

ACTION ON POSTPARTUM PSYCHOSIS

England & Wales · Charity number 1139925

Details

Other names	APP
Status	Registered
Legal form	Charitable company
Company number	07466643
Registered	2011-01-19
Register	View on the Charity Commission register

Contact

Address	Po Box 137 Swansea SA3 9BT
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Website	www.app-network.org

Activities

Objects: 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.TO ADVOCATE FOR PERINATAL MENTAL HEALTH SERVICES FOR WOMEN AND THEIR FAMILIES

Activities: We promote & protect the physical & mental health of women who have experienced Postpartum Psychosis & their families, through the provision of peer support & information. We work to advance the education of the public, & particularly health professionals, & promote research; publishing the useful results. We advocate for perinatal mental health services for women & their families.

Classification

- **How:** Provides Services, Provides Advocacy/advice/information, Sponsors Or Undertakes Research, Acts As An Umbrella Or Resource Body, Other Charitable Activities
- **What:** Education/training, The Advancement Of Health Or Saving Of Lives
- **Who:** Other Defined Groups, The General Public/mankind

Geography

- **Area of benefit:** UNDEFINED. IN PRACTICE, NATIONAL
- Northern Ireland
- Scotland
- Throughout England And Wales

Finances

Period end	Income	Expenditure	Assets	Employees
2024-12-31	£664,115	£618,630	£161,585	16
2023-12-31	£545,615	£547,564	£116,100	15
2022-12-31	£499,782	£572,195	-	-
2021-12-31	£439,098	£430,265	-	-
2020-12-31	£381,062	£323,895	-	-

Trustees

Name	Role	Appointed
Anna R Jones	Chair	2019-03-13
Dr Annette Bauer		2021-03-09
Dr Katherine Alice Sarah Adlington		2026-05-01
Dr Snehita Rahul Joshi		2026-05-01
Hannah Francis		2025-10-08
Professor Ian Richard Jones		2026-05-21
Tracey Cheryl Robinson		2023-07-20

Accounts

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 2024

**Action on Postpartum Psychosis
Trustees' Report and Unaudited Financial Statements
for the year ended 31 December 2024**

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**Action on Postpartum Psychosis
Reference & Administrative Details
for the year ended 31 December 2024**

TRUSTEES	A Bauer G S Berrisford C K Cho C Dolman S A Hind (resigned 2 December 2024) I R Jones A R Jones T C Robinson
CHIEF EXECUTIVE	J Heron
DIRECTOR OF FINANCE AND OPERATIONS	K Mullard
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
SOLICITORS (PRO BONO)	Howard Kennedy LLP No 1 London Bridge London SE1 9BG

**Action on Postpartum Psychosis
Reference & Administrative Details
for the year ended 31 December 2024**

BANKERS

HSBC Bank PLC
18 High Street
Burton on Trent
Staffordshire
DE14 1HU

The Cooperative Bank PLC
1 Balloon Street
Manchester
M60 4EP

Bath Building Society
15 Queen Square
Bath
BA1 2HN

Saffron Building Society
Saffron House
1A Market Street
Saffron Walden Essex,
CB10 1HX

Action on Postpartum Psychosis Trustees' Report for the year ended 31 December 2024

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 2024. 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.

Action on Postpartum Psychosis Trustees' Report for the year ended 31 December 2024

- **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 2024

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 2024 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 2024, we aimed to maintain and grow our national and regional peer support service by:

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- Offering online, in person, video call and café group support to all who need it nationally and via our NHS projects, and maintaining long term contact with those we support.
- Training new peer supporters at two training days, prioritising volunteers from diverse communities Northern Ireland, Scotland, Wales & NHS project regions; and continuing to develop ongoing training and creative and wellbeing activities for volunteers, building a strong, engaged, well supported volunteer community.
- Developing a bereavement support online group and one-to-one calls, training our first bereaved partner peer supporter and grandparent volunteer. Working with our volunteers and a consultant to better understand the support and information needs of bereaved partners and family members.
- Growing our diverse communities peer support, supporting staff to outreach into communities to educate about PP, using pieces on social media, and networking to identify more volunteers from Black, Asian, and other ethnic communities and LGBTQ+ backgrounds. To continue our Muslim women's group and to set up a Black women's café group once staff/volunteers have been identified. Funding for a diverse communities' Coordinator and project will be sought to further develop this work.
- Increasing attendance at café groups, building community and café group activities, developing protocols and resources for café group leaders.
- Developing initiatives to identify more partner volunteers, increasing staff capacity and awareness of the dads and co-parents project as funding allows.

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 2024, 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 second 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 (RCPsych) and strengthening new collaborations with GP bodies and antenatal educators, delivering tailored training & lived experience talks.
- Continuing to run specialist training on supporting partners and working with women from diverse backgrounds, using recorded content to develop our first two paid online modules.

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

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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 2024, 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:

- Developing media and communications for the main 'moments' across the year (for example Maternal Mental Health Awareness Week, Black Maternal Mental Health Week, World Mental Health Day, and Suicide Awareness Week); placing case studies in the media and social media to support APP campaigns, new projects, and to raise awareness of APP peer support, training and information resources.
- Supporting APP's relationship with: Ambassadors; Maternal Mental Health Alliance; National Suicide Prevention Alliance; Pregnancy & Baby Charities Network; NHS (influencers in perinatal mental health professionals, midwifery, health visiting, psychiatry); universities (key postpartum psychosis and PMH academics). Using the BBC Radio 4 appeal media campaign and other opportunities to engage our community and raise awareness of PP.
- Supporting engagement with & reporting on creative projects as staff capacity allows.

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 2024, 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; supporting calls for MBU beds in Northern Scotland; building good relationships with all MBUs, connecting and helping to amplify their social media content; sharing positive MBU stories to demonstrate their value; engaging with the North Wales/Chester MBU build, supporting Lived Experience engagement; and monitoring NHS England bed number commitments and responding to any risk of bed closures.
- Continuing APP's antenatal education class campaign: developing social media assets to convey PP information to pregnant women and partners and to raise awareness of the antenatal education toolkit to midwives, health visitors, antenatal educators and GPs; and repeat APP's YouGov survey at the end of 2024 and social media midwife survey to determine the impact of the campaign.

Research

In 2024, we aimed to continue to facilitate research studies of importance to women and families affected by postpartum psychosis, as capacity and funding allowed, by:

- Introducing an annual research gaps survey and promoting findings to universities/funders.
- Seeking funding for our research support infrastructure
- Finalising APP's MBU survey reports.

Fundraising and strengthening our capacity

In 2024, we aimed to strengthen our capacity to fulfil our charitable objectives through improving our internal systems to support sustainable growth. We planned to:

- Develop a more diverse fundraising base, stronger fundraising processes and increased grassroots income, in particular: delivering an effective Radio 4 appeal; building relationships with grassroots

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fundraisers, offering new events and activities; increasing our capacity for trust and foundation application writing; and identifying potential funding opportunities to develop APP as a research support facility.

- Further develop the data manager role - implementing more efficient processes to manage organisational data simply and effectively.
- Continue work on our First Point of Contact project, reviewing our beneficiary journey and information, supporting recruitment to research and long-term engagement with APP.
- Further develop our impact reporting
- Continue development as gold standard lived experience, family friendly employer.

Achievements and performance

Peer Support to affected women and families

In 2024, APP continued its national peer support service, expanding our work with dads and co-parents, families from diverse communities and bereaved families. We launched our fourth Insider Guide - 'Being a parent after Postpartum Psychosis' – providing valuable information for women and families affected by PP, produced a new webpage on becoming a grandparent after PP and continued working to develop information on legal and rights-based issues faced by women after PP. The new guide shares information and ideas from APP parents at children's various ages and stages of development. Face to face workshops and an online working group were used to inform the guide, alongside input from APP's staff and experts in child development and perinatal mental health. Feedback on the new guide from our social media followers included:

"Well done to...everyone who put this together - it's really useful and well written."

