REGISTERED COMPANY NUMBER: 07466643 (England and Wales)

REGISTERED CHARITY NUMBER: 1139925

Action on Postpartum Psychosis
(a Company Limited by Guarantee)

Trustees' Report & Unaudited Financial Statements for the Year ended 31 December 2025

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Reference & Administrative Details

TRUSTEES	K A S Adlington (appointed 1.5.25) A Bauer G S Berrisford (resigned 11.12.25) C K Cho C Dolman (resigned 31.1.26) H Francis (appointed 8.10.25) I R Jones (resigned 18.12.25) (reappointed 21.5.25) A R Jones S R Joshi (appointed 1.5.25) T C Robinson
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REGISTERED OFFICE	International House 12 Constance Street London E16 2DQ
REGISTERED COMPANY NUMBER	07466643 (England and Wales)
REGISTERED CHARITY NUMBER	1139925
INDEPENDENT EXAMINER	TCA (Shrewsbury) LLP Third Floor 21 St Mary's Street Shrewsbury Shropshire SY1 1ED
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Reference & Administrative Details

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Trustees' Report

The trustees who are also directors of the charity for the purposes of the Companies Act 2006, present their report with the financial statements of the charity for the year ended 31 December 2025. The trustees have adopted the provisions of 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) (effective 1 January 2019).

Objectives and Activities

Postpartum Psychosis

Each year, one to two in every thousand new mums will develop hallucinations, delusions, mania, depression and unusual behaviour within days of childbirth, often out of the blue. When a mother experiences mania or psychosis following the birth of their baby it is known as postpartum psychosis (PP). The condition is frightening and can have a devastating impact, not only on the woman affected, but also on their partner and wider family. Ignorance about the illness is widespread and many women experience stigma, isolation, and a lifetime burden of guilt.

Suicide is the leading cause of death among new mothers. Prior to 2011 when our charity began, postpartum psychosis was responsible for almost half of (non-substance abuse) psychiatric deaths. During the last decade, PP-related maternal deaths have become rare, although maternal suicides as a whole have continued to increase. However, early evidence suggests that deaths due to PP could be on the increase in the post-pandemic period. For each of these statistics, a baby loses a mother, and a family sustains an unimaginable loss, when the fact is, postpartum psychosis is a treatable illness and full recovery is possible. A shortage of Mother and Baby Units (MBUs) means that mothers can be separated from their newborns when placed in General Adult Psychiatric Wards with the burden of care falling to other members of the family or social services - the separation compounding an already devastating situation.

Charitable Objects, Vision and Long-term Objectives

Under its Articles of Association, the charitable objects for which Action on Postpartum Psychosis (APP) is established are:

- to promote and protect the physical and mental health of women who have experienced postpartum psychosis and their families through the provision of support, education and practical advice;
- to advance the education of the public in general (and particularly amongst health professionals) on the subject of postpartum psychosis and to promote research for the public benefit in all aspects of that subject and to publish the useful results; and
- to advocate for perinatal mental health services for women and their families.

Our vision is for all women and families affected by postpartum psychosis to benefit from best-practice treatment and appropriate support through to full recovery. Our long-term objectives are:

- **Improving recovery outcomes** by: supporting women and families affected by postpartum psychosis to engage with others who've 'been there'; improving access to evidence-based information; signposting to appropriate support; training and informing health professionals; facilitating research into all aspects of PP; and increasing knowledge of postpartum psychosis in the general public.
- **Reducing isolation** by building a supportive, peer-led, lived experience community of women and families affected by postpartum psychosis online and in person across the UK.

- **Combating stigma and silence** by promoting greater awareness of postpartum psychosis in the general public, the media and at conferences and events.
- **Improving services and care for women and families** by offering specialist information, training on postpartum psychosis and campaigning to increase the number of Mother and Baby Unit beds available across the UK. Facilitating research into all aspects of postpartum psychosis and promoting the useful results of research.
- **Reducing the maternal suicide rate** by improving understanding of postpartum psychosis among the general public and health professionals; and improving access to specialist care, peer support and information.

APP works nationally in England, Wales, Scotland and Northern Ireland, although we also look for opportunities to influence care and understanding of PP globally.

Volunteers

APP works with and is supported by several types of volunteers: peer support volunteers, media and storytelling volunteers, regional reps and fundraising volunteers. Our volunteers are women with lived experience of postpartum psychosis or their partners and family members and are passionate about making a difference for women and families affected by PP. Our volunteers enable us to draw from a wider range of postpartum psychosis experiences in our work, rather than only those of our lived experience staff team. Our peer support volunteers provide one to one and group support for women and their families who have experienced and been affected by PP. Media and storytelling volunteers raise awareness by telling their stories in the regional and national press, on social media, websites, television and radio. Regional Reps give lived experience talks at events and training sessions, often alongside APP staff, helping APP to connect with health professionals as well as disseminating information and supporting patient involvement in developing NHS services in their area. Fundraising volunteers plan events and identify fundraising ideas and opportunities to help generate income to support APP's work. We are very grateful for the work of all our volunteers, who enable us to reach more people and achieve a greater impact in all areas of our work.

Objectives and Activities in 2025

APP is an innovative collaboration between women and families who have experienced postpartum psychosis, leading academic researchers and expert health professionals. Our main objectives and activities in 2025 are described below. Our charitable activities consisted of: providing specialist support and information to affected women and families; raising awareness of postpartum psychosis amongst the public and health professionals; campaigning for improved services; and conducting research to better understand the illness. These activities are undertaken to further our charitable purposes for the public benefit. We measure the success of our work through: surveying service users, volunteers and training participants (using an online survey and feedback forms); monitoring service user data; and asking individuals to write about their experience.

Supporting affected women and families

APP's Peer Support Service aims to create an active and engaged postpartum psychosis community, improve recovery outcomes for women and families, reduce social isolation, reduce the maternal suicide rate and decrease the long-term impact of the illness on family life.

Our Peer Support Service offers one-to-one support (via email, telephone, video call and face-to-face), café groups (face-to-face and online) and a community forum where those affected can go to ask questions, gain support and signposting. We employ Peer Support Coordinators with personal experience of postpartum psychosis to manage the service and carefully moderate to ensure that the service and forum are safe; the Coordinators are supported in turn by specialist health professionals and academic experts.

The Coordinators recruit, train and support Peer Support Volunteers and staff with experience of postpartum psychosis to provide empathy, practical information and hope for recovery. In 2025, we aimed to maintain and grow our national and regional peer support service by:

- Offering online, in person, video call and café group support to all who need it nationally and via our NHS projects.
- Developing our work in Greater London building stronger links with London MBUs, and growing our bereavement, partners, diverse community and LGBTQ+ support.
- Completing our bereavement web content and work with the British Board of Scholars and Imams on a PP guide, with staff and volunteer training in these areas, and beginning development of legal and rights-based web content.
- Continuing building projects that encourage long term contact with our community – strengthening café groups, volunteer engagement, community and wellbeing sessions.
- Maintaining high-quality service delivery and good functioning of our NHS partnership contracts.

We measure the success of our peer support work through the number of women and family members reached, through surveying service users and volunteers about the benefits and downsides of receiving or delivering support in this way, and by asking individuals to write about their experiences. Survey questions include whether service users feel more supported, less isolated, more informed, less negative about postpartum psychosis, more hopeful, and whether the peer support has aided users' recovery. We also survey peer support volunteers about the experience of training and volunteering.

Raising awareness amongst health professionals

In 2025, we aimed to reach more health professionals with training by:

- Continuing to offer online bookable one-day training and NHS commissioned in-person training days.
- Arranging a third annual free Alex Baish Memorial Webinar, building our database of health professionals.
- Continuing collaborations with the Institute of Health Visiting (iHV) and the Royal College of Psychiatrists (RCPscyh), GP bodies and antenatal educators delivering tailored training & lived experience talks.
- Continuing to train and support lived experience speakers and regional reps to give talks to services in their regions.
- Completing and marketing our first health professional training e-modules.
- Building relationships with all MBUs, communicating the expectation that all UK MBUs/perinatal teams should receive APP training once every three years and that new starters can join online training sessions freely in the interim.

Our workforce training courses are delivered by our world leading experts in Perinatal Psychiatry, APP staff members, and APP Experts by Experience. By utilising clinical experience, cutting-edge research, and the real experiences of affected women and families, the courses aim to up-skill the workforce, developing expertise and empathetic understanding. APP's Experts by Experience – trained volunteers and staff members with experience of postpartum psychosis - raise awareness in their local regions, by giving talks to health professionals at conferences and events, disseminating information, and sharing their personal experiences: describing their symptoms, experience of treatment and recovery, what worked well for them and what did not, and the impact on their relationship with their baby, family and friends.

We assess the success of this awareness-raising work through the number and range of professionals reached, session feedback and through questionnaire feedback on the one-day training. We ask whether the training: will change their practice; has increased their knowledge of postpartum psychosis and the risks; has increased their confidence and empathy in working with affected women and families; and whether it has made them feel better equipped to help women recover.

Raising awareness amongst the general public

In 2025, we aimed to continue to raise awareness in the general public to reduce stigma and misinformation and help newly affected women and families access our lifesaving information and support by:

- Building on our national profile, increasing diverse community storytelling and outreach,
- Developing media and communications for the main 'moments' across the year: Mothers' Day; Maternal Mental Health Awareness Week, Black Maternal Mental Health Week, World Mental Health Day, Suicide Awareness Week.
- Supporting APP's MBU campaign, developing storytellers sharing stories and data to campaign for beds in places where there are insufficient beds, sharing positive MBU stories to help the public understand their value.
- Working with diverse community storytellers to raise awareness of PP and our groups in Black and Asian communities, reducing fear of services; identifying more Black and Asian volunteers.
- Raising awareness of our peer support community, outreaching to those who need peer support and showcasing APP's café groups and London community building work.

We measure the success of this awareness raising work through the range and reach of media pieces about PP that we are involved in, and the number of followers and level of engagement on our social media channels and website.

Campaigning for improved services

Our goal is that all women and families in the UK have access to the services they need to get help and recover from PP. In 2025, we aimed to use our specialist expertise and lived experience voice to create change in systems, by:

Continuing APP's **MBU campaign**, with a particular focus on:

- maintaining pressure for an MBU for Northern Ireland, working with our consultant to maintain networks with other organisations, volunteers, journalists and Members of the Legislative Assembly.
- supporting calls for an MBU in northern Scotland.
- engaging with the Seren Lodge MBU build, supporting lived experience engagement and peer support, ensuring the needs of women in north Wales are met.
- continuing to highlight the benefits of MBUs, sharing positive MBU stories to help commissioners understand their value, and reaching GPs & other professionals with information.
- building good relationships with all MBUs, connecting and helping to amplify their social media.
- monitoring NHS England bed number commitment and responding to any risk of bed closures or decreased in care pathway quality.

Continuing APP's **antenatal education class campaign**:

- Analysing the YouGov survey to determine the impact of the campaign.
- Continuing to promote and distribute the antenatal toolkit.
- Repeating our social media midwife survey.
- Sharing the story of our campaign

Research

In 2025, we aimed to continue to facilitate research studies of importance to women and families affected by postpartum psychosis, as capacity and funding allowed, including:

- Supporting the RAPPORT study (**R**ealist evaluation of **A**ction on **P**ostpartum **P**sychosis' MBU peer supp**ORT**) which will be assessing APP-provided peer support at three Mother and Baby Units in England.
- Identifying funding opportunities to support APP's development as a research support facility.

Fundraising and strengthening our capacity

In 2025, we aimed to strengthen our capacity to fulfil our charitable objectives through improving our internal systems to support sustainable growth. We planned to:

- Grow our fundraising income via promoting challenges and lived experience group events, continuing to strengthen links with MBUs, and developing a new major donor engagement strategy.
- Increase staff capacity in the fundraising team with a new post and an existing staff member spending more time on community engagement.
- Continue to seek funds from a diversity of sources, including small and large grant applications, NHS funding to deliver peer support, research funding and developing and promoting APP's online training offer.
- Continue data collection and cyber security improvement work, planning integration of data and preparation for implementation of a CRM (customer relationship management database).
- Continue our development as gold standard lived experience, family friendly employer, reviewing pastoral support, pensions, sick pay, working practices, reviewing roles and titles and benchmarking pay.
- Continue staff development, with training in suicide prevention, grief and loss, safeguarding, GDPR, cyber security, peer support development.
- Review our organisational structure and options for improving efficiency and building management capacity.

