

Neighbourhood Doulas

Annual Report and Impact Summary 2025

When a woman faces birth without a trusted person beside her, compassionate support can change how she experiences that moment. We bring together care, advocacy and practical help so that her voice, choices and wellbeing remain at the centre.

No woman should birth alone.

Dignity, safety and support through pregnancy, birth and early motherhood.

“My doulas were extremely helpful. They understood my need and helped me prepare for the birth of my baby. They stayed connected even when I wasn’t communicating due to my struggle with mental health. It was an amazing service.”

Neighbourhood Doulas Beneficiary

185
Women supported through Gentle Beginnings

231
Women attending Birth Education and Advocacy

79
Women supported during labour and birth

92
Women receiving postnatal support

Programme figures overlap and should not be added together as a count of individual women.

Reporting year: 1st January to 31st December 2025. Includes programme and partnership updates to October 2026 and selected stories from our wider work.

Safeguarding note: in line with our safeguarding commitments, names and identifying details have been removed or changed to protect the women and birthing people, babies and families we support.

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About this Report
The report brings together 2025 activity and financial information with women's experiences from our wider work. Programme, research and partnership updates to October 2026 are identified separately. Individual stories illustrate our approach and do not form an additional count of 2025 beneficiaries.

A Note on Terminology
For the purposes of this report, the term 'women' is used to refer to all individuals who are pregnant, giving birth, or accessing maternity services, regardless of their gender identity.

Dear Friends,

Pregnancy asks a great deal of any woman. When it is lived alongside homelessness, abuse, poverty or isolation, even the ordinary preparations for a baby can become a struggle for safety, understanding and support.

The women who come to Neighbourhood Doulas bring courage, knowledge and hopes for their children. They also bring circumstances that no one should have to navigate alone. Some are preparing to give birth without a safe partner or family nearby. Others are trying to understand unfamiliar services, recover from trauma or make themselves heard in a language that is not their own.

> Our founding conviction is simple: no woman should face pregnancy or birth alone because she is homeless, experiencing violence or poverty, or separated from family and community.

We put that promise into practice through relationships. A doula who listens without judgement. An advocate who helps a woman understand her options and communicate her wishes. Someone who stays connected when poor mental health makes it difficult to respond. Practical help that makes getting to an appointment, preparing for a baby or returning home from hospital more manageable.

In 2025, 185 women received Gentle Beginnings support, 231 attended Birth Education and Advocacy classes, 79 received direct support during labour and birth, and 92 received postnatal support. Some women used several services, reflecting the continuity of care their circumstances required.

We also strengthened our Health Advocacy Project and supported pregnant women through our Healthy Lifestyles Perinatal Programme. Our contribution to Imperial College London maternity care research informs this work. Across our work, 195 volunteers gave 3,217 hours of time, care and practical support.

Each of these contributions matters because the experience of being listened to can be profoundly different from the experience of facing uncertainty alone. Our role is to support women to make informed choices, recognise their own strengths and approach birth and early motherhood with someone dependable beside them.

This year's recognised income of £164,282 and expenditure of £143,645 left net income of £20,637 and year-end funds of £83,897. Stewarding these resources carefully is part of our responsibility to every woman who places her trust in us.

To the women who shared their experiences, and to everyone who gave time, expertise, funding or encouragement: thank you. Your contribution helps make compassionate, respectful support available at a moment when it can matter for a lifetime.

With gratitude and determination,



Carolyn Ouladzahra
Charity Manager
Neighbourhood Doulas



Opening Framework

A Message from our Trustees

This year has shown, more clearly than ever, why Neighbourhood Doulas is needed.

A woman's circumstances should never diminish her right to dignity in pregnancy and birth. Yet the women we support often face several pressures at once: insecure housing, domestic abuse, trauma, poverty, language barriers, poor mental health or the absence of a safe support network. Those with experience of care may enter motherhood without the family support others can rely on.

Our responsibility as trustees is to ensure that Neighbourhood Doulas responds with care that women can trust and an organisation capable of sustaining it. Compassion needs sound safeguarding, skilled coordination, financial oversight and support for the people delivering our services.

In 2025, the charity extended its reach across its main programmes. Alongside doula care and birth education, our health advocacy and wellbeing work responded to the barriers that can keep Black, Asian and minoritised ethnic communities from accessing and shaping healthcare. Our research contribution brought community experience into a wider discussion about maternity care.

We are grateful to our staff, doulas, advocates and volunteers for the patience and commitment this work requires. We also recognise the trust of the women who invite us into their lives. Their experiences must continue to shape the services we provide and the decisions we make.

Our priority is to protect the depth and quality of support as the charity develops. This means strengthening our funding, partnerships and organisational systems, valuing lived experience and maintaining a clear focus on women's dignity, safety and voice.

Yasmin Autwal, Martina Manakova and Mitchelle Ajida

Board of Trustees

Our Vision

A society where every woman, baby and family can experience pregnancy, birth and early motherhood with dignity, safety, voice and support, regardless of housing status, immigration status, poverty, language, ethnicity, trauma, social care experience or background.

Our Mission

Neighbourhood Doulas promotes and protects the physical and mental health of women and their children during pregnancy, labour, birth and early parenting, with a focus on those who are socially and economically disadvantaged, through trained birth companions offering practical and emotional support, advocacy and evidence-based childbirth information.



Our Values

Dignity

We recognise each woman's strengths, wishes and identity, alongside the support she needs.

Safety

We offer calm, consistent, trauma-informed support, grounded in safeguarding.

Voice

We help women understand their rights, express their choices and participate in decisions.

Compassion

We respond with warmth, patience and respect, including when trust takes time.

Equity

We challenge barriers to safe, respectful care for marginalised women and communities.

Community

We create opportunities for connection, reassurance and mutual support.

Trust

We earn trust through reliability, honesty and the way we listen.

Achievements at a Glance

The 587 total is the sum of the four main programme counts. Women may appear in more than one programme; it is not a count of 587 different women, appointments or births.

185
Received Gentle Beginnings Support
(up from 147 in 2024)

231
Birth Education and Advocacy Attendees
(up from 185)

79
Received Direct Labour and Birth Support

92
Received Postnatal Support
(up from 67)

195
Volunteers Supported Our Work
(up from 112)



3,217
Volunteer hours contributed
(up from 1,847)

587
Core service engagements across main doula and education programmes

£164,282
Total income recognised

£143,645
Total expenditure

£20,637
Net income for the year

£83,897
Total funds at year end

The Need for Our Work

Maternity care must recognise the risks a woman faces beyond the hospital doors. Information about birth can be difficult to understand or act on when it is provided in an unfamiliar language. Leaving hospital with a newborn can feel overwhelming when there is no trusted person to call, no safe place to recover and little money for essentials.

