum and newly granted refugees over an 18-month period. Building on the Rainbow Hearts project, we introduced a second weekly peer support group, creating additional space for women to socialise and take part in activities that support their well-being. Women had opportunities to practice their English, learn about local support services in Leeds, and take part in a monthly walking group. One-to-one support was also provided for those who had received refugee status and were navigating the transition, including applying for benefits or work and finding secure housing. We supported the women to feel more settled in Leeds by building their support networks and increasing their confidence and familiarity with the city.

Women supported: 65

Children impacted: 71

Highlights: Key highlights included a visit to Temple Newsam House for a guided tour, where the women learned about its history and culture. Another was an art walk at the University of Leeds, where we explored the campus, viewed sculptures, and did some sketching. We incorporated more external sessions to introduce the women to new places and expand the areas where they feel safe and welcome. This included travelling on public transport together to build confidence in going to new places, as well as learning how to plan routes using digital technology.

Challenges: A key challenge we faced was rising costs, particularly for bus fares and refreshments. In April 2025, bus fares increased from £5 to £6 for a Day Ticket, which had a significant impact on the project. We had to allocate more funds towards transportation, reducing the resources available for other activities and limiting the number of women we were able to support each week.

Looking to the future: The funding for this project ended in June 2025. Given the success and positive impact of the project, we sought additional funding to enable the group to continue. We were pleased to secure short-term funding from the Womble Bond Dickinson Foundation and the Austin and Hope Pilkington Trust, allowing delivery to continue. However, funding remains a challenge, and securing longer-term support is a goal for the coming year.

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Case Study: V is 35 years old and originally from Nigeria. She was referred to the group due to feelings of isolation and having no connections in Leeds. Separated from her two children, who remain in her home country, V had been experiencing significant mental health struggles. V quickly became a regular group member and built strong friendships with other women through shared culture and experiences. V was grateful for opportunities through Rainbow Hearts to attend trips and external sessions such as visits to Killingbeck Fire Station and Leeds University Art Gallery. These visits helped her feel more connected to Leeds and more confident exploring places she would not otherwise have visited alone. As her confidence grew, V also became a source of support to others, helping newer members feel included and welcome. Rainbow Hearts provided V with a safe space where she felt less isolated, more confident, and part of a supportive community.

Support for women with learning disabilities

Feel Good

Overview: Feel Good is a health and wellbeing programme for women with learning disabilities or autism in Leeds, funded by Leeds City Council. It provides a safe, supportive and accessible space for women to come together, learn new things, and talk about a range of health and wellbeing topics. The course covers topics such as healthy friendships and relationships, taking care of our bodies, being confident, and staying safe. We also invite speakers into the group to talk to the women about specific issues such as online safety, domestic abuse and cancer awareness.

Referrals received: 22

Women supported: 11

Group sessions: 30

1 to 1 sessions: 26

Light touch support: 66

Highlights: This year, alongside our regular sessions, we also co-designed sessions based on topics the women wanted to explore further, including domestic abuse, online safety (in partnership with Connect in the North), and managing worry. In addition, we introduced new approaches to better support the group, such as creating one-page profiles at the start of the course to understand each woman's needs, preferences, and triggers. We also implemented a signal card system, so that the women could communicate non-verbally whether they were feeling comfortable or needed a break, helping to create a safer and more inclusive environment.

Looking to the future: Looking ahead, we aim to continue strengthening the partnerships we have built with organisations supporting people with learning disabilities, while also exploring new ways of working together. This includes delivering sessions within partner organisations, making the course more accessible to women already attending their services. We will also continue to raise awareness of the group and ensure it reaches the right people.

Case Study: M is 45 and has cerebral palsy and a learning disability. She was referred to Feel Good by her supported housing provider after living with her mother, where she had limited opportunity to make her own decisions and understand her healthcare choices. At the start, M was nervous and needed support to feel safe, but she engaged consistently in sessions. We created a one-page profile with her to understand her needs and triggers, and introduced a red/green signal card system, which helped her communicate discomfort and participate safely. Through the course, M gained knowledge about women's health, including cervical and breast screenings, and learned about her healthcare rights, which increased her confidence in making decisions and accessing services. M also developed practical skills in setting boundaries and saying no, areas she

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had previously found challenging. Over time, M's confidence and self-advocacy grew, enabling her to manage her relationships better, make decisions, and feel more in control of her life. She benefited from a safe and supportive learning environment.

Support for women with complex needs, mental health, and wellbeing needs

Being You Leeds

Overview: Being You Leeds (BYL) is a wellbeing service funded by Leeds City Council Public Health which provides people aged 16+ with groups & activities for protective wellbeing. It also provides mental health training and anti-stigma awareness sessions for third sector volunteers and practitioners across Leeds. We work together with partners Touchstone, Hamara, Holbeck Together, LS14 Trust, Barca and Health for All. Women's Health Matters deliver Being You Leeds wellbeing groups in Leeds communities for women including Sister Songbirds singing group, Creative Journaling group, Time For Me Wellbeing Group, monthly Online Journaling Group and city-wide Women's Walking Group. 2025-2026 marks year 3 of this 5-year funded project.

Women supported (WHM element): 123

Group sessions: 128

1 to 1 sessions: 98

Light touch support: 11

Highlights: Many of our Online Journaling group members have accessed WHM Digital Support to borrow Chromebooks for accessing Zoom. This has been a great resource to sit alongside our online groups' offer and increase access. Many group members express that being able to access these groups from home and on evenings and weekends means that they can work their wellbeing time around family and work life. Our Women's Walking Group has enjoyed visits to local green spaces as well as further afield, including the Yorkshire Dales, Otley Chevin, Saltaire, and Harrogate, and our volunteers have supported these sessions to co-lead the walks and welcome new group members. Our new women's wellbeing group *Time for Me* was launched in March 2026 in partnership with LCC South Leeds Hubs. This group provides wellbeing workshops for women around different topics and creative experiences, and we have been working together with our volunteers to co-create and co-facilitate this programme.

Challenges: We acknowledge that there is a wide range of need of access for many women due to many life circumstances including domestic violence, mental health, location and child-care needs, and there are limits on the levels of support which we can offer - as our focus is on group work. This can mean that the one-to-one support which women require to initially access groups is limited, and so many women who experience isolation are unable to access our groups. We aim to engage the Being You Leeds befriending service as this is developed, to try to offer active support for women to initially engage in our service.

Looking to the future:

We will continue to offer our diverse range of women's groups across many Leeds locations and will focus on reaching women who find access to groups challenging, through community engagement and partnership working. We have connected with Opera North, Healing with Plants, Leeds University, Leeds Art Gallery, and Hunslet Library & Hub, and will create programmes of sessions and events collaboratively to offer a wide range of wellness experiences and learn through co-facilitation as a service. We will also be supporting volunteers to access Small Sparks funding to create new groups and will continue to work together with our volunteers to co-design or groups and sessions.

Case Study: C found out about Being You Leeds Groups from attending Inside Out Group – following the very difficult experience of her 2-year-old son being removed from her care. C is diagnosed with depression and anxiety and has experienced childhood abuse and domestic violence and had previously accessed minimal support from services. C was very anxious to begin with about attending groups and travelling to new

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places. After a few weeks, C then began to attend our Women's Make and Do group and Creative Journaling group on the guidance of her social worker. C is now a regular attendee and established member of our Being You Leeds groups. C expresses that she writes every day in her journal and says that writing has helped her to process her experiences of being apart from her son and other difficult life pressures. C shares that she also captures the joyful memories of contact time her son and the positive experiences that she has been experiencing in her groups in stories and poems, and that this has helped her to support her own wellbeing and to feel more hopeful. C has proudly shared some of her stories and poems for the Being You Leeds newsletter and regularly shares her journaling reflections and ideas with the group. C has also made new connections in her community by joining the Being You Leeds allotment group at Holbeck Together and has made new positive friendships in her local area.

Art Therapy

Overview: Art Therapy is provided by students on placement from Sheffield Hallam University who are studying for a Masters in Art Psychotherapy. Students are on placement for either 50 or 100 days and will spend 1-2 days per week at WHM. We provide weekly supervision to all students as well as writing reports based on their learning and supporting the students through their placement.

Women referred: 26

Women supported: 14

1 to 1 sessions: 55

Light touch support: 35

Highlights: WHM has successfully supported 5 students through their Art Therapy placements. Our current student is studying part-time, so is with WHM for 1 day a week until the end of 2026. She can provide 1-1 art therapy sessions to women and girls who are in service with WHM for up to 12 weeks.

Challenges: A challenge for Art Therapy is that there is no funding to support this work. Women accessing art therapy can be supported with transport by their existing WHM service if there is a budget, but this can often be a challenge if the project is not able to support. We also don't have creche costs within Art Therapy, meaning that if women with children want to access support, they need to find alternate childcare.

Looking to the future: We will continue to provide placement opportunities for students, with our current placement running until the end of 2026. We are in communication with Sheffield Hallam University about future placements and when they will start, as we recognise the value that having students on placement brings to WHM and the women we support.

Case Study: AA was referred to Art Therapy from LDVS, where she was attending the weekly peer support and education group. AA started accessing art therapy on a regular basis and was committed to the process. She had two young children whom she was struggling to manage, settling into childcare due to the trauma the family had experienced. AA was working with Social Care around getting appropriate support for her children and found that this was impacting her ability to commit to the Art Therapy process. With the Student art therapist, AA decided that she would pause her therapy and concentrate on getting her children settled in nursery. We were able to offer AA the opportunity to stay on the art therapy waiting list until the next student started, giving her some time and breathing space before recommencing the therapeutic process.