"I couldn't love a resource anymore. I would have given my eye teeth for this in 2010. Awesome doesn't even come close."

Overall, in 2024 APP supported 1,045 people, including women, partners, grandparents, and families (2023: 1062). An average of 218 people used our online peer support forum every month (2023:226), with the number of registered forum users increasing from 3,518 to 3,776. Coordinators and volunteers supported 381 people via email, telephone, video call, in person meet-up and café groups (2023: 338), which included 301 women (2023: 275), 46 partners (2023: 31), 23 grandparents (2023: 32), and 11 other family members/friends. Our NHS embedded partnership projects supported 393 individuals (2023: 335). 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.

We conducted our annual peer support user survey between late July and early October 2024, promoting it widely and repeating the new questions asked in 2023 about whether peer support had helped with specific elements of people's PP experience. Almost all respondents (99%) felt more supported since finding APP (2023: 99%); 95 percent felt less isolated (2023: 96%); 96 percent felt more informed about PP (2023: 97%), and 91 percent felt less negative about PP (2023: 87%). Meanwhile, 93 percent felt more hopeful about the future (2023: 94%), and 96 percent felt that APP had helped, or was helping, them to recover (2023: 97%). Nearly half of respondents (48%) said they might not be alive if they had not found APP's peer support services this year, a similar proportion to 2023 (46%) 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:

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"Under no uncertain terms, APP was a pivotal part of my recovery. It provided a safe environment where I felt a sense of belonging during my recovery." (survey respondent)

"It is so nice to feel a part of a community, to know others have been through a version of what you have, it validates the whole thing. I feel less alone knowing that I'm not the only one to have had this extremely scary experience." (survey respondent)

"The fact that APP are very welcoming and open about everything PP-related made me realise that there is nothing to be ashamed about having experienced PP. If others are out there talking about it and sharing their story, then so can I." (survey respondent)

The 2024 peer support survey again 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. (2023 in brackets)		Proportion of respondents with the symptom who found APP peer support had helped with this symptom (2023 in brackets)
Anxiety	85% (98%)	100% (96%)
Depression	73% (90%)	98% (98%)
Further episode(s) of psychosis	35% (36%)	88% (94%)
Ongoing bipolar illness	44% (37%)	85% (94%)
Intrusive thoughts	63% (71%)	86% (84%)
Suicidal thoughts	53% (51%)	94% (83%)

Our 2023 peer support survey had asked questions to explore whether our beneficiaries need more support and information on legal, rights-based and financial issues as a result of PP. Our peer supporters often discuss and signpost users to further support in this area, so we wanted to understand more about the prevalence of these issues. In 2024, we engaged a consultant who spoke to survey respondents in more depth about the issues they had reported facing and we began raising funds to take this work forward (see fundraising and internal capacity below).

Café groups and wellbeing activities.

Our ten monthly regional café groups continued to operate in Wales, Sussex & Hampshire, Yorkshire, Lancashire & 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 LGBTQ+ families met for the first time. We also ran a monthly dads and co-parents group, a quarterly grandparents' group, a quarterly Muslim women's group, a quarterly group for volunteers who manage an ongoing bipolar disorder or other mental health diagnosis, and a peer supporters' group. In total, 201 people attended an APP café group in 2024, including those groups run as part of our NHS projects and our dads and co-parents group (2023: 172). Our annual peer support survey showed how women, their partners and family members value café group peer

Action on Postpartum Psychosis Trustees' Report for the year ended 31 December 2024

support, with 87% saying they would recommend APP's group peer support to others in a similar situation. Feedback on café groups in 2024 included:

"The cafe group has totally normalised my experience. I am not alone and never will be again." (survey respondent).

"Cafe groups have [given] me the opportunity to talk over what it is like to have PP... I just feel like it's a place where I belong." (Northern Ireland café group attendee)

We used social media to promote our online café groups, online volunteer meetups and community activities, for example our regular book club. In 2024, community wellbeing activities included two writing workshops. Writer and actress Lauren-Nicole Mayes (Coronation Street, BBC Writers Room Northern Voices) ran a session 'finding your own voice' in November, whilst APP Ambassador and author Laura Dockrill led a creative writing workshop during Maternal Mental Health Week.

Dad and co-parent peer support

Through training new volunteers (see p. 10 below) we were able to expand our work supporting the partners of women experiencing PP. A total of 46 partners were supported, 17 of whom attended our monthly virtual café group meetings (2023: 9). Feedback from dads and co-parents supported in 2024 included:

"My wife and I have both accessed APP's peer support service. It has been one of the most welcoming support services I have accessed and despite PP being a horrific illness the peer support has been nothing short of amazing." (peer support survey respondent)

"I just wish I'd attended the partner cafes sooner; I kept putting it off but then attended my first one and realised how I could've been getting this help sooner." (café group attendee)

"Peer support massively helps. I also find it healing listening to other dads and find myself wanting to help them." (peer support survey respondent)

Diverse communities peer support

In addition to running our quarterly Muslim women's cafe group, we began considering the information needs of Muslim women and their families. We began working with the British Board of Scholars and Imams on a postpartum psychosis guide for Imams, community leaders and families. We also continued our work in raising awareness of PP in Black and Asian communities (see raising awareness amongst the general public below).

Bereavement peer support

In June 2024, we held our first training day for bereavement peer support volunteers. We were joined by five new volunteers who want to use their experiences to help provide support for others who have lost family members to PP. The volunteers are also helping us to produce web content for bereaved family members and will be developing a peer support group for families bereaved by PP. Feedback from the day included:

"Really excited by what this group will be able to bring to those who really need the support." (attendee)

"It was great to meet other people who'd experienced similar to me, but also to learn how to help others." (attendee)

"It was the first time I'd ever met someone with a similar experience to my own, something I won't forget. It's given me greater confidence in the experience and what good I can use it for." (attendee)

Action on Postpartum Psychosis Trustees' Report for the year ended 31 December 2024

APP has seen an increase in bereaved families contacting us since the pandemic. This might reflect an increase in poorer outcomes in the context of stretched NHS maternity and mental health services, but we are awaiting further national statistics. In 2024, APP supported 16 individuals from families bereaved due to PP. For three of these families, this support was ongoing from contact started in late 2022. We provided support to individuals from two new families who contacted us during the year, including one mother who we are working with to develop resources to support individuals affected by child loss caused by PP. In 2024, APP staff also received training in supporting with grief and loss, bereavement by suicide, and suicide prevention funded by our Department for Health and Social Care grant suicide prevention grant.

Training and supporting volunteers

We recruited and trained 25 new peer support volunteers in 2024 (2023:13), one of whom is now working as staff on our Birmingham NHS partnership project. Four of these new peer supporters are people whose partners experienced PP and will provide support to dads and co-parents, whilst five were bereavement peer support volunteers (see above). We had 134 active peer support volunteers (2023: 112) 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 2024, we continued to receive good feedback from new volunteers about the peer support training we provided – 100 percent would recommend the training to others (2023: 100%). Many also found it supported their own wellbeing and recovery: 100 percent felt more supported (2023: 100%), and 100 percent felt less isolated and better connected with others with similar experiences (2023: 100%). We received positive feedback in training evaluation forms:

"It was incredibly inspiring and informative. I came away feeling ready to be part of the APP family." (attendee)

"I left the training feeling so empowered, and strong. And even though I was being trained to support others it was incredibly healing for myself too." (attendee)

Our ongoing volunteer support programme included: six peer supporter online sessions, including: a focus on self-care and maintaining boundaries; an expert-led session about supporting new mums with anxiety and informal supportive social meet ups. Feedback on the session on supporting with anxiety included:

"Thank you for providing high quality training and for allowing me to learn about other peer supporters' experiences" (peer support volunteer)

"It allowed me to learn about anxiety symptoms associated with PP (most of which I had myself in the early days) and how to manage them/support someone with them" (peer support volunteer)

Our training and support programme for volunteers also included creative and wellbeing activities, including two creative writing workshops, the APP book club meetings and a festive meet up and quiz. Some of the sessions were open to our wider network, not just volunteers, giving participants the opportunity to further broaden their connections with others who have experienced PP. We continued with our two regular volunteer newsletters: one for peer support volunteers, and one for all volunteers, including 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.