Achievements and performance

In 2025, APP was chosen from more than 700 entries as one of the ten winners of the GSK IMPACT Award. These prestigious Awards are run in partnership with the Kings Fund and celebrate small and medium sized charities making a difference to health and wellbeing in the UK. The Awards "assess applicants across six key areas: innovation in tackling healthcare access and delivery; strong management and effective use of resources; collaborative partnership working and willingness to share learning; clear, measurable achievements and impact; a community-focused approach that engages users; and a clear focus on targeting those most in need"[1].

APP was selected for the GSK IMPACT Award for designing services which are shaped and delivered by families with lived experience, including our peer support service. The award judges were also particularly struck by APP's work to campaign for more Mother and Baby Units in NHS hospitals, improving care for women requiring inpatient treatment in a psychiatric hospital setting who would previously have been separated from their babies. In addition, APP was praised by the judges for reaching families at an earlier stage of illness, including pregnancy, and planning for those at high risk of developing postpartum psychosis or a relapse. Katie Pinnock, Director, UK Charitable Partnerships at GSK, said:

> *"APP's strength lies in its unique integration of lived experience into its work, ensuring that women's voices directly shape the charity's work and wider services.*
>
> *Through its powerful partnerships with the NHS, dedicated volunteers, and a focused approach to reaching those in greatest need, APP continues to lead the way in offering help and raising awareness among both the public and health professionals to make a lasting difference."*

The Award provided APP with national recognition and a quality mark to demonstrate the impact of our work. We received £40,000 in unrestricted funds, had a short professional film made about our work and received support with publicising the award (see raising awareness below). We participated

[1] https://www.gsk.com/en-gb/responsibility/charitable-investments/

in a three-day training and development programme with The King's Fund in May 2025 and have joined the GSK IMPACT Awards Network for future development support (see fundraising and strengthening our capacity below).

Peer Support to affected women and families

In 2025, APP continued its national peer support service, expanding our work with families from diverse communities, bereaved families, and in Greater London. In February 2025, we started a new five-year peer support and suicide prevention project, funded by City Bridge Foundation – London's biggest independent charity funder. The project enabled us to recruit a new sessional worker based in London and to hold more London café group sessions during the year – a total of 18 online or in person meet ups compared to 10 in 2024. The first meeting of our new online meet-up for Black women who have experienced psychosis in the perinatal period was held in November, led by sessional peer support worker, Rachel, who created a video publicising the new group[2]. Our Muslim women's group continued to meet regularly. We also continued our work in raising awareness of PP in Black and Asian communities (see raising awareness amongst the general public below) and trained three new Black and Asian peer support volunteers. A total of 30 dads and co-parents received support from our Partners Coordinator, Simon, and his volunteer team in 2025 (2024: 46). Partners' virtual café group meetings were held monthly and a total of 14 partners (2024: 17), at all stages of the PP journey, attended groups.

Overall, in 2025 APP supported 1,205 people (2024: 1045), including women, partners, grandparents, and family members. An average of 214 people used our online peer support forum every month (2024: 218), with the number of registered forum users increasing from 3,765 to 3,935. Coordinators and volunteers supported 585 people via email, telephone, video call, in person meet-ups and café groups (2024: 381). Our NHS embedded partnership projects supported 398 individuals (2024: 393). We continued to use social media to provide peer support ensuring that there was always a trained peer supporter monitoring our social media to offer support and signposting to anyone needing help who commented or messaged us.

Training and supporting volunteers

We recruited and trained 17 new peer supporters in 2025 (2024: 25), including three new volunteers to support our diverse communities outreach project. We have 149 active peer support volunteers (2024: 134) who provide support to women and families via our online forum, café group meet-ups, video call, one to one emails and telephone calls. In 2025, we continued to receive good feedback from new volunteers about the peer support training we provided – 100 percent rated the training as excellent and would recommend the training to others (2024: 100%). Feedback from this year's peer support training included:

> *"It was so lovely to be with like-minded people who knew exactly what you have been through. It felt a very safe and open environment with zero judgement."*

> *"I think it's fair to say I hadn't really thought about the fact that attending this session and becoming a volunteer would be part of my recovery process, but fairly immediately once in the room I recognised this was the case. The training session was so important to me and gave me so much more than I had appreciated going into the process. I heard some really inspiring stories - and that was with participants only briefly touching on their stories."*

Our ongoing volunteer support programme included: five peer supporter online sessions together with six creative and wellbeing activities that were open to our wider network. Creative sessions included: a writing workshop with APP Ambassador and author Laura Dockrill; and new Creative Connections sessions in which attendees share poetry and artwork. Twenty members of the APP network, all of whom had lived experience of PP, met with Katherine May, author of 'Wintering', for an online conversation about 'writing for wellbeing'.

[2] https://www.facebook.com/watch/?v=1350889513426170

Katherine shared many insights and tips - including her experience of writing about her personal experiences, getting published, things to consider before sharing our writing publicly, her own process and routines with writing, and writing for our own wellbeing.

We continued with regular volunteer newsletters for our peer supporters, storytellers and regional reps. We shared updates about the APP team, peer support project and wider work of the charity. Links to fundraising news and volunteering opportunities and information are shared, as well as upcoming events for volunteers and the wider network.

Web content

During 2025, we worked on a variety of information pages aimed at different groups of people impacted by PP. APP's new web pages for people bereaved by PP[3], which launched in spring 2025, were the culmination of work begun in 2024 under the Department for Health and Social Care suicide prevention grant. The pages were co-produced with academic experts, bereaved families and other third sector organisations.

> *"I was grateful to be invited to contribute to APP's bereavement support page on their website. I would certainly have benefited from it, and I hope it's able to support people like me in the future."* (Bereaved family member).

Following our pilot work to determine whether there is a need for more support and information on legal, rights-based and financial issues as a result of PP, we secured funding in 2025 to take the project forward. We are in the process of developing copy for our website to help disseminate information to our network. The draft pages will be reviewed by legal experts in 2026. We will also run tailored training for our volunteers in legal, rights-based and financial issues. Our continued work with the British Board of Scholars and Imams to develop a PP guide was delayed to 2026.

Peer support user survey

We conducted our annual peer support user survey between mid July and early October 2025, promoting it widely. Almost all respondents (97%) felt more supported since finding APP (2024: 99%); 89 percent felt less isolated (2024: 95%); 98 percent felt more informed about PP (2024: 96%), and 91 percent felt less negative about PP (2024: 91%). Meanwhile, 96 percent felt more hopeful about the future (2024: 93%), and 96 percent felt that APP had helped, or was helping, them to recover (2024: 96%). Nearly half of respondents (44%) said they might not be alive if they had not found APP's peer support services this year, a similar proportion to 2024 and 2023 (48 and 46% respectively) and continuing the marked increase on previous years (normally around 31-33%), demonstrating that APP's peer support continues to change and save lives. These examples of responses from the survey show the impact of peer support:

> *""APP has allowed me to accept that what happened to me doesn't have to be an isolating experience, and has given me a community of others who have experienced PP."*
>
> *"Thank you, 4 years on and I've finally become the mum I want to be, I feel the anxiety and intrusive thoughts and do it anyway cos it's normal and APP made me see that."*
>
> *"Having a support network of those affected by PP from all ages, backgrounds and circumstances is invaluable. The conversations we have are special, and the groups and support offered feel like safe spaces where we can express what we want without fear or judgement."*

"APP is amazing. They have literally changed my life. After having my daughter and suffering PP I thought I'd never be the same person again and I didn't enjoy being a mum. Now I am

[3] https://www.app-network.org/get-help/support-for-a-bereavement/

confident again and enjoy spending time with my daughter as our bond has grown. I enjoy meeting other people and talking to others who understand."

The 2025 peer support survey asked more detail about people's experiences and whether APP's peer support had helped them with these. The questions were:

- Did you experience, or do you currently experience, any of the following in relation to your episode(s) of PP? (anxiety, depression, further psychosis, ongoing bipolar, intrusive or suicidal thoughts)
- Has APP peer support helped with this?

We discovered that APP's peer support had been overwhelmingly helpful across a range of experiences during and/or following episodes of PP. The responses are in the table below:

Proportion of survey respondents who had experienced this symptom in relation to their PP episode. (2024 in brackets)		Proportion of respondents with the symptom who found APP peer support had helped with this symptom (2024 in brackets)
Anxiety	86% (85%)	95% (100%)
Depression	78% (73%)	94% (98%)
Further episode(s) of psychosis	33% (35%)	93% (88%)
Ongoing bipolar illness	31% (44%)	92% (85%)
Intrusive thoughts	68% (63%)	86% (86%)
Suicidal thoughts	50% (53%)	94% (94%)

Café groups and wellbeing activities.

Our ten monthly regional café groups continued to operate in Wales, Sussex & Hampshire, Yorkshire, Lancashire & South Cumbria, the North-East, Birmingham, Manchester, London, Scotland and Northern Ireland. Our UK-wide café group meeting continued to take place online and a group for neurodivergent mums met for the first time in October. We also ran a monthly dads and co-parents group, a quarterly grandparents' group, a quarterly Muslim women's group, a quarterly group those who manage an ongoing bipolar disorder or other mental health diagnosis after PP, and a peer supporters' group. We were delighted to hold our second in-person café group for Northern Ireland in Belfast in June, where our National Coordinator was joined by ten women and family members. In total, 215 people attended an APP café group in 2025, including those groups run as part of our NHS projects and our dads and co-parents group (2024: 201). We used social media to promote our online café groups, online volunteer meetups and community activities, for example our book club.

Peer support embedded in NHS perinatal mental health services

In 2025, we had three Peer Support Facilitators embedded in NHS perinatal mental health services: in the MBU in Chorley and Lancashire & South Cumbria community; in the Birmingham MBU and in the Birmingham & Solihull Community Perinatal Mental Health Teams. We renewed our partnership with the MBU in Manchester for a third year, working in the MBU in Manchester with a team of three sessional peer support workers. In addition, we had sessional peer support workers in the Birmingham & Solihull and Lancashire & South Cumbria partnership projects able to provide additional support to women and families. We successfully tendered for a contract with Cheshire and Wirral NHS Foundation Trust to provide peer support in the new Mother and Baby Unit in Chester, Seren Lodge. The contract started in December 2025 with a lead-in phase

involving awareness raising, volunteer training and staff recruitment, with the aim of peer support being in place on the unit by 1st April 2026.

Our NHS embedded peer supporters helped 398 individuals (2024: 393) in 2025, in the Chorley, Birmingham and Manchester MBUs and in the community in Birmingham, Solihull, Lancashire and South Cumbria. Café groups remain an integral part of our NHS partnership projects to enable recovering women to meet; 39 women and partners attended our NHS café groups in (2024: 53). The decrease in café group attendees compared to the prior year is mainly due to our Black Country project ending in late 2024. We have continued to offer a choice of online or in person groups on our Lancashire and South Cumbria project, which covers a large geographical area. All other NHS partnership projects café groups are held in person. We continued to support dads, co-parents and other family members of women experiencing PP. We referred women's partners for further support from our national dads and co-parents peer support team and women's (or their partner's) parents to our grandparent peer support group.

Our new partnership project with Cheshire and Wirral NHS Foundation Trust involves providing peer support in the Chester MBU, Seren Lodge, supporting the transition home and running a café group. It is closely linked to our work on Andersen Ward, the MBU in Manchester and our work at Ribblemere, the MBU in Chorley, Lancashire, providing joined-up peer support for women and families across a wide area of the northwest of England and North Wales. Some APP staff work across two or more of these three NHS partnership projects, and we find that women may be admitted to an MBU in the region outside their home area, before being transferred to another of the region's MBUs or returning home and receiving support from the café group in their home area.