Art of Her

Overview: Art of Her, funded by The Pilgrim Trust, is an 8-week therapeutic creative wellbeing programme for young women aged 16-25. It offers a safe, trauma-informed space for creative and non-verbal expression, emotional exploration, and social

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connection. The group is facilitated by an HCPC-registered art psychotherapist, who provides therapeutic guidance whilst ensuring a clinically grounded and supportive environment. Each week follows a gently structured, tailored session that combines exploration of relevant themes through art-making, including identity, relationships, grounding, and healthy coping strategies. Sessions run for two hours and provide an ample time for participants to explore whatever they wish to bring on the day. The programme remains flexible and attuned to participants' needs, allowing them to engage at their own pace and in ways that feel safe and accessible.

Women referred: 70

Women supported: 28

Group sessions: 38

1 to 1 sessions: 23

Light touch support: 58

Highlights: Across all cohorts of women have reported improved mental health, self-esteem and emotional resilience through the creative, trauma-informed structure of the sessions. The tailored 8-week programme has provided a meaningful outlet for processing emotions that are difficult to articulate verbally, helping participants build self-awareness and develop healthier coping strategies. Both the WHM and Leeds Beckett University cohorts have created supportive, non-judgmental environments where young women feel safe to share personal experiences and connect with peers with similar experiences. Engagement has grown significantly since launching the university-based group, and the new WHM art room has further enhanced accessibility, autonomy, and creative freedom. Across both groups, women have described the space as safe and containing, and many women have expressed that insights gained through the group have had a positive influence on their lives.

Challenges: An ongoing challenge is a struggle to reach attendee numbers at the WHM-based group. This has been due to the intimidating concept of 'group therapy' and the number of 'unknowns' (unfamiliar people, concept and location) increasing intimidation and creating a further barrier. Reframing the group as creative wellbeing improved engagement and running a cohort at Leeds Beckett University further increased accessibility by offering a familiar environment. Providing taxis for the first session reduced practical barriers and, once the initial hurdle of the first session was overcome, participants found it easier to return consistently.

Looking to the future: Both upcoming groups have already reached strong recruitment numbers, and the project lead will continue proactively contacting eligible women and staying on top of referrals to ensure this remains consistent. A strong relationship has been built with Leeds Beckett University, and there are plans to expand delivery by running an additional group at the Headingley campus that would be open to the wider public, increasing reach and accessibility. Ongoing participant feedback continues to shape the programme, with the project lead committed to adapting sessions in response to women's needs and preferences, to ensure delivery remains responsive, relevant and grounded in the experiences of the young women.

Case Study: B was initially very anxious when attending Art of Her, and it took time for her to feel comfortable enough to speak. Gradually, through listening to others share their experiences, she began opening up about long standing struggles around her identity, expression and body image. She has always felt most comfortable with masculine leaning expression, but this also brought shame, self-resentment and a sense of being "wrong" for not fitting stereotypical ideas of femininity. B shared that this tension has affected her confidence, her relationship with her body, and her romantic relationships, often leaving her feeling undesirable or at fault when relationships broke down. With the group we explored how culture, media, childhood bullying and past abuse may impact one's sense of self and contribute to feelings of self-blame and rejection. The session about transforming mistakes was a key turning point for B. The

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session asks the participants to begin with an intentional mistake (a tear, smear, spill etc.) then work with the mistake to transform it. For B, the initial 'mistake' symbolised her perceived flaws, specifically her masculine leaning expression and struggles with her feminine body parts that led to shame and self-hatred. The process of transforming the mark became a metaphor for accepting and embracing these parts of herself instead of rejecting them. Towards the end of group, B recognised that past rejection did not mean she needed to change who she was, and that the discomfort of others was not her responsibility. B reflected that hearing others share their experiences helped her feel safe enough to open up, and that the creative processes gave her a tactile route to self-understanding. By the end of the programme, she described a growing focus on self-acceptance, a stronger relationship with herself, and a reduced concern with external judgement.

Family Canvas

Overview: Family Canvas is a project aimed at providing dyadic therapeutic interventions to mothers and their children by a licensed Art Psychotherapist. The project is funded by the D'Oyly Carte Charitable Trust; and has been ongoing for the past 2 years. Through Art Therapy the project aims to increase communication and emotional understanding within families, offering them a safe space to express themselves. Women and their children can explore themes such as family, memories, and hopes and the project helps to build bonds between women and their children through encouraging sharing, turn-taking, mutual reflection and boundary setting.

Challenges: With the approval of the funder, the project was put on hold in 2025/26 due to staffing challenges. 30 referrals were still received and put on a waiting list. The project restarted in April 2026.

Support across Women's Health Matters and beyond

Digital Support Databank

Overview: As a registered National Databank hub, WHM provides free mobile data, calls and texts to women who are struggling to afford a monthly phone contract. We distribute SIM cards to women across our services to help them stay connected to essential support, health appointments, and their families. This project ensures that financial hardship does not result in total digital isolation.

Women supported: 44

Highlights: The main highlight of this scheme is the ability to provide women with a basic necessity that many people take for granted. Being able to provide a SIM card and immediate connectivity is incredibly impactful. The scheme itself is very straightforward to access and manage, which makes the distribution process quick and efficient. This low barrier approach means we can get women online almost instantly, which is often vital for those in crisis.

Challenges: Our main challenge is in the limitations on how many SIMs a single person can receive over time. While the scheme allows us to provide up to two years of data per woman, many of the women we support, particularly those seeking asylum, are in the system for much longer. This creates a significant gap in support, as their need for data doesn't end when the two-year limit is reached. Finding ways to address these long-term digital needs remains a difficult hurdle within the current framework of the scheme.

Looking to the future: We will continue our role as a Databank hub to ensure a steady supply of data for our service users.

Case Study: Rather than a single case study, the impact of the National Databank is seen in the way it allows women to maintain their daily lives. Providing a SIM card enables women to stay in constant contact with their support services, their children's schools, and their family and friends. For women who are often isolated or navigating

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complex systems, this data is a lifeline that ensures they can respond to school requests, attend appointments, and keep their personal support networks active without worrying about the cost.

Digital Support & Inclusion / DigitALL Women

Overview: During 2026/26, WHM were able to provide continuous digital support across the year through two successful funding opportunities. We began the year with a project funded by 100% Digital Leeds, focusing on drop-in sessions and one-to-one support tailored to the needs of women attending. When this ended in September, we were fortunate to secure additional government funding from the Digital Inclusion Innovation Fund from The Department for Science, Innovation and Technology that allowed us to scale up our delivery. This project, DigitALL Women, allowed us to deliver a more structured course, covering everything from basic computer settings to essential online safety and daily skills like using health apps and applying for jobs. We also facilitated digital safety sessions in our existing groups and continued to offer specialised one-to-one support for those with specific concerns.

Referrals received: 133

Women supported: 133

Group sessions: 49

1 to 1 sessions: 28

Women supported through digital lending library: 48

Highlights: A key highlight was being able to provide a safe, non-judgmental space where women felt comfortable asking the questions they often felt were "too silly" to ask elsewhere. By removing the stigma around digital illiteracy, we helped women gain confidence and control over tools that many people take for granted. The most impactful part of our work was our one-to-one sessions focused on safety. For women who were overwhelmed by the fear that they were being digitally tracked, having a worker validate their concerns, rather than dismissing them, was life-changing for them. Being able to find and remove any harmful software in a safe way provided many with a level of security and emotional relief that went beyond basic IT support.

Challenges: The primary challenge was the intensive five-month delivery window for the second phase of the project. The short turnaround meant we had to hit high targets quickly, which left little capacity for the outreach needed to maintain high numbers for the final cohort. We also found that short-term funding models can be difficult for this type of work; digital skills take time to embed, and many women expressed a need for longer-term support so they could practice their new skills at a steadier pace without feeling rushed.

Looking to the future: Our goal is to move away from short-term funding and find a more sustainable way to offer consistent digital support. We want to create a space where women can continue to build their confidence and practice their skills long-term. Additionally, we plan to make digital safety a standard part of all our DVA group offers, as the demand for securing personal devices remains a growing need for the women we support.

Case Study: L attended a one-to-one session, convinced her ex-partner was tracking her through her phone. She had raised these concerns with family, friends and other professionals but had been repeatedly told that she was being "paranoid". This lack of belief had left her feeling isolated and doubting her own instincts. During the sessions, we sat down and "audited" her device together, discovering that her ex had linked their devices and was using this connection to monitor her activity. We were able to successfully and securely remove these links and secure her device. L was moved to tears when she realised she was right all along. While the technical support had been

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vital, the most important part of the session was being listened to and believed, which helped restore her confidence.

Jangala

Overview: Through our funding with 100% Digital Leeds, we were connected to an organisation called Jangala, who provide dedicated Wi-Fi access to women who have experience domestic abuse or seeking asylum. We were issued with 37 "Get Boxes" (portable routers) which we distributed to women. Of these 37, 35 were issued to women seeking asylum and 2 to women experiencing domestic violence. Each device was enabled with 12 months of data through the National Data bank, ensuring women had stable, long-term internet access.

Referrals received: 37

Women supported: 37

1 to 1 sessions: 35

Highlights: The biggest highlight was being able to provide a vital service that most people take for granted, but which remains out of reach for many women we support. For women seeking asylum, traditional Wi-Fi contracts are often impossible due to cost and contract commitments, especially when accounting for being moved between accommodations with very little notice. The Jangala "Get Boxes" were a perfect solution, allowing women to be connected to the internet, and being able to unplug the device and take it with them if they were moved, maintaining their link to an essential service and support networks with minimal disruption.

Challenges: Our main challenge was a significant reduction in the number of devices available. We initially expected 75 boxes, but due to high supply and demand, this was reduced to 37. This forced us to make difficult decisions on who received the boxes, particularly given the high number of women seeking asylum we support. Additionally, as this was a one-off initiative, we are finding it difficult to find a comparable alternative for new women currently entering our service who have the same need for connectivity.

Looking to the future: Our goal for the coming year is to secure further connectivity devices for women in need of Wi-Fi access at home.