Peer support embedded in NHS perinatal mental health services

In 2024, we had four 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; and in the Community Perinatal Mental Health Teams in

Action on Postpartum Psychosis Trustees' Report for the year ended 31 December 2024

the Black Country (until October 2024). We renewed our partnership with the MBU in Manchester for a second 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.

Our NHS embedded peer supporters helped 393 women (2023: 333) in 2024, in the Chorley, Birmingham and Manchester MBUs and in the community in Birmingham, Solihull, Lancashire and South Cumbria and the Black Country. Café groups remain an integral part of our NHS partnership projects to enable recovering women to meet; 53 women and partners attended our NHS café groups in 2024 (2023: 41). 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 2024 peer support survey found that 91 percent of respondents who received peer support through our NHS partnership projects would recommend it.

In 2023, we had begun providing peer support on Andersen Ward, the MBU in Manchester, as part of a new partnership project with Greater Manchester Mental Health NHS Foundation Trust. The project also involves supporting the transition home and running a monthly café group. Our work on Andersen Ward is closely linked to our work at Ribblesmere, the MBU in Chorley, Lancashire, providing joined-up peer support for women and families across the northwest of England. Some APP staff work across both the Lancashire & South Cumbria and Manchester partnership projects, and we find that women from the Greater Manchester area may be admitted in Chorley and vice versa, before returning home and receiving support from the café group in their home area. In 2024, both the Lancashire & South Cumbria and Greater Manchester partnerships were renewed for further funding periods. Our contract with Black Country Healthcare NHS Foundation Trust to provide peer support in the community ended in October 2024. However, we were able to provide ongoing support for women and families recovering from PP as part of our national peer support service. In the West Midlands, we continued to provide peer support in the community in Birmingham and Solihull, as well as Chamomile Suite MBU in Birmingham.

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, including:

"As a staff member it has been amazing to watch how supportive the APP workers have been to the mums on the ward. Having someone who can say, 'I have been there' provides a completely different level of understanding and perspective than what we can give as medical professionals and is invaluable." (Greater Manchester peer support survey respondent)

[APP's peer support made] "...a massive difference. Being able to speak to someone who has experienced mental health issues themselves was very useful and comforting." (Birmingham & Solihull peer support survey respondent)

"It was my recovery support tool. I leaned on it and used it quite regularly and I cannot thank my peer support colleague for everything - she helped me to get to where I am now. I honestly think that without her I wouldn't be where I am today." (Black Country peer support survey respondent)

"Jocelyn was very warm and kind. She felt very approachable and was able to share experiences which helped me to be more hopeful of a positive future." (Lancashire & South Cumbria peer support survey respondent)

**Action on Postpartum Psychosis
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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. Postpartum psychosis affects women's extended families and often the baby's grandparents provide considerable emotional and practical support when their child or their child's partner is diagnosed with PP. This case study demonstrates the impact of APP's peer support on one family many years after their PP experience:

"It took me 24 years to access peer support through APP after my experience of postpartum psychosis (PP) in 1998, but it has completely changed my life. I went from being a survivor to actually living my life, and the self-stigma I used to feel has diminished dramatically. I had never heard of PP when I was diagnosed with it after giving birth to my first child. I was thankfully given a bed on the MBU in West London. I was very delusional by this point and I ended up staying there, with my baby daughter Eva, for three months. It was a really traumatic time. I wasn't really aware of how unwell I was...

I gave birth to a second child, a boy, and it all went really well. I had been told that I was at risk of another episode of PP after giving birth again, but nobody said there was a risk of a psychotic episode later. And this is precisely what happened when my little boy was three years old. I was eventually diagnosed with bipolar and experienced a few more episodes and hospital admissions over the years which deeply affected me. I felt as though I had this awful illness that I was stuck with forever, and I was overwhelmed with feelings of hopelessness.

Thankfully, I haven't experienced another episode since 2015, but it's not just the time that has elapsed that has helped me come to terms with my illness. It's the peer support that I found through APP that has really helped me to feel more hopeful and less alone.

It was 2022 when I found out about APP's peer support. I reached out to APP and the first person I spoke to who had experienced PP was Ellie, and it was such a moving moment. After all these years, I'd finally found someone else who had been through what I had. It was like after all these years, and this long ordeal that felt so hard and endless, I was able to see that there was light at the end of the tunnel. My husband and I also went along to an APP café group and we met all these beautiful people. They were much younger than me and my husband, but we both sat listening to them with tears in our eyes. We had never cried about the experience before. It was like relief. Finally, we could face what had happened and address it in a more open way.

I think in all the years previous to this I had been so determined to get through life that I forgot to address it, to face it head on. Now I am doing it all with my eyes open, with less shame and with so much more support. I always had my husband, my family and the brilliant staff at the MBU. But being with others who have been where you are is so powerful.

My daughter Eva is now 25 and she came along to one of the meetings too. They can help all family members – whether you have experienced PP yourself, your partner has or your daughter or parent has.

Now I feel like I can give something back, I can share my story so that other women going through this won't feel as alone as I did.

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...it's never too late to benefit from peer support. Whether you've just experienced PP in the last year, or whether it's something that affected you many years or even decades ago, reaching out and hearing from others is a comforting and life changing experience. Don't hesitate to find your community. It really has helped to change my life." (peer support beneficiary).

Raising awareness amongst health professionals

In 2024, we continued to provide training and Expert by Experience talks to health professionals across the UK. A total of 3,375 health professionals heard one of APP's lived experience speakers in 2024 (2023: 2,671), including one-day training courses. These were across 13 different online training events (2023: 21) and 26 onsite events (2023: 20). The professionals attending these events included midwives, health visitors, psychiatrists, mental health staff, perinatal mental health and MBU teams, psychologists, nursery nurse staff, obstetrics and gynaecology doctors, pharmacists, social workers, occupational therapists, psychology, nursing and midwifery students, ambulance workers, 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.

We continued our partnership with the Institute of Health Visiting (iHV) inputting into their two-day perinatal mental health champions training. In 2024, we reached 100 health visitors (2023: 172) and will continue to deliver on these courses in 2025. We delivered specialist training to GPs in collaboration with the Coventry and Warwickshire Training hub for GPs and with the Yorkshire and Humber NHS Trust (funded by NHS Health Education England). In 2024, we reached more than 350 GPs with this training (this does not include GPs who attended the Alex Baish memorial webinar– see below). In May 2024, we spoke at the Maternity and Midwifery hour: a live webinar aimed at maternity professionals, detailing what postpartum psychosis is, how it should be treated and managed, and what the role of a midwife is. This reached more than 250 maternity and midwifery professionals.

"You both had such a lovely warm and engaging approach, and the whole presentation was excellent, very clear, packed full of information about postnatal psychosis, recognition, care and support for women and families who might experience this, and I think will be incredibly helpful for student midwives and midwives. I really appreciate your courage and passion for sharing this information" (Attendee)

In 2024, we inputted into course design for midwifery and mental health degrees (Undergraduate and Postgraduate level) at four universities - Universities of York, Hull, King's College London and Central London (2023: 3 universities). These courses now include three to four hours on PP, including a lived experience talk, up to date research and case study discussions to allow the students to think about their roles as professionals in the future. APP Volunteer Chris Wasley spoke at the University of Surrey Midwifery Society conference and was then invited to write an article in the Royal College of Midwives' evidence-based quarterly journal, raising awareness of PP and of how maternity workers can support the partners of women experiencing PP¹

Feedback on APP lived experience talks in 2024 included:

"The lived experiences were so powerful. To hear the impact on families will stay with me and will no doubt ensure my practice remains compassionate and beneficial in people's journey to recovery" (attendee)

¹ 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.