The circumstances surrounding a birth are really important

For the women Neighbourhood Doulas supports, pregnancy is often inseparable from the pressures surrounding it. Poverty, housing insecurity, domestic abuse, immigration uncertainty, racism, trauma, care experience and poor mental health can overlap. Each can create barriers to seeking help, accessing care and having concerns heard. Together, they can leave a woman facing pregnancy, birth and early motherhood feeling unseen, unsupported and alone. No woman should have to navigate these challenges without compassionate, dependable support.

Who we support.

We support women living in deprivation and those facing multiple disadvantages, including Black and Asian women experiencing racialised maternity inequity. In 2025, our wider services supported **more than 450 women and babies**, including **112 women experiencing domestic violence, 53 asylum-seeking or refugee women and 39 with care experience**. These groups overlap, showing how several inequalities can affect the same pregnancy and compound barriers to care.

When support is hardest to reach.

A woman may miss an appointment because she cannot afford the journey or understand the letter. She may be afraid to disclose abuse, uncertain about her rights or exhausted by repeating her story to different services. Previous experiences of being dismissed or misunderstood can make asking for help feel risky.

Women may be living in temporary accommodation, carrying trauma from abuse or displacement, and unable to afford travel, food or mobile data. Racism, language barriers, cultural misunderstanding, digital exclusion and previous harmful experiences can undermine trust. Fear about housing, immigration status or statutory involvement can make it harder to ask questions or challenge decisions. Good support must recognise these realities and respond to the individual woman.

The Need for Our Work

Wider evidence of maternity inequity: 2026 update.

MBRRACE-UK's September 2026 update shows that, in England in 2022 to 2024, Black women had a maternal mortality rate 2.72 times that of White women. Women in the most deprived fifth of areas faced almost twice the rate of those in the least deprived fifth.

Imperial College Healthcare's 2026 maternity engagement found that some women received appropriate care only after someone advocated for them. Language barriers, trauma and isolation could leave women struggling to be heard, reinforcing the need for our support.

Source: Imperial College Healthcare NHS Trust, Maternity Services Engagement, Verve Communications, June 2026, p. 34 (PDF page 36).

The difference a trusted relationship can make.

A doula or advocate gives women someone they can turn to, who listens without judgement and remains alongside them through uncertainty and change. Within this trusted relationship, women have time to ask questions, share concerns and explore what matters to them. Birth education helps them prepare and express their preferences. Practical assistance eases immediate pressures, while postnatal support offers reassurance through recovery and early parenting.

These forms of support belong together because women's needs rarely exist in isolation. A woman who understands her choices may still need an interpreter to communicate them. A mother preparing to leave hospital may also need baby essentials, safe transport home and someone to help her access further support. Our approach considers these needs together, recognising how closely a woman's wellbeing is connected to her everyday circumstances.

> Every woman deserves the opportunity to approach birth with her voice heard, her choices respected and someone she trusts beside her.

Our work responds to the challenges women face while recognising their strengths, resourcefulness and right to shape their own lives. We take time to understand what each woman needs and what she wants for herself and her baby. This combination of practical care, dependable relationships and respect for women's decisions is at the heart of our support.

Our Story: Rooted in Lived Experience

Neighbourhood Doulas grew from lived experience of pregnancy, single motherhood, homelessness and isolation. That first-hand understanding shaped principles which still guide us: support must be free, practical barriers must be addressed, and every woman's dignity, voice and choices must remain central.

In 2017, Carolyn Ouladzahra and her friend Karolina Hardy founded Calendoulas with a shared conviction: no woman should face pregnancy or birth alone because she is homeless, experiencing violence or poverty, or separated from family and community. Their work became Neighbourhood Doulas in 2019, with the organisation subsequently registering as a Charitable Incorporated Organisation in December 2023.

Carolyn brought her own experience of navigating pregnancy and early motherhood alone in temporary accommodation. Her understanding of the uncertainty, isolation and barriers women can face continues to shape our approach.



When Karolina died from cancer in 2020, Carolyn committed to carrying their shared vision forward. Karolina's legacy remains part of the charity's purpose and the compassionate, dependable support offered to women and their babies.

Today, that founding commitment shapes our response to health inequities. Through culturally responsive, trauma-informed doula support, birth education, bilingual advocacy and practical assistance, we help women overcome barriers to care and have their needs and choices heard. Support with essentials, food, transport and interpreting recognises that a woman's wellbeing is inseparable from her everyday circumstances.

Lived experience continues to inform our leadership, governance and delivery, alongside professional training, safeguarding and reflective supervision. Our purpose remains rooted in the belief that every woman deserves dignity, informed choice and someone she trusts beside her.

What Makes us Unique?

Our approach addresses health inequities by bringing emotional care, practical help, accessible information and advocacy into a connected relationship. Free support, bilingual communication and attention to practical barriers help women access care and express their needs, rights and choices.

Lived experience in our leadership and delivery

Almost all members of our staff team, board and advisory panel have personal experience of inequalities affecting the women we support. Collectively, this includes migration, racism, poverty, temporary accommodation, lone parenting, domestic abuse, trauma and unequal maternity care. Former service users contribute to governance and delivery, bringing direct knowledge of our support into decisions about its future. Community insight works alongside professional training, safeguarding and reflective supervision.

Our Approach and Why it Matters

Presence at significant moments

Pregnancy, labour, birth, and the first weeks with a baby can be times of uncertainty and change. A calm, trusted person offers reassurance and helps a woman communicate what matters to her.

Understanding the whole woman

We recognise how housing, income, immigration status, language, racism, trauma, domestic abuse, mental health and care experience can shape pregnancy and recovery.

Doula care alongside advocacy

Emotional support is connected to birth preparation, evidence-based information, practical help and support to navigate services.

Attention to unequal access

Our Health Advocacy Project and perinatal programmes respond to the barriers faced by Black, Asian and minoritised ethnic communities.

Language and cultural understanding

Bilingual advocates, interpreters, multilingual resources and culturally sensitive support help women ask questions and communicate with greater confidence.

Trust built through consistency

For women who have experienced exclusion, abuse or disbelief, trust needs time. We approach relationships with patience, reliability and respect.

Connection beyond an appointment

Peer support, community links and postnatal contact help women find reassurance and a stronger sense of belonging.