Case Study: EE is currently navigating the asylum system and is the mother of school-aged children. Prior to receiving support through this project, she lacked a stable home internet connection, as the cost and long-term commitment required for a private broadband contract were not feasible on her limited budget. This created a practical barrier for her children, who required Wi-Fi to complete their schoolwork, and for EE, who needed to access online services and manage appointments. Through our Jangala partnership, EE was issued a "Get Box" pre-loaded with 12 months of data from the National Databank. This provided her household with immediate, reliable internet access without the need for a financial contract. As a result of this, her children can now easily get online for their education without EE having to worry about the cost of additional mobile data or the strain of managing limited connectivity on a tight budget.

Legal Drop In

Overview: Legal Drop-In provides women accessing WHM with the opportunity to receive free, confidential legal advice from Ramsden's Solicitors. This session takes place once a month and offers a supportive space for women to explore their legal options and better understand their rights. Women can access advice on a range of issues, including children's matters such as private law orders, contact arrangements, prohibited steps, PLO, and care proceedings, as well as Special Guardianship Orders, divorce, and financial matters. Support is also available around protective injunctions, including Non-Molestation and Occupation Orders, as well as Criminal Injuries Compensation Authority (CICA) claims.

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Women supported at Legal Drop-In: 15

Highlights: One highlight from the past year has been the continued delivery of the Legal Drop-In, which has provided women accessing the service with regular opportunities to receive free, confidential legal advice from Ramsden's Solicitors. This monthly session has been well used and highly valued, supporting women to better understand their rights and options across a range of areas. Legal Drop-In has helped women feel more informed, supported, and empowered to make decisions about their next steps.

Challenges: One challenge has been that some women are unable to access advice through the Legal Drop-In due to conflicts of interest where the solicitor's firm is already representing the other party. This can sometimes limit immediate access to legal advice through the session. However, Ramsden's Solicitors always provide details of alternative solicitor firms that women can be referred to, ensuring they remain supported in accessing appropriate legal advice.

Looking to the future: Looking to the future, the Legal Drop-In aims to continue providing accessible, specialist legal advice for women accessing the service through Ramsden's Solicitors. The focus will be on maintaining a safe and supportive space where women can explore their legal rights and options across key areas such as child matters, financial issues, divorce, protective injunctions, and compensation claims. The service also aims to build on the positive impact already achieved by continuing to ensure women feel informed, supported, and confident in understanding their legal options. This includes maintaining a welcoming and accessible environment where women can ask questions, explore next steps, and receive clear, practical guidance to support their decision-making.

Case Study: FF was referred by Breathe Free to the Legal Drop-In following her recent separation from an abusive relationship. She sought support from Ramsden's Solicitors to better understand her rights and available legal options regarding separation, child arrangements, and protective measures. FF presented as seeking clear, practical information to help her feel more informed and supported. FF was able to explore her legal rights in a safe and supportive environment and receive guidance on potential next steps, including protective orders and family law processes. The advice provided helped FF gain greater clarity and confidence in understanding her legal position following the end of the relationship.

WHM Drop In – Cuppa & Connect

Cuppa & Connect is a welcoming drop-in space for women held on Fridays, open to those currently accessing WHM services, those who have previously engaged with WHM, as well as women who have never accessed WHM services but would like to find out more about the groups and projects we offer. It provides a relaxed environment for a hot drink, a chat, and informal activities. These sessions offer a safe, supportive, and friendly space where women can meet new people, build connections, and learn more about available support.

Women supported: 41

Drop-in sessions: 37

Highlights: The highlight of this year has been welcoming new women to WHM through Cuppa & Connect, many of whom had not previously accessed any WHM services. Through attending the sessions, women have been able to learn more about the range of support, groups, and services available at WHM in a relaxed and informal setting. This has helped to raise awareness of the wider offer and encouraged new engagement with services.

Challenges: A challenge for this year has been maintaining consistent engagement within Cuppa & Connect while continuing to welcome new women into the group. As a

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drop-in service, attendance can vary each week, making it more difficult to build continuity and long-term connections among women. However, the group has continued to provide a valued, welcoming space, and efforts have been made to encourage regular attendance and strengthen engagement over time.

Looking to the future: Looking ahead to the next year, we are looking forward to continuing to develop Cuppa & Connect as a welcoming drop-in space for women. We aim to build on current engagement by attracting new women, strengthening connections between women, and further increasing awareness of WHM services. We also hope to continue offering a variety of relaxed activities that support wellbeing, reduce isolation, and create opportunities for women to feel confident, supported, and connected within their community.

Case Study: H started attending Cuppa & Connect with a friend who was already accessing services at WHM. H had not accessed WHM services before but expressed that she was looking for a relaxed social group to help reduce feelings of isolation and to meet new people in a welcoming environment. From her first sessions, H engaged positively with the space and felt comfortable joining in with others. H has particularly enjoyed the craft activities offered within the sessions, which have helped her to relax and feel more at ease in a social setting. Over time, H has begun to build confidence in meeting and talking with other women and has valued the opportunity to connect in a safe, supportive, and friendly environment.

WHM Emergency Fund, Household Support Fund, and Product Bank

Overview: The WHM Emergency Fund is a vital resource provided through our core funding, designed to offer immediate financial support to women in crisis. The fund acts as a safety net for urgent, essential costs that other services cannot cover. This includes smaller, everyday necessities like phone top-ups and energy bills, as well as larger, life-changing expenses such as purchasing white foods or securing transport for women fleeing domestic abuse. The primary goal is to provide a compassionate and rapid response when a woman's safety or stability is at risk.

In addition, we secured funding from Leeds City Council's Household Support Fund to provide food vouchers, energy costs, and a product bank of non-perishable food, clothing, footwear, toiletries, sanitary products, and nappies. This Fund provides direct support to women accessing our groups and services by helping with the cost of food, energy, and other essential items. Through targeted distribution, we ensure that women facing financial hardship receive practical support to help ease immediate pressures, aiming to improve financial stability and well-being.

The Product Bank was available to all women who access any of our services and provides a selection of beauty products, toiletries, clothing, shoes, occasional gifts, homeware, and toys. It was primarily funded through generous donations from our women, members of the public, and supporting organisations such as The Beauty Bank. Women accessed the Product Bank while attending sessions at our premises, and for those engaging with services elsewhere, selected items are bought along by members of staff to ensure access remains as broad as possible.

89% of women supported by WHM have accessed the product bank, Household Support Fund, or accessed emergency financial support from WHM.

Highlights: This year, the emergency fund has been instrumental in addressing the direct physical and safety needs of women. Key highlights from the past 12 months include providing household items and clothing for women fleeing domestic abuse and purchasing a mattress for a woman and her daughter to ensure they had a safe place to sleep. We have also covered unique but essential costs, such as repairing a car to maintain a woman's independence, and providing immediate financial support to a

Women's Health Matters

Trustees' annual report for the year ended 31 March 2026

woman following an attack. Those interventions provide more than just money; they offer a sense of security and a way for women to regain control after a traumatic event.

Challenges: Emergency funds are issued immediately following a brief discussion with a senior manager; therefore, we avoid the administrative delays that can often leave women in crisis for longer. We maintain a highly flexible approach with no fixed restrictions on the amount allocated per person, assessing every need on a case-by-case basis. To date, we have been able to support every request received, ensuring that no woman is turned away when she is most in need. The challenge remains that this funding only comes from core reserves and Household Support Funding has now ended.

Looking to the future: Our priority is to maintain this flexible and responsive approach. We recognise that the lack of a formal application or referral process is exactly what makes this fund so successful, and we have no plans to introduce any additional administration tasks. Our focus will remain on ensuring that WHM can continue to step in and provide immediate support, keeping the criteria open and accessible so that we can respond to the unpredictable nature of crisis situations.

Case Study: CC was in an abusive relationship where her partner had intentionally broken her glasses. This made it difficult for her to manage her day-to-day life and keep up with essential tasks, which added additional unnecessary stress to an already difficult situation. Because she did not have independent access to the money needed to replace them, she was left having to manage the practical impact of this on her own. Through the Emergency Fund, we gave her the money to get a new pair of glasses. As a result, she was able to get back to her normal routine and tasks without the constant struggle of not being able to see properly.

WHM Student Placements

Overview: WHM works in collaboration with Sheffield Hallam University and Leeds Beckett University to offer placements to students who are studying Art Therapy and Social Work. We provide work-based placements for students up to 100 days, offering both full time and part time opportunities.

Student Placements: 6

Highlights: A highlight has been seeing students integrate into WHM and become part of the team. Through our art therapy placements, we can offer women accessing our services the opportunity to receive free art therapy for up to 12 sessions. This offers women the chance to receive support that they may otherwise be unable to afford, or that they have been waiting for long periods of time to access through NHS waiting lists. We recognise the value that having students on placement brings to WHM as they offer support to women, including helping to break barriers for future support through social care.

Challenges: A challenge with student placements can be the time needed to recruit, induct and support a student through their placement. This takes time and dedication from all the team, but we see the value that the students bring to WHM and the women we support.

Looking to the future: Looking to the future, we are keen to build on our placements and are looking to support Occupational Therapy students in a placement over the summer of 2026. We are also continuing to build on the service students receive during their placement, from improving the recruitment and induction process to making sure supervision remains meaningful and supports their learning.

Case Study: HH started on placement with WHM in January as a part-time art therapy student. As a part-time student, HH is only available for placement 1 day per week. HH arranged with the placement manager to attend WHM on a Wednesday, as initially this felt that it would be the most useful day for enabling HH to get to know WHM and the team through attending peer support, safeguarding reflective practice and team

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Trustees' annual report for the year ended 31 March 2026

meetings. However, as HH's placement progressed, they found that this was limiting the number of women HH could meet with. HH and the Placement Manager discussed options and looked at moving placement days, however, due to HH's university and family commitments this would not work. It was then agreed that HH would better utilise Wednesday afternoon's by offering women one-to-one appointments then rather than attending WHM meetings. This has meant that HH can offer a wider number of appointments and ensures that all course requirements can be met. It has meant that one-to-one supervision between HH and the Placement Manager has been difficult to fit in, but through a determination to find a way to make it work HH is able to fulfil her placement better.