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"The lived experience was extremely powerful, and I will remember this forever." (attendee)

"This was the most powerful part of the whole training. Amazing to be given such a window into someone's lived experience. It felt like a privilege, will make me think about every interaction and its impact and the importance of being alongside clients, advocating." (attendee)

In 2024, we delivered six sessions (2023: 4) of APP's full day workforce training to 142 health professionals from NHS Trusts including Derby, Manchester, Lincolnshire and Bradford (2023:80). 90% of the delegates thought the training was "excellent" (2023: 99%) and 10% rated it as "good" and 100% would recommend it to other health professionals working in the perinatal period (2023: 100%). Onsite training is consistently rated slightly higher than that delivered online (94 % vs 86 % rated it as 'excellent'). Individual feedback included:

"It was excellent; it could have carried on for many more hours; it was so insightful and informative" (attendee)

"The best training I have attended in a long time, thank you" (attendee)

On Wednesday 16th October, we hosted our second annual Alex Baish Memorial Lecture - Essential knowledge in preventing maternal suicide. The free 60-minute event was run in partnership with the National Centre for Mental Health (NCMH) and General Practitioners Championing Perinatal Care (GPCPC). The webinar highlighted the early symptoms of postpartum psychosis, red flags, and the actions health professionals need to take to support and protect those who develop the condition. We promoted the webinar widely, 3,891 health professionals, including GPs and other frontline professionals, registered to attend (2023: 2,547) and there have been more than 1,200 views of the recording on YouTube since. Of the attendees, 94 percent rated the training as 'excellent' (2023: 92%); 6 percent rated it 'good' (2023: 8%) whilst 100 percent agreed they would change their practice because of the webinar (2023:100%). Feedback was excellent and will be used to plan the 2025 webinar:

"This has contributed to my learning and will help save lives." (attendee)

"I appreciate you all sharing your personal stories and the knowledge you have in this area. It is such an important area that I have very little knowledge of, so thank you." (attendee)

"A truly inspiring, emotional, educational and thought-provoking webinar with @ActionOnPP - it has been a privilege to attend, thank you to all involved." (attendee)

"Most powerful session I have ever attended." (attendee)

"So much valuable information delivered today, so well put together. Very touching real-life stories bravely told from those who have lived experiences". (attendee)

"Really well put together- the content, the speakers, the information sharing and all the research and evidence presented. From my experience of working within perinatal teams, this is exactly the type of training needed. The issue is too urgent to ignore and too desperate to not be passionate about. Huge well done to the people that put this together." (attendee)

We had planned to develop two online modules in 2024. We began collating content and researching the best platform to host these. Selection of a platform and development of a costed work plan for the first two modules (supporting partners and supporting families from diverse communities) have been prioritised for early 2025.

Raising awareness amongst the general public

In 2024, 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

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and nationally. As in 2022 and 2023, 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. APP was invited to speak at the conference of the Motivational Mums Club, which supports Black mums in London. Our volunteer Rushina shared her personal experience of PP as a Black mum, whilst APP staff, Jessie Hunt and Shaheda Akhtar, spoke about the signs and symptoms of postpartum psychosis, our peer support services and Diverse Communities Outreach Project.

In the spring, we conducted our first ever billboard campaign reaching 16 million people in the UK. The campaign was spread over four weeks with a total of 74 large format roadside screens. Billboard space was donated by JC Decaux's Community Channel scheme and design expertise by award-winning creative agency MotherLondon. APP's signs and symptoms graphic was adapted for the digital billboard format, whilst we also promoted our BBC Radio 4 appeal (see fundraising and internal capacity below, p.19). The campaign raised awareness of PP and of APP as a charity amongst the general public. As part of the accounts preparations, the Board, along with the Director of Finance & Operations considered, but ultimately have been unable to determine a monetary value of these donated services. In the absence of a reliable measurement basis, the donation of billboard space from JC Decaux has not been recognised as income within these accounts.

In 2024, 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. We supported pieces in national, regional and health sector media. In May, we ran a social media campaign for Maternal Mental Health Awareness Week (MMHAW), reaching 74,000 people (2023:111,000) with our content being shared by celebrities such as Davina McCall and Denise Welch. During the week we launched our new APP Insider Guide "Being a Parent after Postpartum Psychosis" (see peer support above)². We also collaborated with the National Childbirth Trust (NCT), who shared information about spotting the signs and symptoms of PP, as part of our Antenatal Education campaign (see campaigning for better services, p. 17 below). Media highlights in 2024 included:

- An episode of BBC Radio 4's *Is Psychiatry Working?* programme focused on postpartum psychosis and how the Mother and Baby Unit model looks after mother, baby and the family unit. APP staff met with the programme makers as they developed the programme and APP volunteer storytellers Jade and Lee told their stories.³
- APP Ambassador Laura Dockrill shared her postpartum psychosis experience in *Psychology Today*⁴, on the BBC World Service⁵, in the Sunday Times magazine⁶ and on BBC Radio 4 for APP's charity appeal⁷ (see fundraising below, p. 19).
- APP Storytellers Ruth and Alexandra spoke to the New York Times about the power of Mother and Baby Units in the UK⁸.

² <https://www.app-network.org/postpartum-psychosis/insider-guides/>

³ *Is Psychiatry Working? Jade and postpartum psychosis*, <https://www.bbc.co.uk/sounds/play/m00213gm>

⁴ <https://www.psychologytoday.com/us/blog/well-read/202407/overcoming-postpartum-psychosis>

⁵ <https://www.bbc.co.uk/sounds/play/w3ct5nxy>

⁶ <https://www.thetimes.com/life-style/health-fitness/article/how-i-recovered-from-postpartum-psychosis-and-reconnected-with-my-son-g5dsjt5ch> (paywall)

⁷ <https://www.bbc.co.uk/sounds/play/m001xm04>

⁸ https://www.nytimes.com/2024/10/09/well/postpartum-psychosis-health-pregnancy-women.html?unlocked_article_code=1.Q04.SzE6.yH6rVNRBGauU&smid=url-share (paywall)

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- APP Chief Executive Dr Jess Heron spoke to Mail Online about why we need more awareness and health professional training on PP to reduce rates of maternal suicide.⁹
- APP's National Coordinator Jessie Hunt was interviewed for the Yale Journal of Biology and Medicine.¹⁰
- APP volunteer storyteller, Tara, and Chief Executive, Dr Jess Heron, spoke to the Guardian¹¹ about the need to improve access to Mother and Baby Units. Tara also shared her story with Belfast Live¹², whilst APP storyteller Teresa supported our campaign for a Northern Ireland unit by sharing her story with ITV News¹³.

We supported 39 national and regional media stories in 2024 (2023: 32) and shared these across our main social media channels. Our number of social media followers grew to 28,761 (2023: 27,035). Following wider trends and an effort to increase our presence on LinkedIn, we saw our X (formerly Twitter) followers fall whilst LinkedIn followers increased by more than 60 percent. Overall social media reach was slightly lower than the previous year at 844,704 (2023: 1,211,858), although the 2024 figure doesn't include numbers reached on X (formerly Twitter) during June-December inclusive as we were unable to access data on the platform. Reach across the other platforms – Facebook, Instagram and LinkedIn – increased nearly 40 per cent compared with 2023. We focused on creating more short-form social media video content throughout the year, launching our TikTok channel in April and began exploring Threads in November and BlueSky in December. One of the social media highlights of the year was a video highlighting APP's free training toolkit for antenatal educators. 'How To Talk To Expectant Parents About Postpartum Psychosis' presented by Midwife Marley¹⁴ which had more than 9,000 views across APP's and Midwife Marley's own social media channels. Newsletter engagement remained adequate with an average open rate of 38 percent (2023: 40%), whilst the number of subscribers increased by 87%.