Learning that reaches beyond our service

Research and partnership work allow us to share women's experiences and help services understand where communication, access and care need to improve.

Together, these strengths allow us to respond to immediate need while supporting confidence, connection and women's ability to make informed decisions.



The Journey

Our Theory of Change

No Woman Should Birth Alone
Dignity, safety and support through pregnancy, birth and early

The Problems We Face

Women face pregnancy alongside poverty, homelessness, domestic abuse, trauma, insecure immigration status, language barriers, poor mental health and care experience

Black, Asian and minoritised ethnic communities face barriers to safe, timely and respectful healthcare

Too many women are expected to navigate complex maternity, health, housing and safeguarding systems alone

What We Provide

Gentle Beginnings one-to-one doula support

Birth Education and Advocacy classes

Direct labour and birth support

Postnatal care and recovery support

Health Advocacy Project

Healthy Lifestyles Perinatal Programme

Practical essentials, interpreters, signposting and safe discharge support

Research and system learning

This Leads To

Women understand their rights and choices

Women communicate more confidently with professionals

Women stay connected to maternity and healthcare

Women feel calmer, safer and less isolated

Families access culturally sensitive advocacy

Pregnant women build healthier habits and peer connection

Community experience informs better services

Resulting In

Women, babies and communities facing inequality are seen, heard, respected and supported

More women experience pregnancy, birth and early motherhood with dignity, safety and voice

Maternity and healthcare systems become fairer, safer and more compassionate

No woman should birth alone

Which Contributes To

Safer and more dignified birth experiences

Improved maternal confidence and emotional wellbeing

Better access to healthcare

Stronger postnatal recovery and early bonding

Reduced isolation

Greater trust between communities and services

More responsive maternity and health systems

Our Principles

Dignity

Every woman is seen as a whole person.

Safety

Support is trauma-informed, calm and consistent.

Voice

Women understand choices and are heard.

Equity

We challenge barriers to fair care.

Community

Connection reduces isolation and builds resilience.

What We Do

Support through pregnancy, birth and early motherhood.

Our programmes respond to different moments on a woman's journey. Women may use more than one service as their needs change, with emotional care, information, advocacy and practical support working together.

How Women Reach Us

Around 98% of our referrals in 2025 came from NHS safeguarding midwives. Maternity and safeguarding teams at more than 24 hospitals across London refer women, alongside hostels, temporary accommodation providers, GPs, local authorities and community organisations. These routes reach women without a safe birth partner whose pregnancies intersect with racial inequity, deprivation, abuse, homelessness, mental ill health or insecure immigration status.

Support is free and begins with listening.

Gentle Beginnings

Trusted support through pregnancy, birth and early motherhood.

Gentle Beginnings offers trusted one-to-one doula support through pregnancy, birth and early motherhood. It gives women space to talk about their hopes and worries, prepare for what lies ahead and find reassurance in a consistent relationship. For a woman facing several pressures at once, having someone who listens, explains and helps her stay connected to care can make the next step feel more manageable.

185

Women received Gentle Beginnings support in 2025.

The difference it makes?

Women who might otherwise face pregnancy alone have someone beside them who listens, explains, reassures and advocates. This support reduces fear, strengthens confidence and helps women stay connected to care.

Birth Education & Advocacy

Our Birth Education & Advocacy classes help women understand birth, their rights and the choices available to them.

We create space for questions that may otherwise go unasked and support women to express preferences and take part in decisions about their care. Knowledge becomes more useful when a woman has the confidence and support to use it.

231

Women attended Birth Education & Advocacy classes in 2025.

The difference it makes?

Women are better able to ask questions, express preferences, understand their options and take part in decisions about their care.

Direct Labour & Birth Support

During labour and birth, a doula offers calm, compassionate companionship, reassurance and support for communication.

She listens to the woman's wishes and helps her express them. At an intense and deeply personal moment, our commitment is to help each woman feel supported, respected and less alone.

79

Women received direct labour and birth support in 2025.

The difference it makes?

Women experience birth with someone beside them who understands their wishes, respects their choices and helps them feel safer, calmer and more in control.

Postnatal Support

Care continues after the baby is born. We offer reassurance, practical help and connection as women recover, adjust to early parenting and begin building a relationship with their baby.

This contact matters especially when a mother is exhausted, isolated or returning to uncertain accommodation without family support.

92

Women and birthing people received postnatal support – up 37% on 2024.



The difference it makes?

Women are supported after birth, not forgotten. They receive reassurance, practical help and connection at a time when loneliness, exhaustion and anxiety can be overwhelming.

Wider Support: Health Advocacy & Healthy Lifestyles

Bilingual advocacy helps people from minoritised communities access healthcare, understand their rights and communicate with professionals.

Advocates support people to ask questions, understand options and navigate services. The barriers people describe also inform the learning we share with NHS partners, connecting individual support with efforts to improve access and communication.

The difference it makes?

People who may otherwise be overlooked, misunderstood or excluded are supported to access care, ask questions, understand options and have their experiences fed back into the systems that shape healthcare.

Healthy Lifestyles Perinatal Programme

Our Healthy Lifestyles Perinatal Programme is a free six-week programme that supports pregnant women to improve their physical and emotional wellbeing through healthy, realistic and sustainable lifestyle changes.

Our six-week programme gives pregnant women space to explore physical and emotional wellbeing, health knowledge and practical habits for pregnancy and beyond. It brings wellbeing support and peer connection together, recognising that women need both useful information and a safe place to share the pressures they are facing.

The difference it makes?

Women leave with greater confidence, improved health knowledge, stronger peer connection and practical tools to support wellbeing during pregnancy and beyond.

Practical and Essential Support

For many women, the barriers to safe pregnancy and early parenting are practical as well as emotional. They may need baby clothes, nappies, transport, food, interpretation, mobile data, help understanding letters, or support preparing for hospital discharge.

Where resources are available, we help with mother and baby essentials, food, transport, interpreters, signposting and safer discharge arrangements. Practical help can ease immediate pressures and allow more room for recovery, bonding and early parenting. We approach these needs with discretion and dignity.

The difference it makes?

Basic needs are met, stress is reduced and women are better able to focus on recovery, bonding and caring for their babies.

Nurture to Birthwork: Pathway to Employment

Starting in October 2026, Nurture to Birthwork extends our support into skills, opportunity and employment. The programme will offer free doula training, mentoring and supervised practice to former service users and other women who face barriers to work, helping them develop the knowledge and confidence to explore a future in birth support.