WHM Volunteering

Overview: WHM offers volunteer opportunities to women at board level, through organisational wide corporate support, and through supporting in groups and projects that we run.

Total number of volunteers: 102

Breakdown of volunteers across WHM:

Trustees: 14

Art of Her: 1

Being You Leeds: 7

Breastfeeding Peer Support: 12

Breathe Free: 13

LDVS Domestic Abuse Education and Support Groups: 2

MNVP parent representatives: 45

Rainbow Hearts: 3

WHM wide volunteers: 5

Highlights: Women's Health Matters has worked with 102 volunteers over the year. This includes trustees, volunteers supporting in groups, MNVP parent representatives, and other volunteers recruited to support WHM holistically. Women who have been recruited to support in WHM projects and groups have shown commitment and dedication to their roles. They have all attended training with WHM on DVA and are committed to improving their knowledge and skills to better support women in group.

Challenges: A challenge with volunteers has been having the time to build a robust, centralised volunteer programme that works long-term.

Looking to the future: We are working to build a better and more formal volunteering programme. We would like to have more volunteers supporting at WHM long-term, whether in groups or providing office and admin support. Having the time for the coming year to put in to improving our volunteer programme should hopefully mean that we can build a strong system that supports volunteers at all stages of the process.

Case Study: JJ approached the Projects Manager independently to enquire about volunteering with WHM. JJ had previously attended Breathe Free and had then progressed onto becoming a Co-Facilitator, supporting the delivery of the group. After this ended, JJ wanted to remain involved with WHM and to utilise the skills learnt during their time as a Co-Facilitator. The Projects Manager met with JJ and discussed potential volunteering opportunities; JJ was keen to work on the new Art of Her project as they felt it reflected their skillset along with being able to support their future career goal. After attending an interview and completing training and an induction, JJ began volunteering in the Art of Her project. JJ supports the Project Lead with setting up the group space, making drinks for women, helping new women feel welcome and joining in as appropriate with the group activities. JJ has been dedicated to their volunteering role and has attended Art of Her twice a week since February to support the running of the project.

Women's Health Matters

Trustees' annual report for the year ended 31 March 2026

WHM External training and workshops for professionals

Overview: WHM offers training and workshops for professionals to increase their understanding of topics that impact many women everyday but are still often considered 'taboo', such as domestic abuse and child removal.

This year we offered: [Survivors' Voices: Domestic Abuse Awareness Training: Understanding the Impact of Child Removal on Women: A Compassionate Approach](#)

We also delivered women's wellbeing workplace workshops such as [Menopause Training Session](#)

Attendees: 92

Training sessions: 8

Experts by experience co-facilitators: 2

Highlights: *Understanding the Impact Child Removal for Women: A Compassionate Approach* – the course has been delivered multiple times this year to a total of 82 delegates, ranging from frontline professionals to staff in women's prisons, to student social workers studying at university. The course is being trialled as online modules; it's currently in its pilot phase, and feedback will continue to shape the course. Once the pilot is over, the course will be professionally filmed, and then it will be ready to be sold to professionals and universities. This training has been carefully co-produced alongside women with lived experience. It is unique, informative, and impactful.

Challenges: The *Understanding Domestic Abuse: Survivors' Voices* course was delivered once this year to 10 delegates. Two other dates had to be cancelled due to a lack of sales for the course. There has been a lack of tickets for the training sold over the last two years. Unlike the *Understanding the Impact of Child Removal for Women* training, there is other Domestic Violence Awareness training readily available.

Looking to the future: Throughout 2026/2027, we will continue to deliver in-person *Understanding the Impact of Child Removal for Women* training. Alongside finalising and filming the online modules, which we hope to sell to universities, as feedback has suggested that this model of training would be a good fit for universities.

Feedback:

- "I have a deeper understanding of what our clients tell us they are going through, which increases empathy and informs a trauma-informed approach to service delivery"
- "It's good to reinforce my knowledge that the more ACEs and protected characteristics a mother has, statistically, means an increased risk of child removal"
- "The handouts were really helpful and will be useful to me when I work with women to explain the removal process and the orders that go with it"
- "It has given me knowledge and made me aware of the effects of child removal and has challenged pre-conceived assumptions about the women who go through that."

Further information about any of our projects can be sought by requesting the specific reports for each programme.

Women's Health Matters

Trustees' annual report for the year ended 31 March 2026

Financial review

WHM continued to raise sufficient funds to continue its main areas of activity. The inflationary increases required to maintain salaries, overheads, and running costs continued not to be met in full by some funders. We continued our strategy to secure the long-term future of our work by diversifying and securing multi-year income.

Our total income for the year was £849,500 (£998,420 in 2024/25, £752,364 in 2023/24; £813,032 in 2022/23; £528,678 in 2021/22; £506,388 in 2020/21; £489,480 in 2019/20; £442,484 in 2018/19 and £373,453 in 2017/18).

Our total expenditure was £871,779 (£801,775 in 2024/26, £717,354 in 2023/24; £655,528 in 2022/23; £526,306 in 2021/22; £442,478 in 2020/21; £491,524 in 2019/20; £399,792 in 2018/19 and £393,477 in 2017/18).

Reserves policy

Our Reserves policy was reviewed and approved in November 2025 as below:

Women's Health Matters believes that for the Board of Trustees to act prudently they must maintain a reserve of funds principally to allow for any unexpected or unforeseen events that cannot be met from current funds.

Reserve funds will be built up from two sources:

- Any funds raised by the project through fundraising events or donations towards general running costs
- Any monies remaining from unrestricted funds when all commitments have been met

Reserves will be available for the following purposes:

- to cover a short-term unexpected cost
- to fund investment e.g. match funding, project seed-funding, additional staffing for required posts, additional income generating capacity and other professional expertise
- to maintain the organisation for a period of time and allow time to try to secure new funding in the event of a loss of, or a very significant proportion of, project funding
- allow for an orderly closure in the event of the organisation becoming insolvent

The Trustees have agreed to a target level of Reserves of:

- Between 3 and 6 months of running costs in total
- The reserves amount must be at least equal to the amount of required closing costs (designated reserves)

This policy and calculations are updated annually. Trustees monitor actual and forecast expenditure of reserves quarterly. Reserves are invested in a high interest account to maximise earnings. In making this policy the Trustees have taken into consideration the costings involved with a planned closure including staff redundancies.

At the end of the 2025-26 year, the level of reserves was £663,257 (2025: £685,536); £127,821 in restricted income funds (2025: £224,712); £145,693 in designated reserves (2025: £132,764); and £389,743 in free reserves (2025: £328,060).

This equates to 5.36 months of running costs (2025: 4.91 months).

Women's Health Matters

Trustees' annual report for the year ended 31 March 2026

Plans for the future

The Trustees' plan for the charity's services activity in 2026/2027 remains focused on supporting vulnerable and disadvantaged women, their families, and girls in Leeds and surrounding areas through our Domestic Violence work, women whose children are at risk of or have been taken into care, support for young women and girls who have experienced or are at risk of violence and abuse, women seeking asylum, women with learning disabilities, women experiencing maternity and parenting, and women with complex and wellbeing needs. Each service has an agreed set of targets with the specific funders. Effective trauma-informed service delivery with robust and fit for purpose policies and procedures and ensuring a robust and sustainable organisation remain integral to our plans. We continue to look for, develop, and sustain partnerships and collaborative working with other organisations.

In addition, we will:

- **Develop a new multi-year strategy for 2027 onwards**
- **Plan and start to deliver #40for40: 2027 marks 40 years of WHM and we plan on holding a series of 40 fundraising and awareness raising events to mark this achievement**
- **Endeavour to grow and develop our supporter base, including new individual donors and fundraisers, legacy giving, in-kind support from local businesses, and ensure strong working relationships with our existing partners to reach more women and girls**
- **Develop and deliver online training courses for professionals and students to share expertise and enhance this income generation provision**
- **Continue to assess and develop the diversity of our funding base and prioritise funding bids to sustain and continue the growth of our services for women whose children are at risk of or have been taken into care, those who have or are experiencing Domestic Violence and Abuse, those seeking asylum, care experienced women, and services for women and their children**
- **Continue the overhaul of our IT systems and processes to ensure these are cost effective and fit for purpose**
- **Develop and review our enhanced Referrals Manager role**
- **Carry out a staff morale survey and act on the findings**
- **Carry out an annual survey of service users**

Women's Health Matters

Trustees' annual report for the year ended 31 March 2026

Structure, governance, and management

Structure and governance

Originally founded in 1987, Women's Health Matters is a charitable company limited by guarantee, incorporated on 13 July 1993, and registered as a charity on 22 August 1995. The company was established under a memorandum of association that established the objects and powers of the charitable company and is governed under its articles of association.

The Articles of Association were reviewed and updated in October 2023.

Only Directors (trustees) are Members of the charity and guarantee to contribute an amount not exceeding £1 to the assets of the charity in the event of winding up. The total number of such guarantees as of 31 March 2026 was 14.

The Trustees are members of the charity, but this entitles them only to voting rights.

The Trustees have no beneficial interest in the charity.

All Trustees give their time voluntarily and receive no benefits from the charity. Any expenses reclaimed from the charity are set out in note 12 to the accounts.

Recruitment and appointment of Trustees

Board of Trustees members are recruited through advertising and via networking, interviewed independently by the Chair and Chief Executive and attend a Board meeting to observe and participate. The Board of Trustees approves any appointment. Role descriptions are available for trustees. New trustees complete all relevant paperwork before joining and go through an induction process. There is specific guidance when recruiting former service users and former staff as trustees.