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 2024, we continued to work with Company Four on the development of their theatre production sharing experiences of PP. Members of our network were invited to two creative workshops with Company Four, in which artists, writers and APP peer supporters focused on embroidery and creative writing. Company Four's theatre production - Who Is Your Mummy and Where Did She Go? – opened at the end of January 2025 alongside a curated exhibition featuring poetry and artwork by women who have experienced postpartum psychosis (including pieces from the workshops). APP also supported the development of Bijan Sheibani's play – The Cord – which premiered in May 2024 at the Bush Theatre, London. The play explores the intergenerational impact of postpartum psychosis - of becoming a father with knowledge of your own mother's PP many years before. APP's Chief Executive, Dr Jess Heron and APP's National Training Coordinator, Dr Sally Wilson participated in a post-performance Q&A session with the writer/director Bijan. Also in Maternal Mental Health Awareness Week, APP National Coordinator Ellie Ware interviewed Aisha Alvi, author of 'A Mom Like That: A Memoir of Postpartum

⁹ <https://www.dailymail.co.uk/health/article-14006745/NHS-failed-mother-tragedy-reading-maidenhead-postpartum-psychosis.html>

¹⁰ Iyengar, U and Hunt, J (2024) An Open Conversation About Postpartum Psychosis, Yale J Biol Med. 2024 Mar 29;97(1):107–112. <https://pmc.ncbi.nlm.nih.gov/articles/PMC10964824/>

¹¹ https://www.theguardian.com/society/2024/jan/20/maternal-mental-health-care-nhs-postpartum-psychosis-depression-mother-baby-unit?CMP=Share_AndroidApp_Post

¹² <https://www.belfastlive.co.uk/news/health/how-belfast-mum-road-recovery-28532265>

¹³ <https://www.itv.com/news/utv/2024-06-07/woman-with-postpartum-psychosis-considered-taking-own-life>

¹⁴ <https://www.instagram.com/p/C6ebr4WNJpX/?hl=en>

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Psychosis.'. In addition, we supported APP volunteer Ruth Stacey's publication of her book 'Everyone is Here to Help: A healing account of postpartum psychosis and recovery'¹⁵:

Campaigning for improved services

In 2024, 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.

Mother & Baby Unit campaign

In Northern Ireland, we continued our partnership with the MAS project (maternal advocacy and support) to campaign for funding and a timeline for the development of a first Mother and Baby Unit in the region. We attended the All-Party Group on Women's Health, a cross-party group of Members of the Legislative Assembly (MLAs) and their advisors with the Maternal Mental Health Alliance (MMHA) and MAS. Laura, who experienced being on an acute ward when she should have been in an MBU, spoke powerfully about the reasons an MBU is needed. The group chair subsequently wrote to the Health Minister urging him to find funding for an MBU and put questions to him in the Assembly. In December, APP, MAS and MMHA met with the Health Minister, Mike Nesbitt. APP's consultant also met with Alliance Party MLAs Siân Mulholland and Danny Donnelly, whilst APP's National Peer Support Coordinator continued attending monthly meetings with the MMHA to co-ordinate campaigning for specialist perinatal mental health services.

We continued to work with our volunteers from bereaved families and from our Northern Ireland café group to keep the Mother and Baby Unit on the agenda. APP volunteer, Teresa, met with her MLA Nicola Brogan to talk about the need for an MBU, and Nicola also wrote to the health minister. Media pieces included: The Guardian¹⁶; Belfast Live¹⁷; Belfast Telegraph¹⁸ and ITV news¹⁹. Volunteers and families in NI have valued being able to support APP's campaign:

"Campaigning for a Mother and Baby Unit for me is about dispelling the stigma, we cannot control why we get unwell, but we can control how we are treated; it's about reclaiming control, fostering resilience, and ensuring every mother finds solace in the strength she possesses." (APP volunteer)

In January 2024, after years of campaigning, APP staff and volunteers were delighted to attend the official groundbreaking ceremony for Chester's new Mother and Baby Unit, Seren Lodge. The eight-bed unit will support new and expectant parents across Cheshire, Merseyside and North Wales. The APP team continues to work with NHS teams in England and Wales to ensure the voices of lived experience are heard during the development process, as well as ensuring the unit meets the specific needs of families from North Wales. Our volunteers have input into the design, landscaping, and functionality of the MBU. The Cheshire and Merseyside, Perinatal Mental Health, Lead Provider Collaborative 'Helix' was launched in April 2024; APP staff

¹⁵ https://www.instagram.com/p/C6g4S5LrWQ-/?img_index=1

¹⁶ https://www.theguardian.com/society/2024/jan/20/maternal-mental-health-care-nhs-postpartum-psychosis-depression-mother-baby-unit?CMP=Share_AndroidApp_Post

¹⁷ <https://www.belfastlive.co.uk/news/health/how-belfast-mum-road-recovery-28532265>

¹⁸ <https://www.belfasttelegraph.co.uk/life/health/mum-of-two-running-belfast-marathon-to-raise-awareness-of-mental-health-services-for-mothers-after-suffering-postpartum-psychosis/a1817875207.html>

¹⁹ <https://www.itv.com/news/utv/2024-06-07/woman-with-postpartum-psychosis-considered-taking-own-life>

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and volunteers have joined its experts by experience forum to ensure the voices of those with PP are heard in the development of the perinatal services, including the new MBU.

We have continued to campaign for MBUs in Wales, Scotland and underserved areas of England with media pieces in BBC NE and Cumbria²⁰ and the New York Times²¹. As detailed above under raising public awareness, APP staff and volunteers collaborated with the BBC's 'Is Psychiatry Working?' programme which focused on postpartum psychosis and how the Mother and Baby Unit model looks after mother, baby and the family unit and shared the campaign in many of our other national press pieces. 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 2024 with matches at Stoke City FC, Newcastle United, West Ham, Crystal Palace, Bolton, and Derby²². We are very grateful for all Chris's hard work in raising awareness of PP and MBUs with football clubs and their supporters. Many of our Miles for Mums fundraisers used their challenges to raise awareness of the need for women across the UK to be able to access MBU care covering distances to Belfast or the new MBU in Chester (see fundraising and strengthening our capacity, p. 19 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. In 2023, we launched our antenatal education toolkit, which was developed in conjunction with families affected by PP, our volunteers and antenatal class providers. In 2024 we sent this toolkit to all 192 maternity hospitals in England, enclosing hard copies of the toolkit and posters for expectant parents²³, for antenatal educators²⁴, and our signs and symptoms posters²⁵. Midwife Marley's video highlighting the toolkit: 'How to Talk To Expectant Parents About Postpartum Psychosis'²⁶ launched in Maternal Mental Health Awareness week (29th April to 5th May 2024) has been viewed more than 9,000 times. We partnered with the National Childbirth Trust (NCT) to raise awareness of PP²⁷ and reach their antenatal educators. NCT included an article on the toolkit and a link to our survey²⁸ in a practitioner email update in May; it was sent to 699 people, with a 64% open rate.

The repeat of our 2021 YouGov survey about postpartum psychosis in antenatal classes was prepared in 2024, with questions confirmed. The survey went live in January 2025. 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. Volunteers distributed APP's materials, for example getting our signs and symptoms poster displayed at their local medical centre²⁹. APP's 2024 billboard campaign also contributed to raising awareness of the signs and symptoms of PP (see raising awareness amongst the general public, p. 14 above).