We received excellent feedback on our peer support in NHS perinatal mental health services, both from NHS staff and people who had used our support. Some examples of replies to the question "What difference has APP's peer support made to you?" include:

> *"APP peer support has been absolutely amazing. Always been there when I most needed it. Natalie is great, has been really supportive. Couldn't have had better help."* (service user, Birmingham)
>
> *"A huge difference! I honestly feel that I wouldn't have learnt to accept what happened after having my son if it wasn't for APPs peer support."* (service user, Birmingham)
>
> *"Really supportive - nice to have someone to speak to without judgement... She helped me get through one of the hardest times of my life by always being there."* (service user, Birmingham)
>
> *"Huge - being in the Mother and Baby Unit is daunting. It's hard to imagine getting better and sometimes it's impossible to explain the feelings in my head. Eli sat and told me her story which had so many parallels to mine. It was like someone finally understood me and I could see that it was possible for me to get better."* (service user, Lancashire & South Cumbria)
>
> *"It provides a different level of support and hope when you speak with someone who has experienced first hand what you're going through"* (service user, Manchester)

Perinatal services across Lancashire & South Cumbria received a Care Quality Commission (CQC) Outstanding overall rating at the first unannounced inspection of the LSCFT services in 2025. Community and MBU services were outstanding for being responsive, caring and well-led. APP is proud to be part of the perinatal services, with inspectors recognising that NHS colleagues have embedded, maintained and continuously improved a culture of openness and collaboration - including our partnership project for peer

support and lived experience with the Trust.[4] The report noted the "good links with Action on Postpartum Psychosis" and described the peer support we provide.[5]

Case study

APP supports women and their families through their acute illness and beyond, as they: seek help, recover, rebuild relationships, come to terms with the illness, have concerns about parenting toddlers and teenagers, wish to campaign for change and improve the future for others, plan further pregnancies, navigate menopause, and become grandparents. Many women and family members who initially receive peer support go on to support others on our online forum and may choose to become volunteers themselves. This case study demonstrates the impact of APP's information and peer support over a number of years:

> *"I've wanted to be a mum for as long as I can remember. After meeting my wonderful husband, getting married and moving into our home we felt ready … After no success we were diagnosed with unexplained infertility and started IVF. Multiple rounds and miscarriages followed but finally we were elated to have a successful pregnancy in 2020.*
>
> *I've always suffered with my mental health since I was a teenager. Due to my job as a pharmacist I knew to reach out to the perinatal mental health team … We were aware of the risk of postnatal anxiety or depression ... We thought we were prepared. But nothing can prepare anyone for the car crash and hell that PP brings.*
>
> *My beautiful daughter was born in May 2021 after a long induction, … emergency section [and] massive postpartum haemorrhage.*
>
> *I fell through the cracks of my perinatal mental health plan. In hindsight my symptoms started soon after delivery but escalated dramatically once we got home.*
>
> *What followed was truly traumatic for me and my family. Mania. Psychosis. Police and ambulance teams removing me from my home. Sectioned in A&E and left untreated, confused, distraught, psychotic and alone in a general psychiatric hospital for 10 days. Separated from my baby and family and any comfort.*
>
> *Thankfully I was moved to an MBU where I was treated appropriately, however still quite manic! It was there on one of my nightly walks that I came across a flyer for APP. I found so much relief in reading through the website and insider guides. At last I had some answers to make sense of what I was experiencing. Hope that I could get better in time, and knowing others had recovered.*
>
> *I shared all the information with my family and perinatal team.*
>
> *My recovery at home was long and tortuous. My family did all they could to support me whilst caring for a newborn and adapting to new family life. The mania dissipated … but was followed by a long, dark, deep depression. I felt so alone. After 6 months I developed a panic disorder which was excruciating. It was at this point I finally reached out for APP peer support. I have an amazing family and group of friends who were so supportive. I was still under the care of the perinatal mental health team. But no one really understood what it was like.*

My first call with Ellie was very emotional. An epiphany. A wave of relief washed over me. I had found someone that truly understood. It still means so much to me. I had found my

[4] http://cqc.org.uk/provider/RW5/reports/AP14556/perinatal-services
[5] https://www.cqc.org.uk/provider/RW5/reports/AP14556/perinatal-services/well-led

people. The kindness, empathy and kinship I experienced was truly life saving. At that time I wasn't sure I could keep fighting.

APP saved my life.

I was fortunate to be linked with a peer support worker who I was able to call and email. I joined the virtual support groups and attended an in person group.

My recovery was slow … which was tough. I was able to improve slowly, eventually becoming close to the mum I wanted to be and return to work.

I had been diagnosed with Bipolar Disorder in the MBU and have continued to struggle with low mood episodes. Each time the APP family have been there via groups, the forum, emails and calls. This support has meant so much and helped me keep fighting.

Recently I have appreciated the new groups for those with further mental health difficulties and neurodivergence.

My journey (I hate that term) is ongoing. I'm under the care of the community mental health team intermittently. Different psychiatrists. Different psychologists. No continuity.

But APP peer support is always there.

I'm not sure how to express my continued thanks to Ellie, the team and all the women I've had the pleasure to meet.

Words don't seem enough. Without you all I'm really not sure my daughter would have a Mum. You've been there to pull me out of my darkest days. Knowing I have the APP family to lean on is the safety net I need; in 2021 to now and in future.

I would love to train as a peer support worker in the future or maybe provide pharmacy advice in some way. Something to give back for all the support I've received over the years.

Words I would use to describe APP peer support: Kindness, understanding, empathy, humour but most importantly, hope."

Raising awareness amongst health professionals

In 2025, we continued to provide training and Expert by Experience talks to health professionals across the UK. A total of 2,965 health professionals heard one of APP's lived experience speakers in 2025 (2024: 3,375), including one-day training courses. These were across 10 different online training events (2024: 13) and 25 onsite events (2024: 26). The professionals attending these events included midwives, health visitors, nursery nurse staff, antenatal educators and doulas, psychiatrists, mental health staff, perinatal mental health and MBU teams, psychologists, obstetrics and gynaecology doctors, pharmacists, social workers, occupational therapists, psychology, nursing and midwifery students, ambulance staff and paramedics, police force and mental health link workers. These events consisted of NHS training days, perinatal mental health study days, study days for GPs, Psychiatrists' study days, lectures to student midwives and mental health nurses, and conferences. Feedback included:

"The whole presentation was excellent, very clear, packed full of information about postpartum psychosis, recognition, care and support for women and families who might experience this. I think it will be incredibly helpful for student midwives and midwives. I really appreciate your courage and passion for sharing this information" (attendee)

APP volunteer Chris Wasley and Partner Peer Support Coordinator Simon O'Mara attended the Royal College of Midwives 2025 Conference, where Chris gave a presentation about his family's experience of postpartum

psychosis. In May, APP's National Training Coordinator, Dr. Sally Wilson, delivered a keynote speech at the Republic of Ireland Perinatal Mental Health Conference, held at University Maternity Hospital in Limerick, Ireland. Sally spoke about the importance of MBUs, PP health professional training and the vital peer support services APP provides to families affected by postpartum psychosis. Sally also gave a presentation to around 200 paramedics, ambulance staff and maternity staff at the Royal College of Paramedics Pre-Hospital Maternity and Newborn Conference in November 2025, covering what paramedics need to know about postpartum psychosis to help recognise, treat and care for those developing the condition.[6]

In addition to the lived experience talks, we delivered APP's full day workforce training to 15 staff. Participant feedback was overwhelmingly positive: 75% of the delegates thought the training was "excellent" and 25% rated it as "good" and all delegates (100%) would recommend to other health professionals working in the perinatal period. Qualitative feedback included that "*It was excellent; it could have carried on for more hours; was so insightful and informative*" (attendee).

On Wednesday 8th October we held the third annual Alex Baish memorial webinar 'Essential knowledge for preventing maternal suicide'. The free lunchtime event was run in partnership with the National Centre for Mental Health (NCMH) and General Practitioners Championing Perinatal Care (GPCPC). APP experts, women and families with lived experience and clinicians highlighted the early signs and symptoms of postpartum psychosis and discussed how frontline health professionals can work with perinatal mental health teams to help prevent maternal suicides. Presentations included lived experience from APP's Rich Baish, Shaheda Akhtar and Dr Sally Wilson. Pete's Dragon's Alison Jordan shared vital tips for suicide prevention including safety planning conversations and tools to use with women and their families.

We promoted the webinar widely, 2,638 health professionals, including General Practitioners (GPs) and other frontline professionals, registered to attend (2024: 3,891; 2023: 2,547) and there have been more than 1,400 views of the recording on YouTube since. Of the attendees, 90% percent rated the training as 'excellent' (2024: 94%; 2023: 92%); 10 percent rated it 'good' (2024: 6%; 2023: 8%) whilst 100 percent agreed they would change their practice because of the webinar (2024 & 2023:100%). Feedback was excellent and will be used to plan the 2026 webinar:

> *"Best training I have ever attended, very engaging, informative with useful tips I can actually use in work as a HV [health visitor]"*
>
> *"Thank you so much to all the presenters. Every GP should watch this"*
>
> *"Everyone's time is so precious, so I want to recognise the generosity of what has been given."*
>
> *"We should all be eternally grateful to those people who share their very personal experience to enable us to learn more about PP."*
>
> *"A massive thank you to everyone who shared their individual experiences, knowledge and love for others by wanting to seek better outcomes for maternal mental health. You are all incredible individuals and should be so proud. You are saving lives"*
>
> *"Thank you to everyone at APP for hosting a very informative webinar. Please keep doing the important work you do, you have created an incredible community. Thank you all again for your passion and dedication to maternal mental health."*

[6] https://collegeofparamedics.co.uk/COP/iCore/Events/Event_display.aspx?EventKey=231025

After carrying out due diligence, we selected an online platform to host APP's first two e-modules (supporting partners and supporting families from diverse communities). The structure and content of the first module (supporting partners) have been created and will be finalised in early 2026.

APP staff and volunteers continued to raise awareness of PP through articles in publications read by healthcare professionals. Volunteer Chris Wasley, having shared his family's experience of PP in MIDIRS Digest - the evidence based quarterly journal from the Royal College of Midwives (RCM) - in December 2024[7], shared a shorter version on their blog for Father's Day in June 2025[8]. Meanwhile, APP team member, Rich Baish, told his family's story in Healthcare Today, to raise awareness of PP and how it should be treated.[9]

Raising awareness amongst the general public

In 2025, our lived experience storytellers continued to help us drive engagement with thousands of people, to activate interest in APP's work, support services, and ensure women and families with PP are heard regionally and nationally. As in prior years, many of our media case studies and related social media during the year were in support of our campaigning work (see campaigning for improved services below, p. 17). We continued to raise awareness of PP and the vital need for an MBU in Northern Ireland with the support of a media consultant from Northern Ireland. We also continued our work to raise awareness of PP in Black and Asian communities through media, social media and events. For example, APP team member, Zebunisa interviewed team member Shaheda and volunteer Iqra on Ramadan Radio about their experiences of PP recovery journeys, and motherhood [10] Shaheda shared information about signs and symptoms of PP and how it should be treated as a medical emergency.

In 2025, we continued to plan social media and media work around awareness days and in support of our campaigns and regional projects, as well as reacting to events and media requests. APP's GSK Award was an opportunity to raise awareness of PP and APP: we shared the short film[11] that was produced widely and were able to secure several newspaper stories[12]. Similarly, APP's Chief Executive's induction into the Charity Hall of Fame provided another opportunity to raise awareness of PP[13]. We supported pieces in national, regional and health sector media, including print, online and podcasts, throughout the year.

In May, we ran a social media campaign for Maternal Mental Health Awareness Week (MMHAW); our content was shared by the Royal College of Midwives, the National Childbirth Trust (NCT), PANDAS Foundation, Mother and Baby Units, NHS Trusts, celebrity Denise Welch and many others. During the week we launched our bereavement web pages (see peer support above)[14] and gained 494 new followers across our social media channels. On World Maternal Mental Health Day, APP staff joined Sport in Mind, Postpartum Support International and other charities alongside Laura Kyrke-Smith MP at the Marching for Mothers event in Westminster to raise awareness of perinatal mental health.