Induction and training of Trustees

New Board of Trustees members complete a skills audit and receive a comprehensive induction session with the Chief Executive, as well as receiving good practice guidelines such as the Good Trustee Guide (NCVO) and additional Trustee guidance from the Charity Commission. Trustees are offered training in areas where there are gaps in skills e.g. governance and financial management. Trustees are also offered the support of a Buddy trustee.

Organisational direction

The Board of Trustees is responsible for the direction of the organisation and ensuring that effective plans supporting the achievement of the strategic direction are in place and being met. They review policy and are responsible for ensuring effective governance including the financial management of the organisation. The Chair of Trustees line manages the Chief Executive who has day-to-day operational management responsibility. The Board meets at least six times a year and aims to hold an Away Day for strategic planning and an Away Day with staff once a year. There is also a Finance committee attended by the Treasurer, the Chief Executive, Finance Manager, and at least one other trustee.

Operational management

Rachel Kelly was appointed as Chief Executive in 2019. The Finance Manager, Projects Manager, Safeguarding Lead, and the Operations and Office Manager, along with Project Leads, support the Chief Executive in the day-to-day management of the organisation.

Related parties and relationships with other organisations

WHM retains good relationships with its funders and delivers multiple services in partnership with other agencies, under partnership agreements and service protocols. There is a breadth of referrals into services from statutory and charitable sector agencies. We are a partner of the Women and Girls' Alliance Leeds, a partner in LDVS and LDVS Sanctuary Support, in Being You Leeds, and in the Breastfeeding Peer Support Service. In addition, we are active members of a range of Leeds strategic networks,

Women's Health Matters

Trustees' annual report for the year ended 31 March 2026

including Women Friendly Leeds, 3P Network, Leeds Domestic Abuse Voice and Accountability Forum, the Domestic Abuse & Violence Strategy Working Group, West Yorkshire Improving Women's Lives, EVAWG (Ending Violence Against Women and Girls), Third Sector Safeguarding Group, Forum Central Networks (Mental Health and Third Sector Health and Care Leaders), Leeds Migration Partnership, and Young Lives Leeds. We chair the Leeds Maternity and Neonatal Voices Partnership, and we are a member of NCVO. Our Chief Executive is a member of ACEVO and the national GSK Impact Awards Network and is the Chair of the Women and Girls' Alliance Leeds.

Remuneration policy for key management personnel

When appointing a Chief Executive of WHM, the Trustees benchmark the salary with other similar positions within Leeds and surrounding areas. All senior and junior staff are appointed in line with similar positions within Leeds. Key management personnel receive the same annual cost of living increment as applied across all the staff.

Risk management

WHM has a risk register and management plan, which is reviewed at every board meeting. Organisational risks are assessed. Risks are categorised such as People, Operational, Financial, Governance, etc. and a scale of probability and impact and steps taken to mitigate are agreed and monitored with a RAG rating.

Women's Health Matters

Trustees' annual report for the year ended 31 March 2026

Statement of responsibilities of the Trustees

The Trustees (who are also directors of Women's Health Matters for the purposes of company law) are responsible for preparing the trustees' annual report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the Trustees to prepare financial statements for each financial year, which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the Trustees are required to:

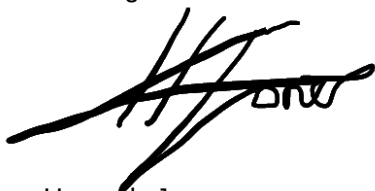
- Select suitable accounting policies and then apply them consistently
- Observe the methods and principles in the Charities SORP
- Make judgements and estimates that are reasonable and prudent
- State whether applicable UK Accounting Standards and statements of recommended practice have been followed, subject to any material departures disclosed and explained in the financial statements
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in operation

The Trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

This report has been prepared in accordance with the provisions applicable to companies subject to the small companies' regime of the Companies Act 2006.

The Trustees' annual report has been approved by the Trustees on 24 September 2026 and signed on their behalf by:

A handwritten signature in black ink, appearing to read 'H Jones', written over a horizontal line.

Hannah Jones
Chair of Trustees

Independent examiner's report
to the members of
Women's Health Matters

I report to the charity trustees on my examination of the accounts of the company for the year ended 31 March 2026 which are set out on pages 46 to 71.

Responsibilities and basis of report

As the charity trustees of the company (and also its directors for the purposes of company law) you are responsible for the preparation of the accounts in accordance with the requirements of the Companies Act 2006 ('the 2006 Act').

Having satisfied myself that the accounts of the company are not required to be audited under Part 16 of the 2006 Act and are eligible for independent examination, I report in respect of my examination of your company's accounts as carried out under section 145 of the Charities Act 2011 ('the 2011 Act'). In carrying out my examination I have followed the Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act.

Independent examiner's statement

Since the company's gross income exceeded £250,000 your examiner must be a member of a body listed in section 145 of the 2011 Act. I confirm that I am qualified to undertake the examination because I am a member of the Association of Chartered Certified Accountants, which is one of the listed bodies.

I have completed my examination. I confirm that no matters have come to my attention in connection with the examination giving me cause to believe that in any material respect:

1. accounting records were not kept in respect of the company as required by section 386 of the 2006 Act; or
2. the accounts do not accord with those records; or
3. the accounts do not comply with the accounting requirements of section 396 of the 2006 Act other than any requirement that the accounts give a 'true and fair view' which is not a matter considered as part of an independent examination; or
4. the accounts have not been prepared in accordance with the methods and principles of the Statement of Recommended Practice for accounting and reporting by charities applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102).

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the accounts to be reached.



Jennifer Daniel FCCA DChA
Slade & Cooper Limited
Beehive Mill, Jersey Street
Manchester, M4 6JG

Date: 02/10/2026

Women's Health Matters
Statement of Financial Activities
(including Income and Expenditure account)
for the year ended 31 March 2026

	Note	Unrestricted funds £	Restricted funds £	Total funds 2026 £	Total funds 2025 £
Income from:					
Donations and legacies	3	34,275	117,946	152,221	296,411
Charitable activities:	4	-	682,623	682,623	696,073
Other trading activities	5	7,801	-	7,801	3,902
Investments	6	6,855	-	6,855	2,034
Total income		48,931	800,569	849,500	998,420
Expenditure on:					
Raising funds	8	13,399	5,886	19,285	19,068
Charitable activities:	7	(39,080)	891,574	852,494	782,707
Total expenditure		(25,681)	897,460	871,779	801,775
Net income / (expenditure) for the year	10	74,612	(96,891)	(22,279)	196,645
Transfer between funds		-	-	-	-
Net movement in funds for the year		74,612	(96,891)	(22,279)	196,645
Reconciliation of funds					
Total funds brought forward		460,824	224,712	685,536	488,891
Total funds carried forward		535,436	127,821	663,257	685,536

The statement of financial activities includes all gains and losses recognised in the year.
All income and expenditure derive from continuing activities.

Women's Health Matters
Company number 2835637
Balance sheet as at 31 March 2026

	Note	£	2026	£	£	2025	£
Fixed assets							
Tangible assets	15			95,760			2,007
Total fixed assets				95,760			2,007
Current assets							
Debtors	16	61,772			14,495		
Cash at bank and in hand	17	610,559			762,992		
Total current assets		672,331			777,487		
Liabilities							
Creditors: amounts falling due in less than one year	18	(104,834)			(93,958)		
Net current assets				567,497			683,529
Total assets less current liabilities				663,257			685,536
Net assets				663,257			685,536
The funds of the charity:							
Restricted income funds	20			127,821			224,712
Unrestricted income funds	21			535,436			460,824
Total charity funds				663,257			685,536

For the year in question, the company was entitled to exemption from an audit under section 477 of the Companies Act 2006 relating to small companies.

Directors' responsibilities:

- The members have not required the company to obtain an audit of its accounts for the year in question in accordance with section 476 of the Companies Act 2006,
- The directors acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and the preparation of accounts.

These accounts are prepared in accordance with the special provisions of part 15 of the Companies Act 2006 relating to small companies and in accordance with FRS102 SORP, and constitute the annual accounts required by the Companies Act 2006 and are for circulation to members of the company.

The notes on pages 49 to 71 form part of these accounts.

Approved by the trustees on 24/9/2026 and signed on their behalf by:



Hannah Jones (Chair)



Amita Fearon (Treasurer)

Women's Health Matters
Statement of Cash Flows
for the year ending 31 March 2026

	Note	2026 £	2025 £
Cash provided by/ (used in) operating activities	23	(45,525)	266,607
<i>Cash flows from investing activities:</i>			
Dividends, interest, and rents from investments		6,855	2,034
Purchase of tangible fixed assets		(113,763)	(1,360)
Cash provided by/ (used in) investing activities		(106,908)	674
Increase/(decrease) in cash and cash equivalents in the year		(152,433)	267,281
Cash and cash equivalents at the beginning of the year		762,992	495,711
Cash and cash equivalents at the end of the year		610,559	762,992

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026

1 Accounting policies

The principal accounting policies adopted, judgments and key sources of estimation uncertainty in the preparation of the financial statements are as follows:

a Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102), second edition - October 2019 (Charities SORP (FRS 102)), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006 and UK Generally Accepted Accounting Practice.

Women's Health Matters meets the definition of a public benefit entity under FRS102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note.

b Preparation of the accounts on a going concern basis

The trustees consider that there are no material uncertainties about the charitable company's ability to continue as a going concern.

The trustees have made no key judgments which have a significant effect on the accounts.

The trustees do not consider that there are any sources of estimation uncertainty at the reporting date that have a significant risk of causing a material adjustment to the carrying amount of assets and liabilities within the next reporting period.

c Income

Income is recognised when the charity has entitlement to the funds, any performance conditions attached to the item(s) of income have been met, it is probable that the income will be received and the amount can be measured reliably.