Through supported learning and practice, participants will be able to build on their strengths and lived experience as they work towards paid employment, independent practice or further learning. The programme recognises the insight that women can bring to compassionate, culturally responsive care, while providing training and supervision to help them develop their practice.

At its heart is a powerful possibility: a woman who has received support may, if she chooses, become the trusted person beside another woman. Nurture to Birthwork aims to widen opportunity for participants and strengthen the community of people offering sensitive, informed birth support.

Programme update for October 2026. Nurture to Birthwork is not included in the 2025 activity totals or presented as a 2025 outcome.





Beyond the Individual

Our Output & Impact

Through our work in 2025, women and birthing people, birthing people, babies, families and communities were supported to feel safer and less alone, understand their rights and choices, communicate more confidently with professionals, access bilingual advocacy, improve wellbeing, connect with peers, recover after birth with dignity, and feel heard, respected and empowered in decisions about their care.

Programme Area	2024	2025 Output (against 2024)
Gentle Beginnings	147	185 women supported (+26%)
Birth Education & Advocacy	185	231 women attended (+25%)
Labour & Birth Support	63	79 women supported (+25%)
Postnatal Support	67	92 women supported (+37%)
Total Service Engagements	462	587 women supported (+27%)

Some women accessed more than one form of support, so these figures represent service engagements across these four programmes rather than the total number of unique women supported across the charity. Growth percentages are rounded to the nearest whole number.

Other Support and Volunteer Contributions

Alongside these programmes, the Health Advocacy Project provided bilingual advocacy supporting fairer access to healthcare, and the Healthy Lifestyles Perinatal Programme offered a six-week wellbeing programme for pregnant women. In 2025, 195 volunteers contributed 3,217 hours to our work.

What our Support is Designed to Make Possible

- → **Safety and Reassurance:** Women have someone to turn to, space to discuss concerns and support through pregnancy, birth and recovery.
- → **Voice and Informed Choice:** Women understand their rights and options, prepare questions and communicate their preferences to health professionals.
- → **Access and Practical Stability:** Advocacy, interpretation, signposting and practical help support women to navigate maternity, health, housing, safeguarding and community services.
- → **Wellbeing and Connection:** Women can explore healthier habits, connect with peers and seek reassurance during early parenting and recovery.
- → **Confidence in Motherhood:** Support offers space for questions, bonding and the gradual development of confidence in caring for a baby.

How We Changed Lives

Through our work in 2025, women, babies, families and communities were supported to:

- → feel safer and less alone during pregnancy, birth and early motherhood
- → understand their rights, choices and maternity care options
- → communicate more confidently with health professionals
- → access bilingual, culturally sensitive advocacy
- → navigate healthcare, maternity, housing, safeguarding and community services
- → improve physical and emotional wellbeing during pregnancy
- → build healthier habits for themselves and their babies
- → connect with peers and reduce isolation
- → recover after birth with greater dignity and reassurance
- → bond with and care for their babies with greater confidence
- → feel heard, respected and empowered in decisions about their care



Beyond the Silence

Women's Experiences

The testimony at the beginning of this report describes a service that stayed connected when poor mental health made communication difficult. The stories on the following pages show what this commitment can involve: advocacy for safer accommodation, practical help after birth and care that recognises a woman's culture, grief and identity.

Programme totals describe delivery. The individual accounts that follow offer insight into women's experiences of support; they are not outcome measurements for the whole cohort.

A Safer Place to Begin Motherhood

Advocacy, continuity and a trusted relationship

Sabina was pregnant, recently widowed and seeking asylum. Trauma and repeated displacement had affected her mental health, and she was living in unstable, unsafe accommodation. At more than 40 weeks pregnant, she was moved without warning to a basement hotel room with no working lift, inadequate facilities and little room to prepare for her baby.

With limited English and few resources, Sabina faced practical barriers to meeting even basic needs. She did not have some of the essentials required for the hospital. The conditions around her were intensifying her distress at the very moment she needed stability and reassurance.

Bringing support together

A trauma-informed Neighbourhood Doulas team, including an interpreter, worked to connect the services around Sabina. They advocated with maternity and social services, immigration services and solicitors so that her concerns could be understood and acted upon. Persistent contact with her support network and the hotel helped secure a different room with the space, light and ventilation she and her baby needed.

The team arranged a referral to Little Village for baby essentials and provided a car seat and pram. Doulas supported Sabina through labour and birth, brought culturally appropriate meals to hospital and offered breastfeeding support and a birth debrief. They helped with her discharge and provided groceries, nappies and formula in keeping with her decision to mix feed.

Care that continued after birth

After 12 weeks of postnatal support, Sabina felt safer and more confident in motherhood. She was connected with her local community and knew where to find her children's centre and the support it offered. Her story shows how practical help, advocacy and a relationship sustained over time can work together.

> “I am so grateful to my doulas they helped and supported me so much in many ways and never stopped fighting for me. They stayed connected with me when I wasn't communicating due to my struggle with mental health. I felt reassured and less alone. Such an amazing service that I will cherish”

Sabina, Neighbourhood Doulas Beneficiary

Care When it Matters Most

A warm, safe place after a caesarean

Two days after a caesarean birth, a mother who had survived domestic abuse was preparing to move accommodation with her newborn. The expected support did not arrive, and her new accommodation was not ready. She had already been booked out of her previous room. It was winter, and she was waiting in a meeting room with her baby and her belongings in bags.

When she contacted her doula that evening, the doula visited and negotiated for her to remain until the next morning while alternative accommodation was prepared. The heating was switched back on, and food and warm blankets were provided. Neighbourhood Doulas updated social services so that support could continue.

The immediate difference was concrete: warmth, food, somewhere to remain overnight and a trusted person helping her navigate the next step.

> “They have shown me great love and respect, this is something I will never forget and gives me hope that there are still many people in the world who are kind and helpful”
>
> Neighbourhood Doulas Beneficiary

> “She was with me when I was really sad and feeling lonely.”
>
> Neighbourhood Doulas Beneficiary

Bringing support together

Another woman, a survivor of domestic abuse, was grieving the deaths of her mother and sister. Following an unsuccessful induction, she chose a caesarean. Health complications meant she needed more than 24 hours in a High Dependency Unit and a longer hospital stay.

Neighbourhood Doulas provided emotional and practical support throughout. When she needed help moving to an assisted living placement, her doula coordinated with her and her social worker to arrange the move of her belongings. A second doula who shared her heritage brought food and toiletries that reflected her culture and identity. She described feeling seen through these thoughtful acts of care.