[7] Wasley C. (2024) Heaven then hell: a partner's experience of postpartum psychosis, MIDIRS Midwifery Digest, vol 34, no 4, December 2024, pp 278-281. https://rcm.org.uk/wp-content/uploads/2025/05/AN2024-14154.pdf
[8] https://rcm.org.uk/blog/2025/06/fathers-day-2025-a-partners-perspective-on-postpartum-psychosis-2/
[9] https://healthcaretoday.com/article/postpartum-psychosis-what-it-is-what-was-missed-and-what-needs-to-be-done
[10] https://www.youtube.com/live/6QK0agaWiGY
[11] https://www.youtube.com/watch?v=UO525L60Ggg
[12] https://www.lancasterguardian.co.uk/health/national-charity-for-women-and-families-affected-by-postpartum-psychosis-working-in-lancashire-wins-top-uk-health-award-5030569
https://fundraising.co.uk/2025/03/13/health-and-wellbeing-charities-win-gsk-impact-awards-2025/
[13] https://www.charityhall.org/inductees/dr-jessica-heron
[14] https://www.app-network.org/get-help/support-for-a-bereavement/

We supported at least 23 national and regional media stories in 2025, not including some print only, podcasts or radio appearances (2024: 39) and shared these across our main social media channels. Our number of social media followers grew to 34,060 (2024: 28,761) with the most significant increases on our Instagram, Facebook and LinkedIn channels (2,436, 1,192 and 448 respectively). Overall social media reach, excluding X (formerly Twitter) was lower than the previous year at 516,212 (2024: 627,604), however our reach on LinkedIn increased by 7 percent compared to 2024. Newsletter engagement remained satisfactory with an average open rate of 35 percent (2024: 38%) for all messages sent; the open rate for successful deliveries rose from 57 percent in 2024 to 59 percent in 2025. The number of newsletter subscribers increased by 30%. Media highlights in 2025 included:

- Volunteer storyteller Sarah's feature in Glamour[15] magazine.
- APP Storyteller, Georgina, shared her story in Metro[16], to highlight the importance of seeking help and to give hope to others.
- APP colleagues and volunteers contributed a feature in The Independent calling for more awareness around the life-threatening risks of maternal mental illness[17].
- APP Chief Executive, Dr Jess Heron, and National Training Coordinator, Sally Wilson, joined former MP Theo Clarke on her birth trauma podcast, to talk about postpartum psychosis and APP's work[18]. The podcast included discussion about what postpartum psychosis is; treatment; Mother and Baby Units; the importance of peer support; wider impact on the family; baby bonding; resources and help for affected families; and raising awareness.
- Volunteer Chris spoke to the Blossoming Midwife podcast[19] and the MAMA podcast[20] about postpartum psychosis from a partner's perspective.
- Team member Rich spoke about postpartum psychosis and parenting through grief on the "Where did I go" motherhood podcast[21]

APP seeks to increase the public understanding of PP in a variety of ways, from writing scientific reports to sharing supporting personal stories, and working with artists, writers and performers. In 2025, we provided script development support for Casualty's postpartum psychosis storyline and collaborated with Hollyoaks on a major postpartum psychosis storyline. The Casualty storyline demonstrated the importance of friends, family and colleagues spotting the signs of PP[22]. Not only were thousands of people reached with these portrayals of PP in popular TV series, but we also used these storylines to secure wider media coverage. For example APP volunteer Juliette shared her PP experience and similarities with the Casualty storyline in the Metro[23]. We collaborated with Hollyoaks actress Nadine Mulkerrin on an Instagram post[24] outlining the signs and symptoms of PP, which received more than three hundred thousand views. The Hollyoaks story, and APP's role in

[15] https://www.glamourmagazine.co.uk/article/post-partum-pyschosis-mother-journey
[16] https://metro.co.uk/2024/12/28/give-birth-started-seeing-dead-people-22225769/
[17] https://www.independent.co.uk/health-and-wellbeing/postpartum-psychosis-death-women-b2713841.html
[18] https://podcasts.apple.com/gb/podcast/s1-ep10-postpartum-psychosis-maternal-mental-health/id1791997791?i=1000700069030
[19] https://open.spotify.com/episode/7abZunLeBrhBPegqFkgvn4?go=1&sp_cid=2689e552d154eb50f389efb52242912b&nd=1&dlsi=18a7266b854d465f
[20] https://open.spotify.com/episode/0VSI0wCIVaBOyrRhl4yAMS?si=U1Zuy72YTeq3UqCptQADRA
[21] https://open.spotify.com/episode/0livQZuwIFKgNLQW8YrWd6?si=aarZqVFVS2iYHKkOKfG0RA
[22] https://www.app-network.org/uncategorized/bbcs-casualty-explores-importance-of-friends-family-and-colleagues-spotting-the-signs-of-pp/
[23] https://metro.co.uk/2025/02/11/postpartum-psychosis-thinking-died-gone-hell-22536024/
[24] https://www.instagram.com/reel/DRfOihWDDpQ/?utm_source=ig_web_copy_link

supporting the portrayal of PP, was also featured in The Mirror[25], Radio Times[26], Manchester Evening News[27], Prolific North[28], Metro[29], with a quote from APP's Chief Executive.
January 2025 saw the culmination of our support for Company Four's theatre production - Who Is Your Mummy and Where Did She Go? – which opened at the end of the month alongside a curated exhibition featuring poetry and artwork by women who have experienced postpartum psychosis (including pieces from the workshops attended by members of the APP network in 2024). The play, inspired by Company Four founder Gemma Whiteley's family history research, was shaped by the voices of APP families and explored postpartum psychosis through historical narratives, reflecting on past and present care. Peer supporters from our national team, as well as our Manchester, Lancashire and South Cumbria NHS projects, attended performances to share information and connect with anyone with PP experience. Later in 2025, APP supported and attended the Maternal Mental Health Alliance's exhibition, 'This is Also Motherhood' exhibition. APP trustee, Catherine Cho, was one of the ten mothers who told their stories for the exhibition[30]

In 2025, APP supported a new scheme designed to support the mental health and wellbeing of families during pregnancy and the early years (from conception to age two). The Reading Well for Families booklist[31] was launched on 10th June and is available across public libraries in England and Wales. It includes information and personal stories on topics such as parental wellbeing, perinatal mental health problems (including anxiety, depression, OCD and birth trauma), and coping with loss (including miscarriage, stillbirth, and neonatal death). Amongst the books on the list are "What Have I Done?" by APP Ambassador Laura Dockrill and "Bonkers" by Olivia Siegl, both accounts of the authors' experiences with postpartum psychosis.

APP volunteer Chris has been raising awareness of PP and MBUs since 2023 by attending football matches at grounds closest to the 22 UK MBUs and visiting the MBU where possible. He has a specially made purple APP football shirt that he wears for every match and does his best to get a mention in the matchday programme each time. He continued his awareness raising tour in 2025 with matches including Colchester in August 2025, where he was not only able to secure an entry in their digital matchday programme about his challenge, postpartum psychosis and the MBUs but was also featured on the big screen in his MBU/APP football shirt, with the stadium announcer sharing his challenge with everyone in attendance (both before the match and during halftime. We are very grateful for all Chris's hard work in raising awareness of PP and MBUs with football clubs and their supporters.

Campaigning for improved services

In 2025, we continued using our specialist expertise and lived experience voice to influence change in systems that are important to women and families affected by postpartum psychosis, with a particular focus on campaigning for women throughout the UK to have access to a Mother and Baby Unit (MBU); campaigning for PP to be an essential part of all antenatal class training; and raising awareness that PP must be managed as a medical emergency for the safety of both mother and baby.

We continued to be an active member of the National Suicide Prevention Alliance, the Pregnancy and Baby Charities Network and the Maternal Mental Health Alliance. In addition to our MBU and antenatal class

[25] https://www.mirror.co.uk/tv/tv-news/hollyoaks-nadine-mulkerrin-opens-up-36155341
[26] https://www.radiotimes.com/tv/soaps/hollyoaks/hollyoaks-cleo-mcqueen-storyline-childbirth-newsupdate/
[27] https://www.manchestereveningnews.co.uk/news/tv/hollyoaks-star-says-my-heart-32778051
[28] https://www.prolificnorth.co.uk/news/hollyoaks-raises-awareness-of-postpartum-psychosis-in-powerful-new-storyline/
[29] https://metro.co.uk/2025/10/30/hollyoaks-confirms-postpartum-psychosis-story-cleo-mcqueen-24561413/
[30] https://www.alsomotherhood.com/catherine
[31] https://readingagency.org.uk/get-reading/our-programmes-and-campaigns/reading-well/reading-well-for-families/

campaigns, in 2025 we took opportunities to work with others on campaigns that could benefit the women and families we support:

- We joined the Royal College of Obstetricians and Gynaecologists (RCOG) and 48 other organisations in a joint letter calling for concrete commitment to ensure women receive the quality healthcare they need throughout their lives. The letter, sent to mark International Women's Day, urged the government to put women and girls at the heart of health policy.[32]
- We submitted a response to the National Maternity and Neonatal Investigation chaired by Baroness Amos highlighting MBU care, PP training and peer support as essential maternity safety issues that had not been addressed in drafts of the report. We worked with other pregnancy, baby and maternal mental health charities to contribute to the investigation, participating in the Make Birth Better Collaborative Working Group and co-signing a letter to Baroness Amos from the Pregnancy and Baby Charities Network.
- We raised concerns about declining PP care pathways in discussions with NHS England, and presented case studies showing declining care with the Royal College of Psychiatrists Perinatal Executive.
- We submitted a response to the Law Commission's call for evidence on homicide law[33] which called for the 1938 Infanticide Act to be updated to reflect recent developments in medical understanding of PP, and the impact on women who are severely mentally unwell when they don't receive the care and support they need. It also called for the Crown Prosecution Service to issue guidance for legal teams around postpartum psychosis, its causes, symptoms, possible effects and impact to ensure defendants are provided with the correct support and advocates have the information they need to conduct these cases for their clients.
- APP's Rich Baish contributed to articles in the Guardian[34] and Independent [35]about King's College London research which had found that prevention of future deaths reports issued by coroners in cases of pregnant women and new mothers were not being "systematically used nationally", raising awareness of the sudden onset of PP and how symptoms can be misunderstood.
- In July, APP's Chief Executive attended the launch of the government's new Civil Society Covenant where ministers, philanthropists, leaders from the charity and impact economy sector were brought together for a reception at The Science Museum, raising awareness of PP with these high profile leaders. In September, she spoke at a breakfast roundtable on "Maternal mental health services in the UK" at the Labour Party Conference - in October, raising awareness of postpartum psychosis and the need for MBUs, health professional training and the importance of access to peer support.

In November 2025, an international panel of women's mental health experts, including APP trustees Ian Jones and Clare Dolman, issued a call for postpartum psychosis (PP) to be formally recognised in diagnosis classification manuals[36]. Although the term postpartum psychosis is used widely by clinicians, researchers and people with lived experience, official diagnostic manuals currently force doctors to classify PP under a range of different names in different subsections of the classification manual, leading to confusion for patients, clinicians and researchers alike. We began developing an influencing plan for 2026, which would include asking members of our network to share experiences, questions, uncertainties and thoughts about diagnosis and the terms that were used when they experienced PP.

[32] https://www.rcog.org.uk/news/organisations-call-for-the-government-to-accelerate-action-on-women-s-health
[33] https://lawcom.gov.uk/publication/homicide-law-call-for-evidence/
[34] https://www.theguardian.com/society/2025/nov/19/coroners-advice-on-maternal-deaths-in-england-and-wales-routinely-ignored-study-finds
[35] https://www.independent.co.uk/news/health/pregnant-women-deaths-maternity-coroner-kcl-b2867695.html
[36] https://www.biologicalpsychiatryjournal.com/article/S0006-3223(25)01536-7/fulltext

Mother & Baby Unit campaign

In 2025, we continued to press for firm funding and timeline commitments for a Mother and Baby Unit in Northern Ireland, the only part of the UK without a Unit. The BBC Spotlight programme 'Mums in Crisis' investigated perinatal mental health care in Northern Ireland and explained just how urgently an MBU is needed[37]. Our media consultant, Liz Morrison, worked with programme producers, introducing them to members of APP's Northern Ireland café group, and others from the APP team. Café group member Shelley told her story in the programme, along with the bereaved family of Orlaith Quinn, perinatal mental health professionals from NI and from Jasmine Lodge MBU in Exeter. Shelley also shared her story with BBC News Online[38] and Liz talked to BBC Radio Ulster. APP Fundraiser, Ross, told his family's story in print media and on TV to raise awareness of the need for an MBU in Northern Ireland, including an interview with Ulster TV[39] and a front-page story in the Belfast Telegraph[40]. Our campaign was also covered by the Detail[41] and Belfast Telegraph [42] We're very grateful to all our volunteers who have told their stories in support of this campaign.

On World Health Day in April, APP joined with the World Health Organization (WHO) and partners to call for urgent action in maternal and newborn health as the start of their year-long campaign 'Healthy beginnings, hopeful futures'. The campaign urged governments and the health community to ramp up efforts to end preventable maternal and newborn deaths, and to prioritise women's longer-term health and well-being[43]. APP highlighted the need for an MBU in Northern Ireland[44].

The issue was debated in the Northern Ireland Assembly in October following an APP volunteer, Teresa Hawke, joining other APP reps to meet with Sinn Féin MLAs. Órlaithí Flynn MLA was moved by her story and worked to bring the debate forward. MLAs set out APP's ideas for options for families while they await an MBU and praised APP in the house for 'tireless' advocacy[45]. There was cross party support for an MBU. The APP team have continued to meet regularly with the Health Minister, who reiterates commitment and has included an MBU as a priority for the budget, but funding and timeframe is still unsecured.