Income from government and other grants, whether 'capital' grants or 'revenue' grants, is recognised when the charity has entitlement to the funds, any performance conditions attached to the grants have been met, it is probable that the income will be received and the amount can be measured reliably and is not deferred.

For legacies, entitlement is taken as the earlier of the date on which either: the charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the charity that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the charity has been notified of the executor's intention to make a distribution. Where legacies have been notified to the charity, or the charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is treated as a contingent asset and disclosed if material.

Income received in advance of a provision of a specified service is deferred until the criteria for income recognition are met.

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

d Donated services and facilities

Donated professional services and donated facilities are recognised as income when the charity has control over the item, any conditions associated with the donated item have been met, the receipt of economic benefit from the use by the charity of the item is probable and that economic benefit can be measured reliably. In accordance with the Charities SORP (FRS 102), general volunteer time is not recognised; refer to the trustees' annual report for more information about their contribution.

On receipt, donated professional services and donated facilities are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market; a corresponding amount is then recognised in expenditure in the period of receipt.

e Interest receivable

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charity; this is normally upon notification of the interest paid or payable by the Bank.

f Fund accounting

Unrestricted funds are available to spend on activities that further any purposes of the charity.

Designated funds are unrestricted funds of the charity which the trustees have decided at their discretion to set aside to use for a specific purpose.

Restricted funds are donations which the donor has specified are to be solely used for particular areas of the charity's work or for specific projects being undertaken by the charity.

g Expenditure and irrecoverable VAT

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be required and the amount of the obligation can be measured reliably. Expenditure is classified under the following activity headings:

- Costs of raising funds comprise the costs of external fundraisers.
- Expenditure on charitable activities includes the costs undertaken to further the purposes of the charity and their associated support costs.
- Other expenditure represents those items not falling into any other heading.

Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

h Allocation of support costs

Support costs are those functions that assist the work of the charity but do not directly undertake charitable activities. Support costs include back office costs, finance, personnel, payroll and governance costs which support the charity's programmes and activities. These costs have been allocated between cost of raising funds and expenditure on charitable activities. The bases on which support costs have been allocated are set out in note 9.

i Operating leases

Operating leases are leases in which the title to the assets, and the risks and rewards of ownership, remain with the lessor. Rental charges are charged on a straight line basis over the term of the lease.

j Tangible fixed assets

Individual fixed assets costing £500 or more are capitalised at cost and are depreciated over their estimated useful economic lives on a straight line basis as follows:

Furniture & equipment	4 years
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k Debtors

Trade and other debtors are recognised at the settlement amount due after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

l Cash at bank and in hand

Cash at bank and cash in hand includes cash and short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

m Creditors and provisions

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

n Financial instruments

The charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

o Pensions

Employees of the charity are entitled to join a defined contribution 'money purchase' scheme. The charity's contribution is restricted to the contributions disclosed in note 10. There were no outstanding contributions at the year end.

The money purchase plan is with The People's Pension managed by B&CE Holdings Ltd plc and the plan invests the contributions made by the employee and employer in an investment fund to build up over the term of the plan a pension fund which is then converted into a pension upon the employee's normal retirement year age when eligible for a state pension. The total expense ratio of the plan is 1% and this is deducted from the investment fund annually. The trust has no liability beyond making its contributions and paying across the deductions for the employee's contributions.

2 Legal status of the charity

The charity is a company limited by guarantee registered in England and Wales and has no share capital. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the charity. The registered office address is disclosed on page 1.

3 Income from donations and legacies

Current reporting period	Unrestricted £	Restricted £	Total 2026 £
Donations	15,507	-	15,507
Core funding			
The Brook Trust	-	5,000	5,000
Postcode Community Trust	15,000	-	15,000
The Henry Smith Charity	-	78,253	78,253
Garfield Weston Foundation	-	30,000	30,000
Sir George Martin Trust	-	4,043	4,043
Other grants < £5k	3,768	650	4,418
Total	34,275	117,946	152,221
Previous reporting period	Unrestricted £	Restricted £	Total 2025 £
Expendable endowment			
The Edward Gostling Fund	-	195,000	195,000
Donations	2,574	-	2,574
Core funding			
The Henry Smith Charity	-	65,037	65,037
Garfield Weston Foundation	-	30,000	30,000
Other grants < £5k	2,900	900	3,800
Total	5,474	290,937	296,411

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

4 Income from charitable activities

Current reporting period

	Unrestricted £	Restricted £	Total 2026 £
Women's Health Matters			
Other	-	-	-
Domestic Violence			
Bluebirds - Ministry of Justice via West Yorkshire Combined Authority	-	47,709	47,709
Breathe Free 2 - National Lottery Community Fund	-	106,711	106,711
Victim-Survivor Worker - The Mayors			
Safer Communities Fund via West Yorkshire Combined Authority - Proceeds of Crime Act	-	19,348	19,348
LDVS - Leeds City Council Public Health	-	20,850	20,850
LDVS Access - Leeds City Council Public Health		8,000	8,000
LDVS - New Burdens Funding	-	106,938	106,938
LDVS - Sanctuary Support - Pregnancy post	-	36,542	36,542
LDVS - Sanctuary Support - Disability post	-	36,154	36,154
Other projects			
Art of her - Pilgrim Trust	-	32,652	32,652
Being You Leeds - Touchstone	-	48,547	48,547
Breast Feeding Peer Support - Health for All	-	8,961	8,961
DigitAll Women - Digital Inclusion Innovation Fund - The Department for Science, Innovation & Technology	-	26,875	26,875
Family Canvas - The D'Oyly Carte Charitable Trust	-	6,000	6,000
Household Support Fund – Forum Central	-	9,050	9,050
Maternity Neonatal Voices Partnership - NHS West Yorkshire ICB	-	19,009	19,009
Maternity Neonatal Voices Partnership – NHS West Yorkshire ICB - WY&H Local Maternity & Neonatal System	-	26,179	26,179
Rainbow Hearts & Feel Good – Leeds City Council Public Health	-	61,576	61,576
Rainbow Hearts - Austin and Hope Pilkington Trust	-	1,000	1,000
Rainbow Hearts - Sports England Movement Fund	-	10,563	10,563
Rainbow Hearts - Womble Dickinson	-	5,000	5,000
Rosebuds – The Charles Plater Trust	-	5,000	5,000
Rosebuds – Wesleyan Foundation	-	10,000	10,000
The Key Change – Masonic Charitable Foundation	-	19,959	19,959
The Key Change – Bartlett Group - via Community Foundation for Leeds	-	10,000	10,000
Total	-	682,623	682,623

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

4 Income from charitable activities (continued)

Previous reporting period	Unrestricted £	Restricted £	Total 2025 £
Domestic Violence			
Bluebirds - Ministry of Justice via West Yorkshire Combined Authority	-	48,709	48,709
Breathe Free 2 - National Lottery Community Fund	-	100,248	100,248
LDVS - Leeds City Council Public Health	-	19,863	19,863
LDVS Access - Leeds City Council Public Health	-	8,000	8,000
LDVS - DHLUC Funding	-	106,938	106,938
LDVS - Sanctuary Support - Pregnancy post	-	39,798	39,798
LDVS - Sanctuary Support - Disability post	-	40,864	40,864
Women's Lives Leeds			
Women's Lives Leeds - Women Speak Group via LWA	-	13,192	13,192
Other projects			
Being You Leeds - Touchstone	-	41,891	41,891
Breast Feeding Peer Support - Health for All	-	8,961	8,961
Cuppa and Conversation - Jimbos	-	19,999	19,999
Digital Inclusion – 100% Digital Leeds	-	20,043	20,043
Family Canvas - The D'Oyle Carte Charitable Trust	-	6,000	6,000
Growing Together - Leeds Community Fund	-	1,611	1,611
Household Support – Forum Central	-	10,000	10,000
Inside Out – The Albert Gubay Charitable Foundation	-	22,500	22,500
Maternity Neonatal Voices Partnership - NHS West Yorkshire ICB	-	18,608	18,608
Maternity Neonatal Voices Partnership – NHS West Yorkshire ICB - WY&H Local Maternity & Neonatal System	-	4,960	4,960
Maternity Neonatal Voices Partnership – Leeds Teaching Hospital	-	11,646	11,646
Rainbow Hearts & Feel Good – Leeds City Council Public Health	-	60,400	60,400
Rainbow Hearts – Leeds City Council Migration Team	-	17,359	17,359
Rainbow Hearts – Evan Cornish Foundation	-	7,500	7,500
Rosebuds – The Charles Plater Trust	-	20,000	20,000
The Key Change – Masonic Charitable Foundation	-	19,959	19,959
The Key Change – The Baily Thomas Charitable Fund	-	10,000	10,000
Women's Centre Pilot via LWA/ W& GAL - UKSPF	-	17,024	17,024
	-	696,073	696,073
Total	-	696,073	696,073

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

5 Income from other trading activities

	2026 £	2025 £
Fees, Charges and other income	7,801	3,902
	7,801	3,902
	7,801	3,902

All income from other trading activities is unrestricted.