²⁰ <https://www.bbc.co.uk/news/articles/c05g6j488o>

²¹ https://www.nytimes.com/2024/10/09/well/postpartum-psychosis-health-pregnancy-women.html?unlocked_article_code=1.Q04.SzE6.yH6rVNRBGauU&smid=url-share (paywall)

²² <https://www.app-network.org/news/chris-kicks-off-a-new-season-of-awareness-raising/>

²³ <https://www.app-network.org/wp-content/uploads/2023/10/Antenatal-campaign-flyers-October-2023.pdf>

²⁴ <https://www.app-network.org/wp-content/uploads/2023/10/Antenatal-campaign-HP-flyers-October-2023.pdf>

²⁵ https://www.app-network.org/wp-content/uploads/2023/05/POSTER_APP_A4_PINK-1-1.pdf

²⁶ <https://www.instagram.com/p/C6ebr4WNJpX/?hl=en>

²⁷ https://www.instagram.com/p/C6gF5a0MQHJ/?img_index=1

²⁸ <https://r1.dotdigital-pages.com/p/C29-1E53>

²⁹ <https://www.instagram.com/p/C6gwnjrtT8U/>

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 2024, 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. In early 2024, APP spoke at NCMH's Women's Winter Webinar: understanding postpartum psychosis. The event was part of the National Centre for Mental Health's Women's Winter Webinar series, which were open to the general public as well as health professionals and those with an interest in mental health research. More than 50 attendees³⁰ joined live and it has since had hundreds of views on YouTube³¹. The National Centre for Mental Health (NCMH) and Action on Postpartum Psychosis are working together to understand more about the causes and triggers of severe mental illness during pregnancy and following childbirth. We promoted this research to members of our network with a targeted newsletter for those with an interest in research participation.

We supported the Care Policy and Evaluation Centre (CPEC) at The London School of Economics to secure funding from the Three NIHR (National Institute for Health and Care Research) Schools Mental Health Programme for a new study to start in January 2025. The RAPPORT study (**R**ealist evaluation of **A**ction on **P**ostpartum **P**sychosis' **M**BU peer support) will assess APP-provided peer support at three Mother and Baby Units in England. Researchers will carry 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. Peer support in Mother and Baby Units is patchy and varies across the country. This research aims to understand the benefits and essential ingredients. It aims to identify the resources needed for effective implementation and assess value for money.

We worked with Jo Hodgkins on a study of psychological recovery following PP, examining the views of women, partners and establishing the care that providers currently offer. We supported Vimbai Carr's PhD research, Experiences of care and support for mothers with postpartum psychosis; a hermeneutic phenomenology study. APP also worked on applications with Oxford University for funding for research to develop national guidelines on diverse community care for PP; and on Case Registry studies in the UK and Sweden to examine predictors and outcomes following PP and the economic costs of the illness. We worked on an application for pilot work to adapt our model of training lived experience peers to research PP experiences and support needs in Malawi. The team held meetings with researchers at Oxford University to make plans to analyse and report APP's MBU survey and research gaps survey, but lacked sufficient staff capacity to progress this work.

Fundraising and strengthening our capacity

In 2024, we continued to develop and diversify our fundraising base and strengthen our fundraising processes. We repackaged and soft launched our Legacy Giving information and we aim to weave this into our communications throughout 2025. We successfully applied for London Marathon places – this was the first time that we had been able to access charity places – although previously we have had runners who have secured their own place and a celebrity runner. We will now have 12 guaranteed places in the marathon for the four years from 2026 - 2029. The board reviewed and updated APP's fundraising strategy towards the end of the year, providing direction and identifying resources for 2025 and beyond.

³⁰ <https://www.cardiff.ac.uk/reproductive-mental-health-programme/news/third-instalment-of-womens-winter-webinars-series-focuses-on-maternal-mental-health-with-action-on-postpartum-psychosis>

³¹ <https://www.youtube.com/watch?v=h12FQWkryLU>

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We had our first BBC Radio 4 appeal in 2024, presented by our Ambassador, Laura Dockrill³², accompanied by a nationwide awareness-raising billboard campaign (see awareness raising amongst the general public p. 14 above). The appeal raised £19,344 from donations made during the appeal week, gift aid and match funding, plus £8,222 received later from the Radio 4 Appeal Fund. We also ran three match-funding appeals, via the Big Give, raising more than £16,000 for our work with dads, co-parents and grandparents, our national peer support service and for our legal and human rights project.

Our annual Miles for Mums and Babies campaign was well supported again, with at least six groups from Mother and Baby Units or Perinatal Mental Health Teams taking part. Each mile reflects the journey mums, babies and families travel to be together, whilst mums receive care in Mother and Baby Units (MBUs). Many fundraisers told their own stories to help raise awareness. Fundraisers and their chosen challenges included:

- The Margaret Oates MBU in Nottingham took part for the second year in a row. This year they covered 365 miles – representing the journey between Nottingham and Belfast in recognition of APP's campaign to raise awareness of the urgent need for an MBU in Northern Ireland.
- The team at The Beeches MBU in Derbyshire decided to go for 1,240 miles, raising £1,270. They chose this number as one mile for every mum or family The Beeches has supported since opening in 1993.
- The North Wales Perinatal Team also took part for the second year. Team members each walked, ran, cycled or swam 141 miles throughout the month of May, representing the distance from South Stack on Anglesey to Ribblesmere MBU in Chorley. They said: *'This is where we admit women most often for the highest level of support when they become unwell in the perinatal period. While the support they receive is undoubtedly to a high standard it is a long way for women to be away from their homes and families while they recover.'*
- The Suffolk Perinatal Mental Health team walked 1,400 miles over the month, to raise awareness of the number of new mums who are diagnosed with postpartum psychosis each year in the UK, raising £2,220.
- The Andersen MBU in Manchester initially planned to go for 500 miles but ended their challenge on an amazing 951 miles.
- A group from the Humber Perinatal Mental Health Liaison Team all chose to cover 99 km each during May to raise awareness, foster empathy, and generate vital funds to ensure that individuals facing PP receive the support they need. The team raised more than £1500.
- Gwen, who raised nearly £5,000, walking the distance between their home and the MBU.
- Kate who walked 100 miles in May and June to raise awareness of PP and the symptoms to look out for, raising more than £1,300. ³³
- Sarah who walked 300 miles throughout the month of May, raising more than £1,100. She chose 300 miles as the distance of a return journey between the only MBU currently open in Wales (Swansea) and the new MBU that she is helping develop in Chester that will have beds for women North Wales, Cheshire and Merseyside.

In 2024 we had more than 200 individual fundraisers taking part in challenges including marathons, half marathons, skydives, and triathlons. We also had several supporters run Big Bake events at their homes or workplaces. We are very grateful to all our individual fundraisers who have found many inventive ways to fundraise and increase awareness. We'd particularly like to thank:

³² <https://www.bbc.co.uk/programmes/m001xm04>

³³ <https://www.justgiving.com/page/kate-wood-1713784554708>

Action on Postpartum Psychosis
Trustees' Report for the year ended 31 December 2024

- Two of our youngest fundraisers who took on big events for APP in October: 17-year-old Emily ran the Cardiff Half and raised nearly £800 and 17-year-old Aideen completed the Belfast Half in memory of her aunt Orlaith, and raised more than £1,200.
- Chris and Emma who ran the Hampton Court Palace Half Marathon, pushing their son in a running buggy, raising nearly £5,500.³⁴
- Burford Golf Club and their Ladies' Captain, Carole Harris, who chose APP as her charity of the year and raised more than £4,000.
- Our Brighton, London and Kielder marathon runners, Mollie, Gen, Chris, Lauren-Nicole, Rebecca, Luke and Matt who between them raised nearly £14,000.
- Kathryn, who completed the Great North Swim, raising more than £1,700.³⁵
- James, who ran the Paris marathon in memory of his sister's friend, raising more than £1,200³⁶.
- Fionnuala, who raised more than £1,000, running the Nottingham 10k³⁷.
- Five APP supporters, Philippa, Owen, Tim, Rob, and Mikyla completed the Great North Run, and between them raised more than £5,200, whilst Steve and Mark raised nearly £1,600 running the Hackney Half Marathon.
- Leanne and Stuart completed the Edinburgh Kiltwalk, raising more than £1,700 and sharing their story of recovery from PP³⁸.
- Sarah, who completed a skydive for APP after her wife suffered with PP, raising more than £1,100.³⁹
- Amy, Meg and Sophie, perinatal mental health nurses from Ribblesmere MBU, who completed the Manchester Half Marathon for APP, raising more than £1,800.
- Will, who completed a triathlon after his friend was diagnosed with PP, raising more than £1,500.⁴⁰
- Sarah, who decided to take on Tough Mudder for APP to mark three years since she became unwell with PP and to celebrate her recovery journey, raising more than £2,200⁴¹. Sarah said:

"Tough Mudder, with its gruelling physical and mental challenges, serves as a symbolic representation of my belief that today, there's nothing I cannot overcome. The obstacles on the course reflect the hurdles life throws at us, and as I navigate mud pits and conquer towering walls, I'll be proving to myself and others that, after facing the darkest moments of my life, resilience and inner strength can conquer all....I have chosen to dedicate my Tough Mudder challenge to the charity APP (Action on Postpartum Psychosis), an organisation committed to supporting those affected by postpartum psychosis. APP introduced me to a community of genuine and caring people who helped me navigate the loneliness and complexities of this illness, and played a huge part in my recovery."

In 2024, we invested in our grant fundraising capacity and were successful in securing new grants, including from the Garfield Weston Foundation and the City Bridge Foundation (to start in 2025). We also continued work to manage our data more efficiently and to improve journeys for beneficiaries and others who contact us. In this we particularly focused on supporting recruitment to research and long-term engagement with APP. We

³⁴ <https://www.justgiving.com/page/love-wins-1709839587970>

³⁵ <https://www.justgiving.com/page/kathryn-grant-app-swim>

³⁶ <https://www.justgiving.com/page/jimparismarathon>

³⁷ <https://www.justgiving.com/page/fionnuala-sutton-1704482204461>

³⁸ <https://www.app-network.org/ourstories/stories/leannes-story-reading-other-peoples-recovery-stories-has-allowed-me-to-process-what-happened-to-me/>

³⁹ <https://www.justgiving.com/page/charity-sarahhorton>

⁴⁰ <https://www.justgiving.com/page/post-partum-psychosis>

⁴¹ <https://www.justgiving.com/page/sarahjuliepujol-toughmudderforapp>

Action on Postpartum Psychosis Trustees' Report for the year ended 31 December 2024

continued to improve our staff and volunteer training and development, for example training on grief and suicide awareness (see peer support above p10), and to seek opportunities for staff to participate in training and events relevant to their roles and new areas of work we are developing, for example our Marketing and Digital Communications Coordinator took part in the Media Trust's TikTok Academy.

Financial Review

The Statement of Financial Activities on page 30 shows APP's income and expenditure for the year. During the year ended 31 December 2024, income exceeded expenditure by £45,485. In our Unrestricted Funds, income exceeded expenditure by £25,239 bringing reserves back within our target range. Income from charitable activities increased, reflecting the suicide prevention grant awarded by the Department for Health and Social Care and a slight increase in contract income, offset by falls in research and training income. Income from donations increased slightly. Investment income increased significantly due to reserves being held on deposit with sustained higher interest rates. In our restricted funds, income exceeded expenditure by £20,246. This reflects grants from the Garfield Weston Foundation and The D'Oyly Carte Charitable Trust, and income from a Big Give match funding campaign in October 2024 which will be spent on our national peer support project across the 2024 and 2025 financial years, together with income from a Big Give match funding campaign in December 2024 which will be spent on our legal and human rights project in 2025.

The Balance Sheet on page 31 shows that at 31st December 2024, APP was holding reserves of £161,585; of which £24,025 was restricted funds. At the start of 2024, 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 2024, APP was holding £110,634 in free reserves, which was slightly below the range then recommended by our reserves policy (£113,000 to £188,000). Trustees agreed an annual plan and budget for 2024 which would bring reserves back into the recommended range. Trustees reviewed and reconfirmed the reserves policy at the end of 2024 and deemed the recommended reserves range of three to five months core charitable expenditure to then be £128,000 to £213,000. On 31st December 2024, APP was holding £136,483 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. Her time for this was bought by the charity from the University of Birmingham until 31st December 2023. From 1st January 2024, Dr Heron has been employed directly by the charity. The Charity's pay and conditions committee met in 2003 to consider Chief Executive pay and conditions. The committee

Action on Postpartum Psychosis Trustees' Report for the year ended 31 December 2024

considered Charity Commission guidance and the role was benchmarked against similar roles being advertised at the time, and sector-wide reports on charity chief executive pay and benefits. The committee developed a recommendation for the trustee board which made the decision on pay and benefits.

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. A skills audit has been undertaken and efforts are made to recruit Trustees who meet the skills requirement. In 2016, the Board agreed to aim towards a leaner Board, with all the skills necessary to the functioning of the charity. One Board member stepped down at the end of 2024.

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. During 2024, APP's risk register and reporting process were refined. The full risk register is now 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 2022 we recruited a dedicated fundraiser who has overhauled fundraising systems and processes. 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. 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 (for example peer support contracts), the financial, legal, health and safety, operational and reputational risks are reviewed by senior staff

Action on Postpartum Psychosis Trustees' Report for the year ended 31 December 2024

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 2024 were financial sustainability, management capacity and operational risks, in particular maintaining sufficient income from a diversity of sources, identifying funds and capacity to support research involvement work, ensuring the Board, 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; updating our funding and fundraising strategy; jointly applying for research funding with several university researchers and carefully planning and budgeting for 2025. Management capacity and operational risks were addressed through: contracting support for grant fundraising, data protection toolkit work and outreach work and engagement to build community networks, strength collaborations and increase the number of women from diverse communities we support and train as volunteers

Plans for Next Year

Action on Postpartum Psychosis plans for 2025 were grouped under the following objectives:

Supporting women and families.

We plan 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 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.

Raising awareness amongst health professionals.

We plan 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 (RCPsych), 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.

Raising awareness amongst the general public.

We plan to raise awareness in the general public to reduce stigma and misinformation by:

Action on Postpartum Psychosis Trustees' Report for the year ended 31 December 2024

- 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.

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:

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 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.

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

- Supporting the RAPPORT study (**R**ealist evaluation of **A**ction on **P**ostpartum **P**sychosis' MBU peer support) 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.

Strengthening our capacity to fulfil our charitable objectives

We plan to strengthen our internal systems to support sustainable growth by:

- Growing 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.

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Trustees' Report for the year ended 31 December 2024

- Increasing staff capacity in the fundraising team with a new post and an existing staff member spending more time on community engagement.
- Continuing 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.
- Continuing data collection and cyber security improvement work, planning integration of data and preparation for implementation of a CRM (customer relationship management database).
- Continuing 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.
- Continuing staff development, with training in suicide prevention, grief and loss, safeguarding, GDPR, cyber security, peer support development.
- Reviewing our organisational structure and options for improving efficiency and building management capacity.

Action on Postpartum Psychosis
Trustees' Report for the year ended 31 December 2024

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 2024 were as follows:

Dr Giles Berrisford	Chair
Annette Bauer	Treasurer
Catherine Cho	
Dr Clare Dolman	
Sarah Hind	(resigned 2 nd December 2024)
Anna Jones	Vice Chair (Acting co-Chair)
Professor Ian Jones	
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 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 5th June 2025 and signed on the board's behalf by:

.....

A Bauer - Trustee

INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF
ACTION ON POSTPARTUM PSYCHOSIS

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 2024.