In December, APP staff were delighted to attend the official opening of Seren Lodge, the new Mother and Baby Unit in Chester, after years of campaigning and contributing to the design, landscaping, and functionality of the MBU. The eight-bed unit will support women from Cheshire, Merseyside, and North Wales. It has been designed as a home from home for mothers and babies and includes Welsh-language support for North Wales families. The APP team and volunteers had worked with NHS teams in England and Wales to ensure the voices of lived experience were heard throughout the development process, as well as ensuring the unit meets the specific needs of families from North Wales. APP staff and volunteers had also joined the experts by experience forum of the Cheshire and Merseyside, Perinatal Mental Health, Lead Provider Collaborative 'Helix'

[37] https://www.bbc.co.uk/iplayer/episode/m002d4sx/spotlight-mums-in-crisis
[38] https://www.bbc.co.uk/news/articles/c201e4xev13o
[39] https://www.itv.com/news/utv/2025-11-27/postpartum-psychosis-family-visits-took-place-in-hospital-staff-changing-room
[40] https://www.belfasttelegraph.co.uk/life/family/ni-dad-fights-for-awareness-of-postpartum-psychosis-without-proper-facilities-were-going-to-keep-losing-mums/a/112237990.html
[41] https://thedetail.tv/articles/i-d-be-in-floods-of-tears-why-northern-ireland-still-has-no-mother-and-baby-unit
[42] https://www.belfasttelegraph.co.uk/life/features/i-thought-their-plan-was-to-get-me-to-sleep-so-they-could-take-my-baby-ni-woman-opens-up-on-struggles-as-new-mum/a/112207149.html
[43] https://www.who.int/campaigns/world-health-day/2025
[44] https://www.instagram.com/p/DIIgGx6ODVF/
[45] Northern Ireland Assembly (2025) *Official Report (Hansard)*, Tuesday 7 October 2025 Volume 182, No 2, pp. 17, 20, 21, 23 & 24, https://data.niassembly.gov.uk/HansardXml/plenary-07-10-2025.pdf

to ensure the voices of those with PP were heard in the development of the perinatal services, including the new MBU.

Our Miles for Mums fundraisers continued to use their fundraising challenges to raise awareness of the need for women across the UK to be able to access MBU care highlighting distances from their home or team base to the nearest MBU (see fundraising and strengthening our capacity, p. 21 below).

Antenatal Campaign

We continued our campaign for information about postpartum psychosis to be shared at every antenatal class in the UK, sharing information about the campaign widely. Throughout 2025, we continued to promote our free antenatal education toolkit via social media and in the media, including posters for expectant parents[46], for antenatal educators[47] , and our signs and symptoms posters[48]. We sent hundreds of APP's free information guides and resource packs to Mother and Baby Units, Perinatal Mental Health Services, Maternity Services and organisations working with new families throughout the UK. As detailed under 'Raising awareness amongst health professionals' above, APP's staff and lived experience volunteers continued to talk about the importance of antenatal education regarding PP.

Research

APP facilitates research, supports lived experience consultancy, and helps disseminate findings, ensuring evidence-based information is accessible to women, families, and health professionals. In 2025, we used our limited research capacity to support and promote a variety of studies, and to seek funding for APP's research support infrastructure. We continued to work closely with researchers at the National Centre for Mental Health (NCMH) at Cardiff University on recruitment and awareness-raising of the importance of research, including supporting and advertising the MaM (mums and mental health)[49] PP study which is designed to increase a database of those with PP to use for different research questions. Two studies using this data in 2025 were presented as posters at the National Psychosis Conference in 2026: " hormonal sensitivity and genetics: investigating postpartum psychosis, menstruation and menopause"; and "the role of perceived birth trauma in the onset of postpartum psychosis"[50].

During 2025, we worked with the Care Policy and Evaluation Centre (CPEC) at The London School of Economics on a new study funded by the Three NIHR (National Institute for Health and Care Research) Schools Mental Health Programme. The RAPPORT study (**R**ealist evaluation of **A**ction on **P**ostpartum **P**sychosis' MBU peer supp**ORT**) assessed APP-provided peer support at three Mother and Baby Units in England. During the year researchers carried out in-depth conversations with mothers who have accessed support, APP peers and managers, and NHS staff to understand how the charity's model impacts women's lives. Following analysis of these interviews, the results will be shared in 2026. Peer support in Mother and Baby Units is patchy and varies across the country. The research study aims to understand the benefits and essential ingredients, to identify the resources needed for effective implementation and assess value for money.

APP is participating in a second NIHR funded research project led by the University of Oxford, which started in late 2025. The POSIE study – Improving **P**ostpartum **O**utcomes of **S**evere Mental **I**llnesses in **E**thnically diverse mothers. This research project is focused on "reducing ethnic and social inequalities in perinatal mental health care and preventing maternal deaths — including suicide…". It aims to "understand why women from different ethnic, social, and regional backgrounds experience unequal access to care and outcomes, and

[46] https://www.app-network.org/wp-content/uploads/2023/10/Antenatal-campaign-flyers-October-2023.pdf
[47] https://www.app-network.org/wp-content/uploads/2023/10/Antenatal-campaign-HP-flyers-October-2023.pdf
[48] https://www.app-network.org/wp-content/uploads/2023/05/POSTER_APP_A4_PINK-1-1.pdf
[49] https://www.ncmh.info/help-with-research/mums-and-mental-health/
[50] https://www.rcpsych.ac.uk/members/devolved-nations/rcpsych-in-wales/about-us/national-psychosis-conference-2026

to design practical, culturally safe solutions that improve support for mothers experiencing severe mental illness (SMI) after childbirth."[51] APP's Shaheda Akhtar is co-investigator and the public patient involvement (PPI) lead.

APP has been working with a team in the Department of Clinical Psychology at the University of East Anglia for several years on the development of tools to support psychological recovery from PP. As part of this work, in 2025 we asked our network of people who have experienced postpartum psychosis to complete a survey. The aim of this research is to better understand recovery after an acute episode and help develop new psychological support for others going through similar experiences in the future. Also in 2025, we asked our network to contribute to a survey on research gaps for women and families affected by PP conducted by the Perinatal Mental Health Priority Setting Partnership, supported by the James Lind Alliance. The Priority Setting Partnership is gathering data to outline future research priorities to improve the lives of women, birthing people, babies, and families. They sought input from people with lived experience, healthcare professionals and voluntary organisations on the research questions that need answering. APP highlighted difficulties caused by knowledge gaps around: the causes of PP; prevention; medication (lack of specially designed drugs, and limited research of medications during pregnancy and breastfeeding); psychological recovery; diagnosis; long term illness course and outcomes; impact on children, and how care influences outcomes for children; and managing menopause.

Fundraising and strengthening our capacity

In 2025, we increased staff capacity in our fundraising team and continued to implement our updated fundraising strategy, seeking funds from a variety of sources. We were successful in securing research funding (see POSIE project under research above), a new contract to provide peer support at the MBU in Chester (see peer support above) and were awarded £40,000 in unrestricted funds as a GSK Kings Fund IMPACT Award winner. We continued to invest in our grant fundraising capacity and were successful in securing new grants, including from the David Riddell Memorial CIO, the Simon Gibson Charitable Trust, The Grocers' Charity, the Sir Halley Stewart Trust and players of People's Postcode Lottery. We continued developing our major donor engagement strategy and held a high-profile event in November to build relationships and profile. The Impact & Hope event brought together leading experts, lived experience voices and changemakers working towards better care for postpartum psychosis to reflect on APP's impact and hopes for the future. The event included presentations, personal stories and an exhibition of art and storytelling[52]

Our voluntary fundraising and corporate donations income for 2025 exceeded our £170,000 target. We secured two match-funding appeals, via the Big Give, and held our first 'adventure' – an 8 mile walk in the Peak District in June to raise funds and awareness of PP. Having secured charity London Marathon places for the first time for the 2026 race, we selected our runners and began supporting their fundraising efforts.

In 2025 we had more than 225 individual fundraisers taking part in challenges including marathons, half marathons, ultramarathons, swims, bungee jumps and inflatable courses. People fundraised for us at events across the UK and the world – including Paris, Amsterdam, Antwerp, and New York. We are very grateful to all our individual fundraisers who have found many inventive ways to fundraise and raise awareness of PP. We'd particularly like to thank:

[51] https://www.psych.ox.ac.uk/research/research-groups/chimes/improving-postpartum-outcomes-of-severe-mental-illnesses-in-ethnically-diverse-mothers
[52] https://www.linkedin.com/posts/sarahpujol_stronglikearose-activity-7393769389235347456-Q4Gh/

- Ross who ran the 63km Tollymore Extreme Ultra Trail Marathon raising more than £11,000 and a huge amount of awareness through his own social media and newspaper articles[53]. Ross said:
  "*7.5hrs, 62km of mountains… a metaphor for the journey we and the families who go through PPP face. I wanted this campaign of awareness to provide a flicker of light and hope that no matter the unknown, no matter the distance, no matter the mountain in-front of you, no matter how much it hurts… just focus on the next step, find the strength to share your struggle and lean on support around you, so you can keep going*"[54]
- Juliette and Team Remy –raised £11,000 across 2024 and 2025 by running the Brighton 10k, the Brighton Marathon and half-marathon. Juliette also shared her story in the media (see under awareness raising above). Juliette said:
  "I'm so grateful to my wonderful friends for taking on this challenge for such an amazing cause. Brighton is an important city to me and has been my home for 15 years. It's great to be taking on a run in my home city, with so many fantastic people by my side. This team has supported me thoroughly each step of my recovery".
- Laura, a mental health nurse from North Wales, who ran an ultramarathon, approximately 70 miles from the Maternity Unit at Ysbyty Gwynedd across North Wales to the Seren Lodge site at the Countess of Chester hospital to coincide with Maternal Mental Health Awareness Week raising more than £1,500[55].
- Becky[56] who ran the Brighton Marathon raising nearly £2,500.
- Our 2025 Great North Runners including siblings James and Gemma[57], Debbie, Ward Manager at the Margaret Oates Mother and Baby Unit in Nottingham and her friend Jo58 who together raised nearly £2,400.
- Our London Marathon Runners, Chay[59], Sarah[60] and Satpal[61] who together raised more than £5,000.
- The team of eleven runners, including Jemma[62] and Joel[63], who ran the Barnsley 10k to raise awareness of PP, raising more than £5,000.
- Emily who raised nearly £5,000 running the Paris Marathon for APP[64]
- Perinatal psychiatrist Ellie who raised nearly £4,000 running the Manchester marathon[65]
- Anna who ran 72 miles in a single month for our Miles for Mums and Babies challenge, raising nearly £1,200. This was the distance between her house and the Mother and Baby Unit where she received treatment when she was ill. Anna said:
  "*It feels quite empowering to be doing something publicly positive after surviving PP. It's made it a little easier to talk about my experiences."*
- Clément who braved the London 10k in temperatures of over 30 degrees, raising more than £1,300.[66]

[53] https://www.youtube.com/watch?v=lYK7aNB0JFA
[54] https://www.instagram.com/reel/DQ9691-CEps/?utm_source=ig_web_copy_link
[55] https://www.justgiving.com/page/laura-davies-2
[56] https://2025brightonmarathonweekend.enthuse.com/pf/rebecca-styles
[57] https://www.justgiving.com/page/jamesngemma
[58] https://ajbellgreatnorthrun2025.enthuse.com/pf/deborah-sells
[59] https://www.justgiving.com/page/chay-oliver-2
[60] https://www.justgiving.com/page/sarah-massey-1736698057811
[61] https://www.justgiving.com/page/satpal-roth-8
[62] https://www.justgiving.com/page/fundraiserforapp
[63] https://www.justgiving.com/page/joel-burrows-1
[64] https://www.justgiving.com/page/emily-youell-1730981735215
[65] https://www.justgiving.com/page/eleanor-field-5
[66] https://www.justgiving.com/page/clement-chaine-1

- Elke, Kwame, Tom, Adèle, Ruud, Lau, Vincent, Anne and Ruud who took on the Antwerp 10 Miles to fundraise more than £1,300 for APP.

We'd also like to thank the healthcare professional teams who alongside their work supporting women and families raised funds and awareness for APP in 2025, including:

- The Northern Health and Social Care Trust Perinatal Community Mental Health Team who ran the Belfast Marathon Relay to celebrate Maternal Mental Health Week 2025 Raised over £2,600[67]
- Claire, Louise, Mary, Roban and Laura from the South West Yorkshire Community Perinatal Mental Health Team who raised nearly £2,000 taking part in the Great North Swim to help raise awareness for APP[68]. They said:
  "…*we wanted to help raise awareness so women and birthing people and families know what the illness is and how to access support if they feel they are at risk or are experiencing symptoms. We hope the number of donations reflects that we have managed to spread the message and raise funds so you can continue all the work APP does."*
- The Andersen Mother and Baby Unit's Miles for Mums and Babies challenge team. Throughout May 2025 the unit's staff, mums, babies and families walked, ran, toddled and pushed buggies aiming to complete 1,400 miles to represent the 1,400 new mums who experience postpartum psychosis in the UK each year.[69]
- The North London Foundation Trust Perinatal Services Miles for Mums and Babies challenge team who collectively ran, walked, cycled and swam 1,400 miles in January and February[70].