6 Investment income

Current reporting period

	Unrestricted £	Restricted £	2026 £
Income from bank deposits	6,855	-	6,855
	6,855	-	6,855
	6,855	-	6,855

Previous reporting period

	<i>Unrestricted £</i>	<i>Restricted £</i>	<i>2025 £</i>
<i>Income from bank deposits</i>	<i>2,034</i>	<i>-</i>	<i>2,034</i>
	<i>2,034</i>	<i>-</i>	<i>2,034</i>
	<i>2,034</i>	<i>-</i>	<i>2,034</i>

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

7 Analysis of expenditure on charitable activities

	Staff costs	Admin costs	Premises	Depreciation	Other project costs	Governance costs	Total 2026
	£	£	£	£	£	(see note 9) £	£
Core	160,179	(23,449)	44,461	2,716	(31,896)	2,555	154,566
Women's Health Matters	-	-	-	17,294	-	-	17,294
Domestic Violence	256,040	39,250	-		82,984	-	378,274
The Key Change	24,586	1,236	-		177	-	25,999
Other projects	181,665	26,224	-		68,472	-	276,361
Total	622,470	43,261	44,461	20,010	119,737	2,555	852,494
Restricted expenditure							891,574
Unrestricted expenditure							(39,080)
							852,494

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

7 Analysis of expenditure on charitable activities (continued)

Previous reporting period

	<i>Staff costs</i>	<i>Admin costs</i>	<i>Premises</i>	<i>Depreciation</i>	<i>Other project costs</i>	<i>Governance costs</i>	<i>Total</i>
	<i>£</i>	<i>£</i>	<i>£</i>	<i>£</i>	<i>£</i>	<i>(see note 9)</i>	<i>2025</i>
						<i>£</i>	<i>£</i>
<i>Core</i>	107,154	25,554	38,020	2,913	(99,453)	3,180	77,368
<i>Women's Health Matters</i>	-	-	-	-	-	-	-
<i>Domestic Violence</i>	241,513	129	-	-	121,564	-	363,206
<i>The Key Change</i>	25,633	-	-	-	2,127	-	27,760
<i>Women's Lives Leeds</i>	12,031	20	-	-	2,432	-	14,483
<i>Other projects</i>	212,633	75	-	-	87,182	-	299,890
Total	598,964	25,778	38,020	2,913	113,852	3,180	782,707
					<i>Restricted expenditure</i>		803,749
					<i>Unrestricted expenditure</i>		(21,042)
							782,707

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

8 Cost of raising funds

	2026 £	2025 £
Staff costs	-	-
Fundraiser's fees	19,285	19,068
	19,285	19,068
Restricted expenditure	5,886	-
Unrestricted expenditure	13,399	19,068
	19,285	19,068

9 Analysis of governance and support costs

Current reporting period	Basis of apportionment	Support £	Governance £	Total 2026 £
Independent examiner's fees	Governance	-	2,555	2,555
Board costs	Governance	-	-	-
		-	2,555	2,555
Previous reporting period	Basis of apportionment	Support £	Governance £	Total 2025 £
Independent examiner fees	Governance	-	3,180	3,180
Board costs	Governance	-	-	-
		-	3,180	3,180

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

10 Net income / (expenditure) for the year

This is stated after charging/(crediting):	2026	2025
	£	£
Depreciation	20,010	2,913
Independent examiner's fee - accountancy	2,376	2,160
Independent examiner's fee	924	840

11 Staff costs

Staff costs during the year were as follows:

	2026	2025
	£	£
Wages and salaries	529,595	511,630
Social security costs	54,053	41,258
Pension costs	25,149	25,110
Consultancy & HR fees	3,523	10,576
Recruitment & staff expenses	13,197	13,250
Volunteers' expenses and training	208	-
Holiday pay accrual	(3,255)	(2,860)
	622,470	598,964

No employees has employee benefits in excess of £60,000 (2025: Nil).

The average number of staff employed during the period was 19.4 (2025: 20.5).

The average full time equivalent number of staff employed during the period was 15.9 (2025: 16.8).

The key management personnel of the charity comprise the trustees and the Chief Executive Officer and the Finance and Office Manager. The total employee benefits of the key management personnel of the charity were £110,738 (2025: £102,052).

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

12 Trustee remuneration and expenses, and related party transactions

No (2025: Zero) trustees, were paid in the year (2025: £Nil).

No (2025:Zero) member of the management committee received travel and subsistence expenses during the year (2025:£Nil).

Aggregate donations from related parties were £Nil (2025: £Nil).

There are no donations from related parties which are outside the normal course of business and no restricted donations from related parties.

No trustee or other person related to the charity had any personal interest in any contract or transaction entered into by the charity, including guarantees, during the year (2025: Nil).

13 Government grants

The government grants recognised in the accounts were as follows:

	2026 £	2025 £
Leeds City Council	241,210	88,263
NHS West Yorkshire ICB	-	20,608
Ministry of Justice via West Yorkshire Combined Authority	47,709	48,709
Department for Science, Innovation and Technology	26,875	-
	315,794	157,580

There are no unfulfilled conditions and contingencies attaching to the grants.

14 Corporation tax

The charity is exempt from tax on income and gains falling within Chapter 3 of Part 11 of the Corporation Tax Act 2010 or Section 256 of the Taxation of Chargeable Gains Act 1992 to the extent that these are applied to its charitable objects. No tax charges have arisen in the charity.

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

15 Fixed assets: tangible assets

	Leasehold Improvements £	Furniture & equipment £	Total £
Cost			
At 1 April 2025	-	16,672	16,672
Additions	113,763	-	113,763
Disposals	-	-	-
At 31 March 2026	113,763	16,672	130,435
Depreciation			
At 1 April 2025	-	14,665	14,665
Charge for the year	18,961	1,049	20,010
Disposals	-	-	-
At 31 March 2026	18,961	15,714	34,675
Net book value			
At 31 March 2026	94,802	958	95,760
At 31 March 2025	-	2,007	2,007

16 Debtors

	2026 £	2025 £
Grants receivable	-	-
Trade debtors	18,286	160
Other debtors	16,718	5,910
Prepayments and accrued income	26,768	8,425
	61,772	14,495

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

17 Cash at bank and in hand

	2026 £	2025 £
Short term deposits	182,232	155,000
Cash at bank and on hand	428,327	607,992
	610,559	762,992

18 Creditors: amounts falling due within one year

	2026 £	2025 £
Trade creditors	16,148	5,498
Short term compensated absences (holiday pay)	3,255	2,861
Other creditors and accruals	7,231	11,605
Deferred income	64,262	62,138
Taxation and social security costs	13,938	11,856
	104,834	93,958

19 Deferred income

	2026 £	2025 £
Deferred grant brought forward	62,138	18,646
Grant received	64,262	62,138
Released to income from charitable activities	(62,138)	(18,646)
Deferred grant carried forward	64,262	62,138

Deferred income received in advance of the period to which it relates

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

20 Analysis of movements in restricted funds

Current reporting period	Balance at 1 April 2025 £	Income £	Expenditure £	Transfers £	Balance at 31 March 2026 £
Core					
The Henry Smith Charity	-	78,253	(72,420)	-	5,833
Garfield Weston Foundation	-	30,000	(30,000)	-	-
The Brook Trust	-	5,000	(5,000)	-	-
Sir George Martin Trust	-	4,043	(4,043)	-	-
Other	924	650	-	-	1,574
Women's Health Matters					
Small grants	-	-	-	-	-
Domestic Violence					
Bluebirds & Cuppa and Connect – Ministry of Justice via West Yorkshire Combined Authority	-	47,709	(47,709)	-	-
Breathe Free 2 - National Lottery Community Fund	2,840	106,711	(105,017)	-	4,534
Victim-Survivor Worker-The Mayors Safer Communities Fund via West Yorkshire Combined Authority	-	19,348	(19,348)	-	-
LDVS Access - Leeds City Council Public Health	-	28,850	(28,850)	-	-
LDVS - New Burdens Funding	-	106,938	(104,278)	-	2,660
LDVS - Sanctuary Support - Pregnancy post	-	36,542	(36,542)	-	-
LDVS - Sanctuary Support - Disability post	-	36,154	(36,154)	-	-
Other projects					
Art of her - Pilgrim Trust	-	32,652	(28,595)	-	4,057
Being You Leeds - Touchstone	-	48,547	(48,547)	-	-
Breast Feeding Peer Support - Health for All	-	8,961	(8,961)	-	-
DigitAll Women - Digital Inclusion Innovation Fund - The Department for Science, Innovation & Technology	-	26,875	(26,875)	-	-
Digital Inclusion -100% Digital Leeds	7,414	-	(7,414)	-	-
Family Canvas - The D'Oyly Carte Charitable Trust	-	6,000	(603)	-	5,397
Household Support Fund	-	9,050	(9,050)	-	-
Maternity Neonatal Voices Partnership – NHS West Yorkshire ICB	-	19,009	(19,009)	-	-

Analysis of movements in restricted funds for current reporting period continues on following page

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

20 Analysis of movements in restricted funds (continued)

Current reporting period (continued)

Maternity Neonatal Voices

Partnership – NHS West

Yorkshire ICB-

WY&H Local Maternity &

Neonatal System

	-	26,179	(26,179)	-
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Rainbow Hearts & Feel Good –

Leeds City Council Public Health

	61,576	(61,576)	-
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Rainbow Hearts & Feel Good –

Austin & Hope Pilkington Trust

-	1,000	(500)	500
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Rainbow Hearts – Leeds City

Council Migration Team

7,410	-	(7,410)	-
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Rainbow Hearts - Sports

England Movement fund

-	10,563	(10,563)	-
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Rainbow Hearts - Womble Bond

Dickinson

-	5,000	(4,440)	560
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Rosebuds – The Charles Plater

Trust

8,925	5,000	(13,925)	-
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Rosebuds - Wesleyan

Foundation

-	10,000	(4,690)	5,310
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The Key Change – Masonic

Charitable Foundation

-	19,959	(19,959)	-
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The Key Change – The Baily

Thomas Charitable Fund

2,199	-	(2,199)	-
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The Key Change - Bartlett Group

- via Community Foundation for

Leeds

-	10,000	(3,841)	6,159
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Expendable Endowment

The Edward Gostling Fund

195,000	-	(103,763)	91,237
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Total

224,712	800,569	(897,460)	-	127,821
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Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