“

When they accept a doula referral I feel like I can relax a little as I know they will not feel so alone”

Teresa Driver, Lead Safeguarding Midwife, UCLH

The midwives at UCLH sing the praises of your team of fantastic doulas”

Charlotte Bannister, Lead Vulnerable Women’s Safeguarding Midwife, St Mary’s Hospital

Our People and the Partners who Trust Us

Health advocacy: bringing experience into view

Our bilingual advocates help women understand healthcare, stay engaged with services, communicate with professionals and exercise their rights. They take time to explain information, listen to concerns and support women to express their needs, helping to build confidence and strengthen trust.

A letter a woman cannot understand, a question left unanswered or a concern she feels unable to express can leave her anxious, excluded and uncertain about her care. Our advocates bring these experiences into conversations with NHS partners, showing where communication breaks down, trust is weakened and support becomes difficult to access. This shared learning helps partners identify practical changes that make care clearer, more accessible and more responsive to the women whose voices too often go unheard.



Volunteers

In 2025, 195 volunteers contributed 3,217 hours to Neighbourhood Doulas. Their time helped us reach women, respond to practical needs and sustain the personal contact at the heart of our work.

Volunteers supported our work through:

- Gentle Beginnings doula support
- Antenatal and postnatal check-ins
- Direct labour and birth support
- Birth debriefs
- Collection and distribution of essential mother and baby items
- Food and care parcel support
- Safe discharge support from hospital
- Feedback collection and follow-up calls
- Community connection and signposting
- Administrative and programme support

Behind these activities is a considerable gift of attention and care. Strong coordination, safeguarding and support for volunteers remain essential to making that contribution dependable for women and sustainable for the people giving their time.

At a glance

195
Volunteers

3,217
Volunteer Hours

74%
More volunteers and volunteer hours in 2025 (vs 2024)

Research & Shared Learning

Research and Partnership Update: October 2026

Neighbourhood Doulas contributed to maternity care research led by Imperial College London, focused on improving experiences for Black, African, Caribbean and mixed-Black families within the North West London Integrated Care System. The work brought together health professionals, local authorities, voluntary and community organisations and community members to identify priorities for change.

Contributing to Imperial College London Research

Neighbourhood Doulas contributed to maternity care research led by Imperial College London, focused on improving experiences for Black, African, Caribbean and mixed-Black families within the North West London Integrated Care System. The work brought together health professionals, local authorities, voluntary and community organisations and community members to identify priorities for change.

The themes reflected concerns heard in our frontline work: culturally competent care, trusted advocacy, clearer communication, mental health support and community-centred approaches. Our contribution brought women's and communities' experiences into this wider conversation about maternity care.

Our contribution to published North West London co-production research connects this learning with wider maternity practice. The study, based on workshops held in 2024, found that community priorities for advocacy and mental health support were not reflected in professional priorities, and that facilitation by people with lived experience was essential to building trust. This reinforces our approach to addressing health inequities through trusted advocacy, lived-experience leadership and support that recognises women's emotional and practical needs.

The MAMAH Study

Neighbourhood Doulas participates in the MAMAH study, which seeks to improve maternity experiences and outcomes for underserved migrant women in the UK. The project brings together research evidence, professional expertise and the perspectives of migrant women who have given birth in the UK. [1]

This work is closely connected to the circumstances of women we support, including those seeking asylum, facing financial hardship or navigating unfamiliar services. Participation offers a way to connect frontline experience with research into how maternity care can better meet women's needs. Listening to women's accounts of care is central to understanding what meaningful improvement should look like.

North West London Maternity Transformation Programme: 2026 Update

In 2026, we began discussions with patient and public partnership colleagues at Imperial College Healthcare NHS Trust to explore opportunities for focus groups and information sharing with the women we support. These activities remain at an exploratory stage. The aim is to ensure that women whose experiences are too often overlooked have opportunities to inform maternity services, while recognising the time, trust and resources that meaningful participation requires from women and community organisations.

[1] Further information: The MAMAH study

> Listening to one woman can improve the support she receives. Sharing what women tell us can help others understand how services need to change.

Partnerships for better Maternity Care

Integrated Perinatal Mental Health Support

Our work forms part of the local network supporting women's emotional wellbeing during pregnancy and after birth. The Royal Borough of Kensington and Chelsea and Westminster Integrated Perinatal Mental Health Pathway, published in May 2024, explicitly includes Neighbourhood Doulas among its community services. The pathway brings services together to help professionals recognise need and connect families with appropriate support. [2]

Our contribution centres on trusted relationships, advocacy, practical help and continuity. For women who find services difficult to approach or remain connected to, this support can help them feel heard and navigate the care available around them.

RBKC and Westminster Integrated Breastfeeding Plan

Neighbourhood Doulas contributes to collaboration on the design, development and implementation of the Integrated Breastfeeding Plan for 2025 to 2028. The plan follows WHO and UNICEF guidance and is organised around four pillars: protecting, promoting, supporting and normalising breastfeeding. [3]

The published plan recognises our partnership with Family Hubs and Early Help Services, including one-to-one infant feeding support, breastfeeding counselling and connections to ongoing community help. We bring the experiences of women facing disadvantage into this shared work, supporting access to sensitive, practical information and care that respects how each woman chooses to feed her baby..

A New Partnership with St Thomas' Hospital: 2026 Update

In 2026, we began a new partnership with St Thomas' Hospital, bringing Neighbourhood Doulas together for regular meetings with key professionals working in labour care at Guy's and St Thomas' NHS Foundation Trust (GSTT). These meetings provide opportunities to share learning and strengthen collaboration around women supported by both services.

Our shared aim is to improve women's experiences of birth. Together, we explore what is working well, where support could be better connected and how hospital teams and community doulas can work together to keep each woman's needs, wishes and preferences at the centre of her care.

This partnership extends our commitment beyond individual support, creating opportunities for women's experiences and frontline learning to inform more connected, compassionate and responsive maternity care.

[2] RBKC and Westminster Integrated Perinatal Mental Health Pathway (May 2024)

[3] RBKC and Westminster Integrated Breastfeeding Plan (2025 to 2028)

Learning from 2025 and Looking Ahead

1. Continuity matters

Women's needs cross the boundaries between pregnancy, birth, housing, mental health and recovery. Support must remain connected as their circumstances change.

2. Preparation gives women a stronger voice

Birth education creates time to understand choices, explore concerns and prepare to participate confidently in decisions about care.