We secured financial support from a variety of corporate donors in 2025. In March, students at The Brit School in Croydon chose to support Action on Postpartum Psychosis as part of their Musical Season. The talented students staged an incredible performance of the musical American Idiot, featuring the music of Green Day. They helped to raise awareness of PP and raised more than £600 through donations from the audience. Other corporate support came from a variety of companies, including a team from Little Green Rooms taking part in the Bristol 10k; members of staff from the Manchester branch of the Apple store representing APP in a Corporate Challenge 5k in Salford; and Salesforce providing an amazing free event space on the 36th floor of their tower in central London for us to host our Impact & Hope event. APP secured a 30,000 Euro grant for 2026 from Astorg Philanthropy Investments via the King Baudouin Foundation, and Astorg's London office donated numerous large computer monitors to APP. Some of these monitors were used to improve APP staff workspaces and others were sold across 2025 and 2026.

APP has grown significantly over the last five years. During 2025, we considered the staff capacity, IT, digital and administration needs of our growing charity. We continued work to manage our data more efficiently and to scope our requirements for a CRM[71] to streamline our communication with supporters and volunteers. In December we began recruitment for a Team Administrator, who joined the team in early 2026. We also secured funds from a major donor for 2026 to support a new Head of IT & Digital Transformation post and a CRM project. We continued to improve our staff and volunteer training and development, seeking opportunities for staff to participate in training and events relevant to their roles. For example, the Chief Executive and Director of Finance & Operations attended a three-day leadership development programme, alongside the other 2025 GSK IMPACT Award winners, learning from the Kings Fund presenters and the other charities.

[67] https://www.justgiving.com/page/perinatalcmht
[68] https://arlagreatnorthswim2025.enthuse.com/pf/laura-washington-ee823
[69] https://www.app-network.org/news/fundraising/miles-for-mums-and-babies-2025/
[70] https://www.justgiving.com/page/nlftperinatal
[71] Customer Relationship Management database

Financial Review

The Statement of Financial Activities on page 31 shows APP's income and expenditure for the year. During the year ended 31 December 2025, income exceeded expenditure by £100,903. In our Unrestricted Funds, income exceeded expenditure by £73,727, reflecting higher than expected fundraising income and lower expenditure than forecast, including an unrestricted £25,000 grant received from "players of the People's Postcode Lottery in November, that will be spent largely in 2026, and delaying a laptop replacement programme to 2026. Income from charitable activities increased, reflecting increases in grant and research income, offset by falls in contract and training income. Income from donations increased significantly, in particular donations from grassroots challenge fundraising and corporate donations, which included the £40,000 GSK IMPACT Award. Investment income decreased due to falls in interest rates. In our restricted funds, income exceeded expenditure by £27,176. This reflects grants from the David Riddell Memorial CIO, the Simon Gibson Charitable Trust, the Sir Halley Stewart Trust, and City Bridge Foundation received in 2025 for expenditure across the 2025 and 2026 financial years, together with income from a Big Give match funding campaign in December 2025 which will be spent on our national peer support project in 2026.

The Balance Sheet on page 32 shows that at 31st December 2025, APP was holding £262,488; of which £51,201 was restricted funds. At the start of 2025, APP's reserves policy was to hold three to five months of core charitable expenditure in reserve. In determining this range, Trustees had considered the risks to which the charity is exposed and its working capital requirements. Core charitable expenditure consists of the costs of running APP's national peer support service, our information resources, website and social media and running the organisation effectively. It excludes the costs of operating our NHS contracts. On 1st January 2025, APP was holding £136,483 in free reserves, which was within the range then recommended by our reserves policy (£128,000 to £213,000). Trustees reviewed and reconfirmed the reserves policy at the end of 2025 and deemed the recommended reserves range of three to five months core charitable expenditure to then be (£125,000 to £250,000). On 31st December 2025, APP was holding £201,403 in free reserves, which was within this recommended range. The Trustees are not aware of any factors likely to impact the future financials of the charity other than those discussed elsewhere in this report, including under risk management below.

Structure, Governance and Management

Action on Postpartum Psychosis was incorporated as a Company Limited by Guarantee on 10th December 2010. It is governed by its Articles of Association, amended by special resolution in 2012 and 2018. The charity arose from a research network within the University of Birmingham Medical School and was hosted by University of Birmingham until 31st December 2023. The University provided office space, expert time, infrastructure and resources to the charity. In January 2024, APP became independent of the University of Birmingham. APP is supported by the University of Cardiff National Centre for Mental Health, which provides expert time and resource support for the charity.

APP's Board of Directors/Trustees is made up of women with personal experience of postpartum psychosis; world-leading clinical and academic experts in postpartum psychosis; and individuals with specific skills relevant to the management of a charity. Dr Jessica Heron is APP's Chief Executive and manages the running of the charity. Operational plans and all major strategic decisions are discussed and agreed by the Board of Trustees.

A senior management team, consisting of the Chief Executive, Director of Finance and Operations and UK Programme Manager, run the day-to-day operations of the charity including human resources, finance, grant management, data and systems, fundraising and governance activities. National Coordinators, all of whom have lived experience of postpartum psychosis, lead on each of APP's main workstreams. These include a: National Health Professional Training & Research Coordinator; National Peer Support Coordinator; Peer

Support Groups Coordinator; Partners Peer Support Coordinator; National NHS Contracts Coordinator; and Marketing/Digital Communications Coordinator. They line manage staff and work closely with beneficiaries and volunteers to ensure that our peer support, information, awareness raising, campaigning and research work all have lived experience at their heart.

Directors/Trustees are recruited through advertising and networking and appointed in a general meeting or by the other directors at a Board meeting. New Directors/Trustees are inducted and trained through meetings with the Chair, Chief Executive, and members of staff, as appropriate to their particular area of expertise, and provided with a pack of background information about the charity. During 2025, the Board completed a skills audit, agreed a recruitment policy and began a process to identify new Trustees to fill both existing skills gaps and those that would be created when longstanding Trustees stepped down. Two of APP's longest serving Board members stepped down at the end of 2025 and another stepped down in early 2026. Professor Ian Jones continued to advise the Board on clinical matters, whilst new clinical Trustees were sought. A new trustee with HR expertise and knowledge of family-friendly working practices was appointed in 2025 and two new Trustees have been appointed to fill clinical skills gaps in early 2026.

APP is part of the Maternal Mental Health Alliance and seeks to support and collaborate with the Alliance in campaigning for better perinatal mental health services; this does not impact on the charity's operating policies.

Risk management

The Trustees consider the principal risks to which the charity is exposed, and the systems in place to mitigate those risks. The Chief Executive reports the most substantial inherent risks, together with any significant emerging risks, and the control measures in place to Trustees at each Board meeting. The full risk register is presented to the board annually, whilst at intermediate meetings the Chief Executive presents a risk report containing the "red" and "amber" risks, any new or emerging risks and any new activities where the Board might need to consider the risks entailed and whether current risk mitigation is adequate.

Financial risk: The Trustees have identified that financial sustainability is the major financial risk to the charity. The political climate for small charities is tough, demand for services and competition for grant funding are high, and capacity pressures impact on income generation. In 2024, the Board reviewed and updated APP's funding and fundraising strategy, including agreeing resources to grow grassroots fundraising further and to focus on major donor fundraising. Trustees plans for 2025 included increasing capacity in the fundraising team in line with this strategy. Internal financial management risks are reduced by the implementation of procedures for authorisation of all transactions. Budgets are set for all major areas of expenditure, and adjustments are reviewed by the Board.

Non-financial risks: The Trustees have focussed attention on mitigating non-financial risks such as safeguarding, health and safety, lone working, operational and legal risks, with different risks assigned to members of senior staff or Board of Trustees. For each new area of operation, the financial, legal, health and safety, operational and reputational risks are reviewed by senior staff and the Board of Trustees, to determine new policies and procedures needed, training and information needed by managers, Coordinators and volunteers, and additional external advice and support needed.

Key risks facing the organisation in 2025 were financial sustainability, governance and operational risks. Governance risks were ensuring the Board has the necessary skills and experience to govern the charity, and that is representative of the individuals and communities we aim to serve. Operational risks included in particular maintaining sufficient income from a diversity of sources, identifying funds and capacity to support research involvement work, ensuring staff and volunteers are representative of the individuals and communities we aim to serve and that our data is managed effectively and in a compliant manner. Financial sustainability was addressed by: frequent reviews of forecast income and expenditure by the Board; implementing our updated funding and fundraising strategy; applying for grant, contract and research funding;

and carefully planning and budgeting for 2026. Governance risks were addressed through planning for the retirement of long serving Trustees, completing a trustee skills audit, developing a new trustee recruitment strategy and policy and planning to advertise and recruit new Trustees in 2026. Management capacity and operational risks were addressed through: contracting support for grant fundraising and data protection toolkit work; outreach work and engagement to increase the number of women from diverse communities we support and train as volunteers; and planning to recruit to a new Head of IT & Digital Transformation role in 2026.

Plans for Next Year

Action on Postpartum Psychosis plans for 2026 were grouped under the following objectives:

Supporting women and families.

We plan to maintain and grow our national and regional peer support service, delivering high-quality peer support nationwide, by:

- Offering online, in person, video call and café group support to all who need it nationally and via our NHS projects, including support for dads and coparents, grandparents, Black, Muslim and neurodivergent mums and trialling a menopause support group.
- Continuing to develop our work in Greater London and build stronger links with London MBUs.
- Aiming to remain relevant to our community across their lifetime, including through completing our legal and rights-based web content, and training staff and volunteers in signposting women and families when they encounter legal or rights issues.
- Maintaining high-quality service delivery and good functioning of our NHS partnership contracts.
- Increasing our reach into under-represented communities, including through outreach to other organisations and through media and social media.
- Deepening connections with all UK MBUs ensuring staff, women and families are aware of APP's information and peer support.

Raising awareness amongst health professionals.

Postpartum psychosis is still widely misunderstood and stigmatised, yet early recognition and treatment can save lives. APP needs to be more visible to the public, health professionals, and policymakers. We want a UK adult population who have heard of PP & APP, know where to get help, do not hold ill-informed or stigmatising views, and who value specialist mental health services for mothers. We want informed professionals who respond with urgency and empathy and deliver best practice care, and a lived experience population who know about APP, engage with us and value our support. We want to ensure that issues of importance to our community are heard by policymakers and thought leaders.

We plan reach more health professionals with training and information by:

- Developing APPs training strategy, reviewing delivery, priority audiences, income, systems and accreditation.
- Finalising and trialling our first health professional training e-modules.
- Raising the profile of APP's training, sharing our impact and evaluation.
- Continuing to offer online bookable one-day training and NHS commissioned in-person training days.
- Arranging a fourth annual free Alex Baish Memorial Webinar, increasing its reach and building our database of health professionals.

Raising awareness amongst the general public.

We plan to raise awareness in the general public to aid early recognition of PP, ensure families seek help, and to reduce stigma or misinformation by:

- Developing content and messaging to raise awareness of PP and the visibility of APP; explaining the condition, its signs, and the possibility of full recovery. Using 'moments' across the year – Mothers' Day; Maternal Mental Health Awareness Week, Black Maternal Mental Health Week, World Mental Health Day, Suicide Awareness Week – to reach wider audiences.
- Increasing awareness of PP in diverse communities (Black, Asian, LGBTQ+, neurodivergent mums, grandparents, dads/co-parents), promoting understanding and culturally sensitive services; running a storytelling workshop with mums from Black and Asian backgrounds to develop messaging and content; and engaging with the POSIE research study.
- Promoting APP as thought-leaders, sharing expertise, knowledge, and impact stories.
- Supporting our storytellers to raise awareness of PP, APP and our peer support community; updating our storyteller guidelines.

Campaigning.

Our goal is that all women and families in the UK have access to the services they need to get help and recover from PP. We plan to use our specialist expertise and lived experience voice to create change in systems, by:

- Responding to policy consultations and seeking to influence issues of importance to our community as required, for example on guidelines for PP diagnosis in DSM72 and ICD73 diagnostic systems.
- Promoting the importance of health professional PP education and sharing the impact of APP training.
- Highlighting the value of APP's specialist peer support in recovery, sharing stories, evaluation data, and insights from the RAPPORT study.
- Continuing APP's MBU campaign, with a particular focus on:
    - To protect and advocate for MBUs, sharing MBU stories, quotes, data and building strong campaigning partnerships, engaging policymakers and the media.
    - Working with partner organisations in Northern Ireland to maintain pressure on the government, supporting media storytellers, briefing Members of the Legislative Assembly and ministers.

Research.