20 Analysis of movements in restricted funds (continued)

Previous reporting period	Balance at 1 April 2024 £	Income £	Expenditure £	Transfers £	Balance at 31 March 2025 £
Core					
The Henry Smith Charity	-	65,037	(65,037)	-	-
Garfield Weston Foundation	-	30,000	(30,000)	-	-
The Brook Trust	5,000	-	(5,000)	-	-
Other	24	900	-	-	924
Domestic Violence					
Bluebirds - Ministry of Justice via West Yorkshire Combined Authority	-	48,709	(48,709)	-	-
Breathe Free 2 - National Lottery Community Fund	-	100,248	(97,408)	-	2,840
LDVS - Leeds City Council Public Health	-	19,863	(19,863)	-	-
LDVS Access - Leeds City Council Public Health	-	8,000	(8,000)	-	-
LDVS - DHLUC Funding	-	106,938	(106,938)	-	-
LDVS - Sanctuary Support - Disability post	-	40,864	(40,864)	-	-
LDVS - Sanctuary Support - Pregnancy post	-	39,798	(39,798)	-	-
Women's Lives Leeds					
Women Lives Leeds - Women Speak Group via LWA	1,291	13,192	(14,483)	-	-
Other projects					
Being You Leeds - Touchstone	-	41,891	(41,891)	-	-
Breastfeeding Peer Support via Health for All	-	8,961	(8,961)	-	-
Cuppa and Conversation - Jimbos	-	19,999	(19,999)	-	-
Digital Inclusion - High Speed Training	4,056	-	(4,056)	-	-
Digital Inclusion -100% Digital Leeds	-	20,043	(12,629)	-	7,414
Family Canvas - The D'Oyly Carte Charitable Trust	-	6,000	(6,000)	-	-

Analysis of movements in restricted funds for previous reporting period continues on following page

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

20 Analysis of movements in restricted funds (continued)

Previous reporting period (continued)

Growing Together - Leeds Community Fund	6,593	1,611	(8,204)	-	-
Household Support Fund		10,000	(10,000)	-	-
Inside Out – The Albert Gubay Charitable Foundation	(80)	22,500	(22,340)	(80)	-
Maternity Neonatal Voices Partnership – NHS West Yorkshire ICB	-	18,608	(18,608)	-	-
Maternity Neonatal Voices Partnership – NHS West Yorkshire ICB- WY&H Local Maternity & Neonatal System	-	4,960	(4,960)	-	-
Maternity Neonatal Voices Partnership – Leeds Teaching Hospital Trust	239	11,646	(11,885)	-	-
Rainbow Hearts & Feel Good – Leeds City Council Public Health	-	60,400	(60,400)	-	-
Rainbow Hearts – Leeds City Council Migration Team	12,179	17,359	(22,128)	-	7,410
Rainbow Hearts – Evan Cornish Foundation	-	7,500	(7,500)	-	-
Rosebuds - Duncan Norman Trust	500	-	(500)	-	-
Rosebuds – The Charles Plater Trust	11,729	20,000	(22,804)	-	8,925
The Key Change – Masonic Charitable Foundation	-	19,959	(19,959)	-	-
The Key Change – The Baily Thomas Charitable Fund	-	10,000	(7,801)	-	2,199
Women's Centre Pilot via LWA/ W& GAL - UKSPF	-	17,024	(17,024)	-	-
Expendable Endowment					
The Edward Gostling Fund	-	195,000	-	-	195,000
Total	41,531	987,010	(803,749)	(80)	224,712

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

20 Analysis of movements in restricted funds (continued)

Name of restricted fund	Description, nature and purposes of the fund
Core	This funds the administration and management of the charity as a whole.
Domestic Violence	
Bluebirds and Cuppa & Connect - Ministry of Justice via West Yorkshire	Bluebirds and Cuppa and Connect offers three groups (two online, and one in-person) and one to one support to aid in trauma recovery.
LDVS - Leeds City Council Public Health and New Burdens	Domestic Abuse Education and Support Groups - 5 in person groups across Leeds.
LDVS Sanctuary Support	The Sanctuary Support Scheme aims to provide ongoing support, safety planning of domestic abuse for recipients of sanctuary measures.
Breathe Free 2	Breathe Free is a 24-week course for women (those who identify as women, aged 16+) living in Leeds who have experienced domestic abuse and complex trauma.
Victim-Survivors Worker - Mayors Safer Communities Fund via West Yorkshire Combined	Domestic Violence Project worker supporting women service with emotional and practical support, through 1-1 and group work, including peer support.
Other projects	
Art of Her - The Pilgrim Trust	Therapeutic Art group for Young women aged 16-25, supporting mental health and emotional wellbeing.
Being You Leeds - Touchstone	Hosting of a Community Wellbeing Worker.
Breast Feeding Peer Support - Health for All	Breastfeeding peer support trains experienced mums to peer support through social media, face to face and by telephone. Also provides advice and support from specialist, trained advisors.
DigitALL Women - Digital Inclusion Fund, 100% Digital Leeds & Jangala	Supporting women who are accessing our services to use an extensive digital library and taught sessions to increase digital literacy and safety.
Family Canvas - The D'Oyly Carte Charitable Trust	Family canvas offers short-term trauma informed art therapy to women and their children.
Household Support Fund - Forum Central	Funding enabling WHM to financially support women affected by cost of living crisis engage in our services.
Maternity Neonatal Voices Partnership - NHS West Yorkshire ICB	A forum bringing together health professionals and women who access maternity services.
Rainbow Hearts	Weekly emotional support group for women seeking asylum.
Feel good - Leeds City Council Public Health	Weekly healthy relationships group for women with learning disabilities.
Rainbow Hearts - Sport England Movement Fund	Supports women seeking asylum and refugees in improving their fitness through Indian dance.
Rainbow Hearts - Leeds City Council Migration Team	Weekly emotional support group for women seeking asylum.
Rainbow Hearts - Austin and Hope Pilkington Trust	Provision of transport costs, enabling women to attend.
Rainbow Hearts - Womble Bond Dickinson	Funding towards Rainbow Hearts project worker salary costs.
Rosebuds - Wesleyan Foundation	Group work supporting women whose children are being looked after by someone else.
The Key Change - Masonic Charitable Foundation	Project to provide early intervention work around domestic violence and child sexual exploitation

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

20 Analysis of movements in restricted funds (continued)

The Key Change - The Bartlett Group Fund via Leeds Community Foundation	Project to provide early intervention work around domestic violence and child sexual exploitation for girls with learning disabilities.
Other projects	Donations to specified projects or groups.
Transfers	Transfers from unrestricted funds to cover overspends. Transfers out are in respect of support given to projects from unrestricted funds in previous periods.
Expendable Endowment	
The Edward Gostling Fund	

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

21 Analysis of movement in unrestricted funds

Current reporting period	Balance at 1 April 2025 £	Income £	Expenditure £	Transfers £	As at 31 March 2026 £
General fund	309,487	41,463	46,107	(10,756)	386,301
Training and Social Enterprise Development	18,573	7,468	(20,426)	(2,173)	3,442
Designated funds					
Redundancy and notice period liability	132,764	-	-	12,929	145,693
	460,824	48,931	25,681	-	535,436
Previous reporting period	Balance at 1 April 2024 £	Income £	Expenditure £	Transfers £	Balance at 31 March 2025 £
General fund	352,681	9,492	10,080	(62,766)	309,487
Training and Social Enterprise Development	2,173	1,918	(8,106)	22,588	18,573
Designated funds					
Redundancy and notice period liability	92,506	-	-	40,258	132,764
	447,360	11,410	1,974	80	460,824

Name of unrestricted fund	Description, nature and purposes of the fund
General fund	The free reserves after allowing for all designated funds.
Designated funds	Funds designated by the management committee for the support and development of existing work.
Training	This is a fund that ringfences net income from training in order that it can applied to this service.

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

22 Analysis of net assets between funds

Current reporting period	General fund £	Designated funds £	Restricted funds £	Total £
Tangible fixed assets	95,760	-	-	95,760
Net current assets/(liabilities)	290,541	149,135	127,821	567,497
Total	386,301	149,135	127,821	663,257
Previous reporting period	General fund £	Designated funds £	Restricted funds £	Total £
Tangible fixed assets	2,007	-	-	2,007
Net current assets/(liabilities)	307,480	151,337	224,712	683,529
Total	309,487	151,337	224,712	685,536

23 Reconciliation of net movement in funds to net cash flow from operating activities

	2026 £	2025 £
Net income / (expenditure) for the year	(22,279)	196,645
Adjustments for:		
Depreciation charge	20,010	2,913
Dividends, interest and rents from investments	(6,855)	(2,034)
Decrease/(increase) in debtors	(47,277)	19,940
Increase/(decrease) in creditors	10,876	49,143
Net cash provided by / (used in) operating activities	(45,525)	266,607

Women's Health Matters

Notes to the accounts for the year ended 31 March 2026 (continued)

24 Prior year Statement of Financial Activities (including Income and Expenditure account)

	Note	Unrestricted funds £	Restricted funds £	Total funds 2025 £	Total funds 2024 £
Income from:					
Donations and legacies		5,474	290,937	296,411	127,744
Charitable activities:		-	696,073	696,073	621,846
Other trading activities		3,902	-	3,902	2,311
Investments		2,034	-	2,034	463
Total income		11,410	987,010	998,420	752,364
Expenditure on:					
Raising funds		19,068	-	19,068	16,143
Charitable activities:		(21,042)	803,749	782,707	701,211
Total expenditure		(1,974)	803,749	801,775	717,354
Net income / (expenditure) for the year		13,384	183,261	196,645	35,010
Transfer between funds		80	(80)	-	-
Net movement in funds for the year		13,464	183,181	196,645	35,010
Reconciliation of funds					
Total funds brought forward		447,360	41,531	488,891	453,881
Total funds carried forward		460,824	224,712	685,536	488,891

The statement of financial activities includes all gains and losses recognised in the year.
All income and expenditure derive from continuing activities.