3. Postnatal care needs deliberate attention

Recovery can be especially difficult without secure housing or a trusted support network. Continued contact after birth is an essential part of our approach.

4. Access depends on understanding and trust

Language, cultural context, communication and previous experiences of services shape whether women feel able to seek care and remain engaged with support.

5. Connection supports wellbeing

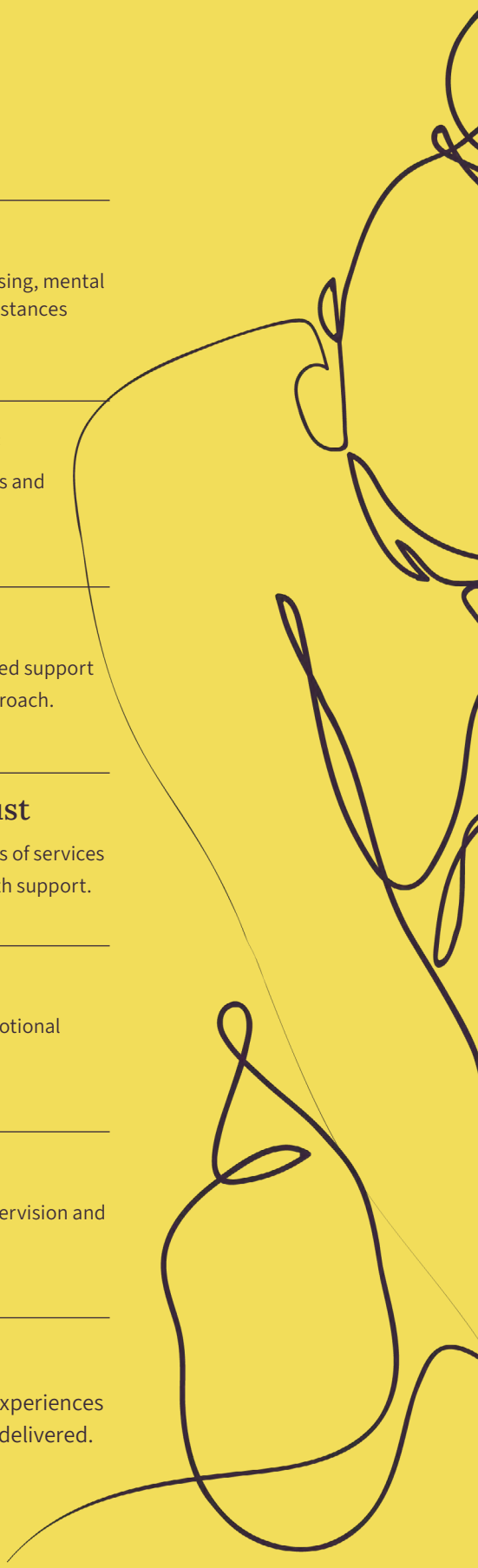
Women need safe, welcoming spaces to discuss health, nutrition, emotional wellbeing and the pressures of pregnancy without fear of judgement.

6. Our people need support too

Volunteers, doulas and advocates need thoughtful coordination, supervision and a sustainable organisation behind their work.

7. Frontline learning has wider value

Research and partnerships create opportunities for women's experiences to inform decisions about how maternity care is designed and delivered.



Building on this learning in 2026

Our priority is to sustain the quality and continuity of care as our reach grows. This means securing dependable funding, supporting our people and ensuring that women's experiences continue to shape our services. Growth must be matched by the capacity to listen carefully, respond consistently and provide support women can trust.

Working with the BME Health Forum to inform maternity care

Through our partnership with and participation in the BME Health Forum, we bring women's experiences into discussions with healthcare professionals and those responsible for improving services. In 2026, we raised specific concerns about maternity discharge during a health advocate session. Colleagues at Imperial College Healthcare NHS Trust agreed to look into these concerns, creating a direct opportunity for issues encountered through our support to receive attention.

These conversations also connected our advocacy with the Trust's maternity transformation programme. Its wider listening work highlighted the importance of clear communication, being listened to and understanding what will happen next in care. These themes reflect the barriers our advocates help women navigate, particularly when language, disability or other circumstances make services harder to access.

The Trust has also explored opportunities with Neighbourhood Doulas to organise focus groups and share information with the women we support. These remain potential future activities. Together, we are considering how women could contribute meaningfully, recognising the time, trust and resources participation requires and the need to protect our capacity to provide direct support.

By bringing specific concerns and practical insights into these discussions, we help partners identify where care could become safer, clearer and more responsive.

Strengthening collaboration with St Thomas' Hospital

In 2026, we began a new partnership with St Thomas' Hospital, bringing Neighbourhood Doulas together for regular meetings with professionals working in labour care at Guy's and St Thomas' NHS Foundation Trust. Our shared aim is to improve women's experiences of birth through shared learning and closer collaboration between hospital teams and community doulas, keeping each woman's needs, wishes and preferences at the centre of her care.

Nurture to Birthwork: opening a pathway to employment

Starting in October 2026, Nurture to Birthwork will offer a pathway towards employment through free doula training, mentoring and supervised practice. The programme will support women to build on their strengths and experience, develop practical skills and explore opportunities to support others through pregnancy, birth and early motherhood.

Across these developments, our purpose remains constant: to help women approach pregnancy, birth and early motherhood with dignity, confidence and someone dependable beside them.

Our Priorities

We will focus on sustaining Gentle Beginnings, developing Birth Education and Advocacy, deepening postnatal care and strengthening Health Advocacy and Healthy Lifestyles support. We will also strengthen volunteer coordination, supervision and partnerships so that our people have the support they need to provide dependable, compassionate care.

Securing sustainable funding, strengthening our evidence and building organisational resilience will underpin these priorities. As our reach grows, we will protect our capacity to listen to women, coordinate services well and maintain the trusted relationships on which our work depends.



Thank You & Take Action

Financial Overview

Financial resilience supports continuity. It helps the charity plan, coordinate services and remain dependable for women whose circumstances may be changing quickly. Our financial stewardship is therefore closely connected to the care we provide.

Financial Area	2025	2024
Total Income	£164,282	£137,975
Total Expenditure	£143,645	£74,715
Net Income for the Year	£20,637	£63,260
Cash at bank and in hand	£103,848	£65,436
Total funds carried forward	£83,897	£63,260
Unrestricted funds	£24,718	£15,217
Restricted funds	£59,179	£48,043

Neighbourhood Doulas entered the year with a positive funds position following its first reporting period as a Charitable Incorporated Organisation. Total funds brought forward at 1 January 2025 were £63,260, comprising unrestricted funds of £15,217 and restricted funds of £48,043.