We will continue to facilitate research studies of importance to women and families affected by postpartum psychosis, as capacity and funding allows, including:

- Completing and disseminating the findings of the RAPPORT study (**R**ealist evaluation of **A**ction on **P**ostpartum **P**sychosis' MBU peer supp**ORT**) which assessed APP-provided peer support at three Mother and Baby Units in England during 2025.
- Working with Oxford University and others on the POSIE study – Improving **P**ostpartum **O**utcomes of **S**evere Mental **I**llnesses in **E**thnically diverse mothers which aims to understand why women from different ethnic, social, and regional backgrounds experience unequal access to care and outcomes, and to design practical, culturally safe solutions and guidance for NHS Trusts.

Strengthening our capacity to fulfil our charitable objectives

We plan to strengthen our capacity to support sustainable growth by:

- Developing APP's 2026–2031 Strategy, using external facilitators to help the Board and staff consider organisational structure, key performance indicators, and our resourcing plan.

[72] DSM - The Diagnostic and Statistical Manual of Mental Disorders produced by the American Psychiatric Association

[73] ICD (International Classification of Diseases) codes are standardized codes developed by the World Health Organisation

- Developing APP's digital technology capacity, recruiting to a Head of IT & Digital Transformation, implementing a CRM[74] and integrating digital tools to strengthen efficiency, community and volunteer coordination, reporting, and communications.
- Improving HR systems and processes, implementing a new HR system to improve efficiency, reviewing succession planning, burnout prevention, sick pay and other policies.
- Growing APP's income across philanthropy, grants, NHS Contracts, and grassroots fundraising, cultivating major donors, encouraging MBU fundraising and community fundraising, developing a pipeline of regular small grants and seeking large multi-year grants.
- Training and supporting the APP staff team to increase the organisation's effectiveness and community reach, including training in social media engagement and video editing.

APP's Board

APP is governed by its Board of Directors/Trustees, which remains a mix of women with lived experience of postpartum psychosis, academic researchers, clinicians and Trustees with specific skills (e.g. health economics). Directors/Trustees during 2025 were as follows:

Dr Katherine Adlington	(appointed 1st May 2026)
Dr Giles Berrisford	Chair (resigned 11th December 2025)
Annette Bauer	Treasurer
Catherine Cho	
Dr Clare Dolman	(resigned 31st January 2026)
Hannah Francis	(appointed 8th October 2025)
Anna Jones	Acting Chair
Professor Ian Jones	(resigned 18th December 2025, reappointed 21st May 2026)
Dr Snehita Joshi	(appointed 1st May 2026)
Tracey Robinson	

There have been no other changes to the Board of Directors/Trustees.

Public Benefit Statement

Under its Articles of Association, the objects for which Action on Postpartum Psychosis is established are: to promote and protect the physical and mental health of women who have experienced postpartum psychosis and their families through the provision of support, education and practical advice; to advance the education of the public in general (and particularly amongst health professionals) on the subject of postpartum psychosis and to promote research for the public benefit in all aspects of that subject and to publish the useful results; and to advocate for perinatal mental health services for women and their families. The Trustees confirm that they have referred to the guidance contained in the Charity Commission's general guidance on public benefit when reviewing the organisation's aims and objectives and in planning future activities.

The identifiable benefits of APP's work are that women and family members affected by postpartum psychosis are able to access support and information to improve their recovery, and that healthcare professionals and the general public are better informed about, and have more understanding of, this illness. A number of examples of benefit appear earlier in the report. These benefits are achieved through peer support, patient information

[74] Customer Relationship Management Database

development, health professional training, public awareness raising, research and campaigning. The only restriction is that individuals receiving peer support have suffered from postpartum psychosis or are a partner or family member of someone who has had the illness. There are no fees for the peer support service; a fee may be charged for health professional training and lived experience speakers.

Trustees' Responsibility Statement

The trustees (who are also the directors of Action on Postpartum Psychosis for the purposes of company law) are responsible for preparing the Trustees' Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice) including Financial Reporting Standard 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland".

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 those financial statements, the trustees are required to

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charity SORP;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable accounting standards 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 charitable company will continue in business.

The trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charitable company and to 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.

Trustees' report, incorporating a strategic report, approved by order of the Board of trustees, as the company directors, on ..... and signed on the Board's behalf by:

.....

A Bauer - Trustee

Independent examiner's report to the trustees of Action on Postpartum Psychosis ('the Company')
I report to the charity trustees on my examination of the accounts of the Company for the year ended 31 December 2025.

Responsibilities and basis of report
As the charity's 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 charity'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 your charity's gross income exceeded £250,000 your examiner must be a member of a listed body. I can confirm that I am qualified to undertake the examination because I am a member of the Institute of Chartered Accountants in England and Wales, 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:

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.

C L Moelwyn-Williams BSc FCA

TCA (Shrewsbury) LLP
Third Floor
21 St Mary's Street
Shrewsbury
Shropshire
SY1 1ED

Date: .....

Statement of Financial Activities (incorporating and income and expenditure account) for the year ended 31 December 2025

	Notes	Unrestricted funds £	Restricted funds £	2025 Total funds £	2024 Total funds £
INCOME AND ENDOWMENTS FROM					
Donations and legacies	2	333,026	11,053	344,079	272,255
Charitable activities	5				
General		293,227	126,912	420,139	385,246
Other trading activities	3	-	-	-	1,060
Investment income	4	3,637	-	3,637	5,554
Total		629,890	137,965	767,855	664,115
EXPENDITURE ON					
Raising funds	6	52,793	221	53,014	33,970
Charitable activities	7				
General		503,370	110,568	613,938	584,660
Total		556,163	110,789	666,952	618,630
NET INCOME		73,727	27,176	100,903	45,485
RECONCILIATION OF FUNDS					
Total funds brought forward		137,560	24,025	161,585	116,100
TOTAL FUNDS CARRIED FORWARD		211,287	51,201	262,488	161,585

CONTINUING OPERATIONS
All income and expenditure has arisen from continuing activities.

The notes form part of these financial statements

Statement of Financial Position 31 December 2025

	Notes	2025 £	2024 £
FIXED ASSETS			
Tangible assets	13	1,810	1,077
CURRENT ASSETS			
Stocks	14	936	-
Debtors	15	74,852	63,023
Cash at bank and in hand		253,207	168,934
		328,995	231,957
CREDITORS			
Amounts falling due within one year	16	(68,317)	(71,449)
NET CURRENT ASSETS		260,678	160,508
TOTAL ASSETS LESS CURRENT LIABILITIES		262,488	161,585
NET ASSETS		262,488	161,585
FUNDS	18		
Unrestricted funds:			
General Fund		203,213	137,560
Designated Fund - In Memory Fundraising		8,074	-
		211,287	137,560
Restricted funds		51,201	24,025
TOTAL FUNDS		262,488	161,585

The charitable company is entitled to exemption from audit under Section 477 of the Companies Act 2006 for the year ended 31 December 2025.

The members have not required the company to obtain an audit of its financial statements for the year ended 31 December 2025 in accordance with Section 476 of the Companies Act 2006.

The trustees acknowledge their responsibilities for

(a) ensuring that the charitable company keeps accounting records that comply with Sections 386 and 387 of the Companies Act 2006 and

(b) preparing financial statements which give a true and fair view of the state of affairs of the charitable company as at the end of each financial year and of its surplus or deficit for each financial year in accordance with the requirements of Sections 394 and 395 and which otherwise comply with the requirements of the Companies Act 2006 relating to financial statements, so far as applicable to the charitable company.

The notes form part of these financial statements

continued...

Statement of Financial Position - continued
31 December 2025

The financial statements were approved by the Board of Trustees and authorised for issue on . .....and were signed on its behalf by:

.....
A Bauer - Trustee

Statement of Cash Flows for the year ended 31 December 2025

	Notes	2025 £	2024 £
Cash flows from operating activities			
Cash generated from operations	1	85,568	39,634
Net cash provided by operating activities		85,568	39,634
Cash flows from investing activities			
Purchase of tangible fixed assets		(1,295)	-
Net cash (used in)/provided by investing activities		(1,295)	-
Change in cash and cash equivalents in the reporting period		84,273	39,634
Cash and cash equivalents at the beginning of the reporting period		168,934	129,300
Cash and cash equivalents at the end of the reporting period		253,207	168,934

The notes form part of these financial statements

Notes to the Statement of Cash Flows for the year ended 31 December 2025

1. RECONCILIATION OF NET INCOME TO NET CASH FLOW FROM OPERATING ACTIVITIES

	2025 £	2024 £
Net income for the reporting period (as per the Statement of Financial Activities)	100,903	45,485
Adjustments for:		
Depreciation charges	562	610
Increase in stocks	(936)	-
(Increase)/decrease in debtors	(11,829)	893
Decrease in creditors	(3,132)	(7,354)
Net cash provided by operations	85,568	39,634

2. ANALYSIS OF CHANGES IN NET FUNDS

	At 1.1.25 £	Cash flow £	At 31.12.25 £
Net cash			
Cash at bank and in hand	168,934	84,273	253,207
	168,934	84,273	253,207
Total	168,934	84,273	253,207

The notes form part of these financial statements

Notes to the Financial Statements for the year ended 31 December 2025

1. ACCOUNTING POLICIES

Basis of preparing the financial statements
The financial statements of the charitable company, which is a public benefit entity under FRS 102, have been prepared in accordance with the Charities SORP (FRS 102) '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) (effective 1 January 2019)', Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' and the Companies Act 2006. The financial statements have been prepared under the historical cost convention.

The accounts have been prepared in pound sterling, which is the functional currency of the charity, rounded to the nearest pound.

The charitable company has taken advantage of the relevant disclosure exemptions in preparing the financial statements, as permitted by FRS 102.

Income
All income is recognised in the Statement of Financial Activities once the charity has entitlement to the funds, it is probable that the income will be received and the amount can be measured reliably.

Grants from the government and other agencies have been included as 'Grants' in furtherance of the charity's objects.

Expenditure
Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the charity to that expenditure, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all cost related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with the use of resources.

Tangible fixed assets
Depreciation is provided at the following annual rates in order to write off each asset over its estimated useful life.

Office equipment costing £1,000 or more is capitalised at cost and depreciated over it's estimated useful economic life of 3 years, on a straight line basis.

Stocks
Stocks are valued at the lower of cost and net realisable value, after making due allowance for obsolete and slow moving items.

Taxation
The charity is exempt from corporation tax on its charitable activities.

Fund accounting
Unrestricted funds can be used in accordance with the charitable objectives at the discretion of the trustees.

Restricted funds can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Further explanation of the nature and purpose of each fund is included in the notes to the financial statements.

Pension costs and other post-retirement benefits
The charitable company operates a defined contribution pension scheme. Contributions payable to the charitable company's pension scheme are charged to the Statement of Financial Activities in the period to which they relate.

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1. ACCOUNTING POLICIES - continued

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

Cash and cash equivalents
Cash at bank and 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.

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.

Financial instruments
The charity only has financial assets and 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.

Derecognition of financial liabilities
Financial liabilities are derecognised when the company's contractual obligations expire or are discharged or cancelled.

Going concern
At the time of approving the accounts, the directors have a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. Thus, they continue to adopt the going concern basis of accounting in preparing the accounts.

2. DONATIONS AND LEGACIES

	Unrestricted funds	Restricted funds	2025 Total funds	2024 Total funds
	£	£	£	£
Donations	312,544	9,857	322,401	253,391
Gift aid	20,482	1,196	21,678	18,864
	333,026	11,053	344,079	272,255

In the prior year, £261,349 of the income related to unrestricted funds and £10,906 to restricted funds.

3. OTHER TRADING ACTIVITIES

	Unrestricted funds	Restricted funds	2025 Total funds	2024 Total funds
	£	£	£	£
Script advice and speaker fee	-	-	-	1,060

In the prior year, £1,060 of the income related to unrestricted fund and £nil to restricted funds.

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4. INVESTMENT INCOME

	Unrestricted funds	Restricted funds	2025 Total funds	2024 Total funds
	£	£	£	£
Bank interest	3,637	-	3,637	5,554

In the prior year, £5,554 of the income related to unrestricted fund and £nil to restricted funds.

5. INCOME FROM CHARITABLE ACTIVITIES

	2025	2024
	£	£
Grants	151,912	112,982
Contract Income - Lancashire and South Cumbria NHS Foundation Trust	76,714	72,960
Contract Income - Birmingham and Solihull Mental Health NHS Foundation Trust	113,500	102,665
Contract Income - Black Country Healthcare NHS Foundation Trust	-	39,686
Contract Income - Greater Manchester Mental Health NHS Foundation Trust	43,260	40,505
Contract Income – Chester and Wirral Partnership NHS Foundation Trust	1,972	-
Workforce Training and Experts by Experience	2,516	13,508
Research contracts	30,265	2,940
	420,139	385,246

In the prior year, £272,264 of the income related to unrestricted funds and £112,982 to restricted funds.