During 2025, recognised income was £164,282 and expenditure was £143,645, resulting in net income of £20,637. Year-end funds increased to £83,897, comprising £24,718 in unrestricted funds and £59,179 in restricted funds. Restricted funding must be used for the purposes for which it was given.

Cash at bank and in hand was £103,848. Creditors falling due within one year totalled £19,951, including £12,340 in deferred income: £5,900 from KCF Funding, £3,750 from Westminster Funding and £2,690 from The Health Forum. Income received for future periods is recorded within creditors in line with the charity's accounting policies.

These distinctions matter when considering the resources available for future work. The cash balance includes amounts held for restricted purposes and future periods. Unrestricted funding gives the charity flexibility to sustain the coordination and organisational capacity behind its services.

As the charity develops, the trustees remain focused on appropriate reserves, sound financial controls and sustainable funding, including multi-year support wherever possible. Detailed financial statements and notes follow later in this report.

Celebrating our Community

Neighbourhood Doulas exists through the commitment of a whole community: women who share their experiences, doulas and advocates who build trust, volunteers who give time, staff who coordinate support, trustees who provide oversight, and partners and funders who make the work possible.

To the women who have allowed us to stand beside them: thank you for your trust. Your experiences, choices and feedback give our work its direction. To our volunteers, practitioners and staff: thank you for the patience, skill and humanity you bring. To our funders, NHS and safeguarding partners, researchers, community organisations and supporters: thank you for helping turn a shared belief into practical care.

No Woman Should Birth Alone *is a commitment we put into practice together, through time, trust, advocacy and care.*

How You Can Help

Your support can help a woman prepare for birth, find someone she trusts to stand beside her and receive care as she begins life with her baby. It can also help sustain the organisation that makes this support possible.

1. Fund Continuity of Care

Support Gentle Beginnings, direct labour and birth support, and postnatal care for women facing isolation and disadvantage..

2. Strengthen knowledge and voice

Fund Birth Education and Advocacy, bilingual health advocacy and our Healthy Lifestyles Perinatal Programme.

3. Invest in opportunity

Support Nurture to Birthwork from October 2026, helping women build skills and explore routes towards employment.

4. Give flexible funding

Help sustain coordination, safeguarding, supervision and the organisational capacity that connects our services.

5. Offer practical help

Donate suitable mother and baby essentials, volunteer your time or expertise, or introduce us to potential partners and funders.

What Your Gift Could Make Possible

Leaving hospital with a newborn should be a moment of reassurance. For a woman facing poverty or insecure housing, having food and essential baby supplies can ease immediate pressures and give her more space to recover and care for her baby. Larger gifts help sustain the trusted relationships, advocacy and practical support women need throughout pregnancy, birth and early motherhood.

Your Gift	What it could help provide
£100	Food and essential baby supplies for one woman and her baby as they leave hospital.
£500	Practical discharge packages for five women and their babies, helping meet immediate needs during the first days at home.
£1,000	Practical discharge packages for 10 women and their babies, extending this support to more families facing hardship.
£10,000	Help fund a combination of doula support, birth education, advocacy and practical assistance, giving women facing complex challenges someone dependable to turn to through pregnancy, birth and early motherhood.
£50,000	Make a substantial contribution to our core programmes and the coordination, safeguarding, supervision and skilled people behind them. Your support would help us remain responsive and dependable when women's circumstances are changing and their need for support is greatest.

Each discharge package would respond to the woman's circumstances and could include food, nappies, wipes and essential baby clothing.

Help a woman begin life with her baby with practical support, dignity and someone she can turn to.

These amounts illustrate what your donation could help provide. Flexible gifts also sustain the coordination, safeguarding and ongoing support that make this care possible.

For trusts, foundations and businesses, a substantial or multi-year gift can give us the stability to plan ahead, support our people and sustain the relationships women rely on.

To discuss supporting our work, contact **office@neighbourhooddoulas.org** or visit www.neighbourhooddoulas.org.

The Co-operative Bank
Neighbourhood Doulas
Account No: 6743562100
Sort Code: 089299

Trustees' Report & Financial Statement

Trustees' Report

Charity name:
Neighbourhood Doulas

Registered charity number:
1206223

Legal structure:
Charitable Incorporated Organisation

Principal operating address:
55 Hazlewood Tower
Golborne Gardens
London, W10 5DU

Telephone:
07563212668

Website:
www.neighbourhooddoulas.org

Email:
office@neighbourhooddoulas.org

Trustees

Yasmin Autwal
Martina Manakova
Mitchelle Ajida

Objectives & Activities

Neighbourhood Doulas exists for the public benefit, to promote and protect the physical and mental health of women and their children during pregnancy, labour, birth and early parenting, with a particular focus on women who are socially and economically disadvantaged.

During 2025, the charity continued to deliver trauma-informed perinatal support to women affected by poverty, homelessness, domestic abuse, trauma, insecure immigration status, language barriers, poor mental health and care experience, including care leavers.

The charity also delivered wider health advocacy and wellbeing activities to reduce health inequalities for Black, Asian and minoritised ethnic communities across Northwest London.

The charity's main activities included:

- Gentle Beginnings doula support
- Birth Education and Advocacy classes
- direct labour and birth support
- postnatal care and recovery support
- the Health Advocacy Project
- the Healthy Lifestyles Perinatal Programme
- practical support, information and signposting
- bilingual advocacy and support to navigate healthcare services
- contribution to maternity care research and system learning
- partnership working with NHS, maternity, safeguarding, housing, community, voluntary sector and academic partners

The trustees have had regard to the Charity Commission's guidance on public benefit when planning and reviewing the charity's activities.

Structure, Governance & Management

Neighbourhood Doulas is a Charitable Incorporated Organisation, regulated under the Charities Act 2011, governed by its constitution and registered with the Charity Commission for England and Wales.

Neighbourhood Doulas is governed by a Board of Trustees, which is collectively responsible for strategic direction, governance, financial oversight and compliance with statutory and regulatory obligations.

The Board meets regularly to review operational updates, financial reports, risk, safeguarding, fundraising, service delivery and strategic priorities. Day-to-day responsibility for the charity's operations is delegated to the Charity Manager, supported by the Operations and Programme Manager and the Support Coordinator.

Trustee Recruitment & Induction

Trustees are recruited through targeted outreach, sector networks and referrals from current or former trustees, staff and supporters. When vacancies arise, the Board considers the skills, experience and representation needed to strengthen governance. New trustees are subject to appropriate checks and receive induction into the charity's work, legal duties and internal policies.

Reserves Policy

The trustees review reserves regularly as part of financial planning and risk management, taking account of income reliability, committed expenditure, future obligations and the level of reserves needed to protect continuity of services.

Free reserves are defined as unrestricted funds not invested in fixed assets and not otherwise designated or committed. The trustees consider it prudent to maintain unrestricted free reserves equivalent to between three and twelve months of core operational costs.

At 31 December 2025, unrestricted funds stood at £24,718. Total funds were £83,897, including restricted funds of £59,179.

Principal Funding Sources

The charity's income during the year was primarily generated through grants and charitable donations. These funds supported frontline delivery, including Gentle Beginnings, Birth Education and Advocacy, labour and birth support, postnatal support, the Health Advocacy Project, Healthy Lifestyles work, practical essentials, safeguarding, volunteer support and organisational development.

The 2025 accounts show total donations and legacies of £164,282. This included individual donations of £2,318 and grants totalling £161,964.

Source	2025
Small donations individually less than £1,000	£2,318
Small grants individually less than £1,000	£2,176
Greenwich Funding	£3,750
Kensington & Chelsea Foundation Funding	£25,700
Tudor Trust	£50,000
Imperial Health Charity	£18,936
The Health Forum	£15,222
Kensington and Chelsea, BME Health Forum, Lottery	£4,930
London Wide	£30,000
Westminster, City of Westminster Charitable Trust	£11,250
Total donations, grants and legacies	£164,282

Independent Examiner's Report

Report of the Independent Examiner to the Trustees of Neighbourhood Doulas CIO

I report to the trustees on my examination of the accounts of Neighbourhood Doulas CIO for the year ended 31 December 2025.

Responsibilities and Basis of Report

As the charity trustees of Neighbourhood Doulas CIO, you are responsible for the preparation of the accounts in accordance with the requirements of the Charities Act 2011.

I report in respect of my examination of the charity's accounts carried out under section 145 of the Charities Act 2011. In carrying out my examination, I have followed the applicable Directions given by the Charity Commission under section 145(5)(b) of the Act.

An independent examination includes a review of the accounting records kept by the charity and of the accounting systems employed by the charity, together with a comparison of the financial statements presented with those records. It also includes consideration of any unusual items or disclosures in the financial statements and seeking explanations from the trustees concerning such matters.

The procedures undertaken do not provide all the evidence that would be required in an audit. Consequently, I do not express an audit opinion on whether the financial statements give a true and fair view, and my report is limited to the matters set out below.

Independent Examiner's Statement

I have completed my examination. Subject to the limitations upon the scope of my work, I confirm that no material matters have come to my attention in connection with the examination giving me cause to believe that in any material respect:

- accounting records were not kept in respect of the charity as required by section 130 of the Charities Act 2011
- the financial statements do not accord with those records
- the financial statements have not been prepared in accordance with the methods and principles of the FRS 102 SORP
- the financial statements do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008, 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

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 financial statements to be reached.

Signed

C. Liondaris

Christos Liondaris
Independent Examiner

Certified Public Accountants
1st Floor Woodgate Studios
2-8 Games Road
Cockfosters
Hertfordshire
EN4 9HN

Date: 30 September 2026

Financial Statements

Statement of Financial Activities for the Year Ended December 2025

	Unrestricted 2025	Restricted 2025	Total 2025	Total 2024
Donations and legacies	**£113,944**	**£50,338**	£164,282	£117,468
Other trading activities	**£0**	**£0**	£0	£20,507
Total income	**£113,944**	**£50,338**	£164,282	£137,975
Raising funds	**£8,567**	**£1,900**	£10,467	£2,346
Charitable activities	**£95,676**	**£37,302**	£132,978	£72,369
Other expenditure	**£200**	**£0**	£200	£0
Total expenditure	**£104,443**	**£39,202**	£143,645	£74,715
Net income for the year	**£9,501**	**£11,136**	**£20,637**	**£63,260**
Total funds brought forward	**£15,217**	**£48,043**	**£63,260**	**£0**
Total funds carried forward	**£24,718**	**£59,179**	**£83,897**	**£63,260**

Balance Sheet Summary as at 31 December 2025

	2025	2024
Cash at bank and in hand	£103,848	£65,436
Creditors falling due within one year	(£19,951)	(£2,176)
Net current assets	£83,897	£63,260
Total net assets	£83,897	£63,260
Restricted funds	£59,179	£48,043
Unrestricted funds	£24,718	£15,217
Designated funds	£0	£0
Total charity funds	£83,897	£63,260

Notes to the Financial Statements

For the Year Ended 31 December 2025

Accounting Policies

The accounts have been prepared on the accruals basis, under the historical cost convention, and in accordance with FRS 102 SORP, applicable to charities preparing accounts under current charity accounting requirements. The charity is a public benefit entity and the trustees confirm that it meets the public benefit requirements of the Charities Act 2011.

Income recognition

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

Expenditure recognition

Expenditure is recognised when there is a legal or constructive obligation to make a payment, it is probable that settlement will be required, and the amount can be measured or reliably estimated.

Fund Accounting

Unrestricted funds are available for use at the discretion of the trustees in furtherance of the charity's objectives. Restricted funds are subject to specific conditions imposed by donors, grant funders or the terms of a fundraising appeal, and must be used for the purposes for which they were given.

Deferred Income and Creditors

At 31 December 2025, deferred income totalled £12,340 and was included within creditors. Deferred income comprised £5,900 from KCF Funding, £3,750 from Westminster Funding and £2,690 from The Health Forum.

Staff Costs

Total salaries, wages and related costs for the year were £75,562, comprising gross salaries of £75,078 and employer pension contributions of £484. The average number of full-time staff employed during the year was three.

Trustee Remuneration

No trustees or persons connected with them received remuneration from the charity or any related entity during the year.

Thank You.



Neighbourhood Doulas CIO is a registered charity
Charity Number: 1206223

www.neighbourhooddoulas.org
office@neighbourhooddoulas.org

This Report and Accounts have been Approved by Board of Trustees

Trustee signature

Martina Manakova

Trustee Treasurer

M. Manakova

Neighbourhood Doulas CIO
55 Hazlewood Tower
Golborne Gardens London ,
W10 5DU

Date: 30 September 2026

Neighbourhood Doulas