Grants received, included in the above, are as follows:

	2025	2024
	£	£
Government Grants	37,390	86,278
Other Trusts and Foundations	9,835	11,704
Garfield Weston Foundation	-	15,000
City Bridge Foundation	34,170	-
David Riddell Memorial CIO	25,000	-
Players of People's Postcode Lottery	25,000	-
Sir Halley Stewart Trust	15,517	-
The Grocers' Charity	5,000	-
	151,912	112,982

Included within Government Grants noted above is a grant of £37,390 from the Department of Health and Social Care, restricted for use only towards the DHSC Suicide Prevention Fund.

Apart from the annual Employment Allowance credit against Employers National Insurance, the charity has received no other financial assistance from the Government in this financial period.

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6. RAISING FUNDS

Raising donations and legacies

	Unrestricted funds £	Restricted funds £	2025 Total funds £	2024 Total funds £
Staff costs	27,523	-	27,523	20,226
Other fundraising costs	25,270	221	25,491	13,744
	52,793	221	53,014	33,970

In the prior year, £33,703 of the expenditure related to unrestricted funds and £267 to restricted funds.

7. CHARITABLE ACTIVITIES COSTS

	Direct Costs (see note 8) £	Support costs (see note 9) £	Totals £
General	605,191	8,747	613,938

In the prior year, £481,285 of the expenses related to unrestricted funds and £103,375 to restricted funds.

8. DIRECT COSTS OF CHARITABLE ACTIVITIES

	2025 £	2024 £
Staff costs	504,323	481,907
Recruitment and Health & Safety	102	218
Consultancy	36,770	24,683
Project costs	12,205	4,956
Travel	16,821	17,451
Information materials and awareness raising	8,398	10,779
Volunteer training & expenses	2,472	2,649
Office and running costs	23,729	31,789
Workforce training and experts by experience costs	371	1,458
	605,191	575,890

9. SUPPORT COSTS

	Governance costs £
General	8,747

continued...

9. SUPPORT COSTS - continued

Support costs, included in the above, are as follows:

	2025	2024
	General	Total activities
	£	£
Independent examiners fee	2,310	2,370
Accountancy fees	5,842	5,884
Other fees	595	516
	8,747	8,770

10. NET INCOME/(EXPENDITURE)

Net income/(expenditure) is stated after charging/(crediting):

	2025	2024
	£	£
Depreciation - owned assets	562	610
Independent Examination Fee	2,310	2,370

11. TRUSTEES' REMUNERATION AND BENEFITS

There were no trustees' remuneration or other benefits for the year ended 31 December 2025 nor for the year ended 31 December 2024.

Trustees' expenses

There were no trustees' expenses paid for the year ended 31 December 2025 nor for the year ended 31 December 2024.

12. STAFF COSTS

	2025	2024
	£	£
Wages and salaries	458,103	437,723
Social security costs	38,989	30,913
Other pension costs	34,754	33,497
	531,846	502,133

The average number of full-time equivalent employees during the year was 10.4. (2024: 10.3).

The average monthly number of employees during the year was as follows:

	2025	2024
Core charitable activity	16	16

No employees received emoluments in excess of £60,000.

The total remuneration and benefits paid to the key management personnel, to whom the Trustees delegate the day-to-day running of the charity was £103,369 (2024: £98,536).

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13. TANGIBLE FIXED ASSETS

	Office equipment £
COST	
At 1 January 2025	2,887
Additions	1,295
At 31 December 2025	4,182
DEPRECIATION	
At 1 January 2025	1,810
Charge for year	562
At 31 December 2025	2,372
NET BOOK VALUE	
At 31 December 2025	1,810
At 31 December 2024	1,077

14. STOCKS

	2025 £	2024 £
Stocks	936	-

15. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2025 £	2024 £
Trade debtors	13,705	19,232
Other debtors	373	125
Prepayments and accrued income	60,774	43,666
	74,852	63,023

16. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2025 £	2024 £
Trade creditors	3,904	9,944
Other creditors	1,150	702
Accruals and deferred income	63,263	60,803
	68,317	71,449

Deferred income includes income received during the period of £55,442 (2024: £53,580) which relates to services to be provided during the financial year ended 31 December 2026.

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17. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Unrestricted funds £	Restricted funds £	2025 Total funds £	2024 Total funds £
Fixed assets	1,810	-	1,810	1,077
Current assets	277,794	51,201	328,995	231,957
Current liabilities	(68,317)	-	(68,317)	(71,449)
	211,287	51,201	262,488	161,585

18. MOVEMENT IN FUNDS

	At 1.1.25 £	Net movement in funds £	At 31.12.25 £
Unrestricted funds			
General Fund	137,560	65,653	203,213
Designated Fund - In Memory Fundraising	-	8,074	8,074
	137,560	73,727	211,287
Restricted funds			
National Peer Support	18,918	(11,394)	7,524
Legal and Human Rights Project	5,105	17,569	22,674
DHSC Suicide Prevention	2	(2)	-
David Riddell Memorial CIO Suicide Prevention Grant	-	11,493	11,493
City Bridge Foundation - Greater London Project	-	9,510	9,510
	24,025	27,176	51,201
TOTAL FUNDS	161,585	100,903	262,488

continued...

18. MOVEMENT IN FUNDS - continued

Net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General Fund	616,731	(551,078)	65,653
Designated Fund - In Memory Fundraising	13,159	(5,085)	8,074
	629,890	(556,163)	73,727
Restricted funds			
National Peer Support	20,888	(32,282)	(11,394)
Legal and Human Rights Project	20,517	(2,948)	17,569
DHSC Suicide Prevention	37,390	(37,392)	(2)
David Riddell Memorial CIO Suicide Prevention Grant	25,000	(13,507)	11,493
City Bridge Foundation - Greater London Project	34,170	(24,660)	9,510
	137,965	(110,789)	27,176
TOTAL FUNDS	767,855	(666,952)	100,903

Comparatives for movement in funds

	At 1.1.24 £	Net movement in funds £	At 31.12.24 £
Unrestricted funds			
General Fund	112,321	25,239	137,560
Restricted funds			
National Peer Support	-	18,918	18,918
Diverse Communities Peer Support	3,393	(3,393)	-
Rosa Voices from the Frontline	386	(386)	-
Legal and Human Rights Project	-	5,105	5,105
DHSC Suicide Prevention	-	2	2
	3,779	20,246	24,025
TOTAL FUNDS	116,100	45,485	161,585

continued...

18. MOVEMENT IN FUNDS - continued

Comparative net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General Fund	540,227	(514,988)	25,239
Restricted funds			
National Peer Support	26,598	(7,680)	18,918
Diverse Communities Peer Support	-	(3,393)	(3,393)
Rosa Voices from the Frontline	-	(386)	(386)
Legal and Human Rights Project	5,178	(73)	5,105
DHSC Suicide Prevention	86,278	(86,276)	2
Dads, Co-parents and Grandparents Peer Support in 2024	5,834	(5,834)	-
	123,888	(103,642)	20,246
TOTAL FUNDS	664,115	(618,630)	45,485

Unrestricted funds

The general reserve represents the funds of the charity which are not designated for a particular purpose.

Designated fund

In memory fundraising
Trustees agreed to designate money raised by a family and their friends to fund priorities agreed with that family including: engaging with consultations on infanticide law and lawyers working on this issue; and APP's support for bereaved families. In 2025, the fund was used for APP's engagement with the perinatal law project, responding to the Law Commission's call for evidence on homicide law (including the 1938 Infanticide Act) and providing bereavement peer support. In 2026, we plan to use this fund to further develop APP's support for bereaved families and continue engagement with the legal profession.

Restricted funds

National Peer Support
APP received grants from two charitable foundations in 2024 - The Garfield Weston Foundation (£15,000); and the D'Oyly Carte Charitable Trust (£6,000) - to support its national peer support project in 2024 and 2025. In 2025 we received a grant from The Grocers' Charity (£5,000) to support the project in 2025. We also ran two Big Give match funding campaigns – in October and December to raise donations for this work. These grants and donations funded staff time on our national peer support work, training for our peer support staff and volunteers, and online and face-to-face café groups. Some funds from the Big Give campaigns have been carried forward to support this project in 2026.

City Bridge Foundation - Greater London Project
APP has secured a five-year grant from the City Bridge Foundation – London's biggest independent charity funder – for a peer support and suicide prevention project in Greater London starting in February 2025. This grant funds peer support to individuals, London café group meetings, and outreach to London MBUs and perinatal mental health teams to raise awareness of our services and ensure smooth referral pathways for women affected by PP. It also includes creative workshops for women recovering from PP in later years of the project.

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18. MOVEMENT IN FUNDS - continued

DHSC Suicide Prevention Grant
APP was awarded a grant from the Department for Health and Social Care's (DHSC's) Suicide Prevention Fund (£123,668 for expenditure from January 2024 to March 2025) for a project called reducing suicide in mothers with postpartum psychosis and supporting bereaved families. The project aimed to help to prevent suicide nationally through a) delivering peer support services that reduce the risk of suicide in those affected by PP; b) raising awareness of postpartum psychosis, amongst health professionals, antenatal educators and expectant families; c) establishing a bereavement peer support service for partners and family members of those who die following PP; and d) providing staff and volunteers suicide awareness and bereavement training.

David Riddell Memorial CIO Suicide Prevention Grant
In May 2025, The David Riddell Memorial CIO awarded APP a grant of £25,000 to build on work previously been funded by the DHSC Suicide Prevention Grant over 2025 and 2026. The work is focused on 3 areas: peer support; APP's antenatal education campaign and support for bereaved families. The project funded staff time on peer support, particularly for bereaved families, volunteer training and distributing our antenatal toolkit.

Legal and Human Rights project
In December 2024, APP ran a Big Give match funding campaign to raise donations for our work on legal and human rights issues faced by women and families after they experience PP. In 2025 we also secured grants from the Simon Gibson Charitable Trust and the Sir Halley Stewart Trust for this work. In 2025 we began developing web content based on the information gathered from our peer support survey and interviews in 2023 and 2024. The content will be completed in 2026, and staff and volunteers will be trained in signposting women and families that encounter legal and right based issues as a result of experiencing PP.

Dads & Co-parents Peer Support
In May 2024, APP ran a Big Give match funding campaign to raise donations for our work with dads, co-parents and grandparents. Our dads, co-parents and grandparents peer support project connects dads and co-parents whose partner has PP, and grandparents whose child, or child's partner has had PP, with trained volunteers who have 'been there', via telephone, video call or email support. A monthly group video call for dads and co-parents provides a supportive and informal group for partners to meet others, share what has helped them and their family through the experience and provide a friendly listening ear. A quarterly video call offers similar support for grandparents. Our peer support staff and trained dad, co-parent and grandparent volunteers also provide support on our online forum. Big Give fundraising income was spent on this project in 2024.

Diverse Communities Peer Support
APP successfully applied to the Big Give's Women and Girls Match Fund to run a match funding campaign in October 2023. The campaign raised more than £5,000, including match funding, for our work supporting and improving the mental health of women from Black and Asian backgrounds who experience PP and their family members. The diverse communities peer support project connects women with trained volunteers who use their personal experiences of PP from the perspective of a Black or Asian woman to provide telephone, video call or email support. Group calls, like our online meet-up for Muslim women who've experienced psychosis in the perinatal period, offer safe places for women to share what helped them and their family through PP. The donations were spent on the project in 2023 and 2024.

18. MOVEMENT IN FUNDS - continued

Voices From The Frontline/Rosa
In 2023, APP received a grant (£7,000) from Rosa's Voices from the Frontline fund to support our campaign to ensure all women in the UK who develop postpartum psychosis (PP) have access to a Mother and Baby Unit (MBU) from February 2023 to January 2024. The grant allowed us to make our case about the need for better MBU provision by highlighting the impact on women who aren't treated in an MBU and their families. We did this by showcasing families' voices across the year, galvanising public support through the media (digital, print, TV and radio) and bringing the human impact of inequality in service provision to life for both politicians and commissioners. We provided support for our Storytellers through café groups, particularly in Wales, Scotland and Northern Ireland. Women attending café groups were supported to place media stories, contact and influence local MPs and key decision makers, develop petitions and letters and work with other Third Sector organisations.

19. EMPLOYEE BENEFIT OBLIGATIONS

The charity operates a defined contribution pension scheme. The assets of the scheme are held separately from those of the charity in an independently administered fund. The pension cost charge represents contributions payable by the charity to the fund and amounted to £34,754 (2024: £33,497) Contributions totalling £nil (2024: £nil) were payable to the fund at the balance sheet date.

20. RELATED PARTY DISCLOSURES

During the year, Trustees made donations to the charity totalling £3,450 (2024: £3,450).