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:

ACTION ON POSTPARTUM PSYCHOSIS

STATEMENT OF FINANCIAL ACTIVITIES **(INCORPORATING AN INCOME AND EXPENDITURE ACCOUNT)** **FOR THE YEAR ENDED 31 DECEMBER 2024**

	Notes	Unrestricted funds £	Restricted funds £	2024 Total funds £	2023 Total funds £
INCOME AND ENDOWMENTS FROM					
Donations and legacies	2	261,349	10,906	272,255	258,230
Charitable activities	5				
General		272,264	112,982	385,246	286,097
Other trading activities	3	1,060	-	1,060	-
Investment income	4	<u>5,554</u>	<u>-</u>	<u>5,554</u>	<u>1,288</u>
Total		<u>540,227</u>	<u>123,888</u>	<u>664,115</u>	<u>545,615</u>
 EXPENDITURE ON					
Raising funds	6	33,703	267	33,970	28,232
Charitable activities	7				
General		<u>481,285</u>	<u>103,375</u>	<u>584,660</u>	<u>519,332</u>
Total		<u>514,988</u>	<u>103,642</u>	<u>618,630</u>	<u>547,564</u>
 NET INCOME/(EXPENDITURE)		25,239	20,246	45,485	(1,949)
 RECONCILIATION OF FUNDS					
Total funds brought forward		<u>112,321</u>	<u>3,779</u>	<u>116,100</u>	<u>118,049</u>
 TOTAL FUNDS CARRIED FORWARD		<u><u>137,560</u></u>	<u><u>24,025</u></u>	<u><u>161,585</u></u>	<u><u>116,100</u></u>

CONTINUING OPERATIONS

All income and expenditure has arisen from continuing activities.

STATEMENT OF FINANCIAL POSITION
31 DECEMBER 2024

	Notes	2024 £	2023 £
FIXED ASSETS			
Tangible assets	13	1,077	1,687
CURRENT ASSETS			
Debtors	14	63,023	63,916
Cash at bank		<u>168,934</u>	<u>129,300</u>
		231,957	193,216
CREDITORS			
Amounts falling due within one year	15	(71,449)	(78,803)
		<u> </u>	<u> </u>
NET CURRENT ASSETS		<u>160,508</u>	<u>114,413</u>
TOTAL ASSETS LESS CURRENT LIABILITIES		<u>161,585</u>	<u>116,100</u>
NET ASSETS		<u>161,585</u>	<u>116,100</u>
FUNDS	17		
Unrestricted funds:			
General Fund		137,560	112,321
Restricted funds		<u>24,025</u>	<u>3,779</u>
TOTAL FUNDS		<u>161,585</u>	<u>116,100</u>

The charitable company is entitled to exemption from audit under Section 477 of the Companies Act 2006 for the year ended 31 December 2024.

The members have not required the company to obtain an audit of its financial statements for the year ended 31 December 2024 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 financial statements were approved by the Board of Trustees and authorised for issue on and were signed on its behalf by:

.....
A Bauer - Trustee

The notes form part of these financial statements

ACTION ON POSTPARTUM PSYCHOSIS

STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 DECEMBER 2024

	Notes	2024 £	2023 £
Cash flows from operating activities			
Cash generated from operations	1	<u>39,634</u>	<u>(41,078)</u>
Net cash provided by/(used in) operating activities		<u>39,634</u>	<u>(41,078)</u>
Cash flows from investing activities			
Purchase of tangible fixed assets		<u>-</u>	<u>(1,687)</u>
Net cash provided by/(used in) investing activities		<u>-</u>	<u>(1,687)</u>
		<u> </u>	<u> </u>
Change in cash and cash equivalents in the reporting period		39,634	(42,765)
Cash and cash equivalents at the beginning of the reporting period		<u>129,300</u>	<u>172,065</u>
Cash and cash equivalents at the end of the reporting period		<u>168,934</u>	<u>129,300</u>

The notes form part of these financial statements

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 31 DECEMBER 2024

1. RECONCILIATION OF NET INCOME/(EXPENDITURE) TO NET CASH FLOW FROM OPERATING ACTIVITIES

	2024 £	2023 £
Net income/(expenditure) for the reporting period (as per the Statement of Financial Activities)	45,485	(1,949)
Adjustments for:		
Depreciation charges	610	-
Decrease/(increase) in debtors	893	(28,592)
Decrease in creditors	<u>(7,354)</u>	<u>(10,537)</u>
Net cash provided by/(used in) operations	<u><u>39,634</u></u>	<u><u>(41,078)</u></u>

2. ANALYSIS OF CHANGES IN NET FUNDS

	At 1.1.24 £	Cash flow £	At 31.12.24 £
Net cash			
Cash at bank and in hand	<u>129,300</u>	<u>39,634</u>	<u>168,934</u>
	<u>129,300</u>	<u>39,634</u>	<u>168,934</u>
Total	<u><u>129,300</u></u>	<u><u>39,634</u></u>	<u><u>168,934</u></u>

The notes form part of these financial statements

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS **FOR THE YEAR ENDED 31 DECEMBER 2024**

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 its estimated useful economic life of 3 years, on a straight line basis.

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.

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.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued **FOR THE YEAR ENDED 31 DECEMBER 2024**

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 £	2024 Total funds £	2023 Total funds £
Donations	244,323	9,068	253,391	236,698
Gift aid	<u>17,026</u>	<u>1,838</u>	<u>18,864</u>	<u>21,532</u>
	<u>261,349</u>	<u>10,906</u>	<u>272,255</u>	<u>258,230</u>

In the prior year, £252,231 of the income related to unrestricted funds and £5,999 to restricted funds.

3. OTHER TRADING ACTIVITIES

	Unrestricted funds £	Restricted funds £	2024 Total funds £	2023 Total funds £
Script advice and speaker fee	<u>1,060</u>	<u>-</u>	<u>1,060</u>	<u>-</u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued **FOR THE YEAR ENDED 31 DECEMBER 2024**

4. INVESTMENT INCOME

	Unrestricted funds £	Restricted funds £	2024 Total funds £	2023 Total funds £
Bank interest	<u>5,554</u>	<u>-</u>	<u>5,554</u>	<u>1,288</u>

In the prior year, £1,288 of the income related to unrestricted fund and £nil to restricted funds.

5. INCOME FROM CHARITABLE ACTIVITIES

	2024 General £	2023 Total activities £
Government Grants – Department for Health & Social Care	86,278	-
Garfield Weston Foundation	15,000	-
Voices From The Front/Rosa	-	7,000
Other Trusts and Foundations	11,704	19,200
Contract Income - Lancashire and South Cumbria NHS Foundation Trust	72,960	68,665
Contract Income - Birmingham and Solihull Mental Health NHS Foundation Trust	102,665	100,823
Contract Income - Black Country Healthcare NHS Foundation Trust	39,686	50,695
Contract Income - Greater Manchester Mental Health NHS Foundation Trust	40,505	16,021
Workforce Training and Experts by Experience	13,508	17,643
Research contracts	2,940	6,050
	<u>385,246</u>	<u>286,097</u>

In the prior year, £261,397 of the income related to unrestricted funds and £24,700 to restricted funds.

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

	2024 £	2023 £
Government Grants	86,278	-
Other Trusts and Foundations	11,704	19,200
Garfield Weston Foundation	<u>15,000</u>	<u>-</u>
	<u>112,982</u>	<u>19,200</u>

Included within Government Grants noted above is a grant of £86,278 from the Department of Health and Social Care, restricted for use only towards a project called 'Reducing suicide in mothers with postpartum psychosis'

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.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2024

6. RAISING FUNDS

Raising donations and legacies

	Unrestricted funds £	Restricted funds £	2024 Total funds £	2023 Total funds £
Staff costs	20,226	-	20,226	18,737
Other fundraising costs	<u>13,477</u>	<u>267</u>	<u>13,744</u>	<u>9,495</u>
	<u>33,703</u>	<u>267</u>	<u>33,970</u>	<u>28,232</u>

In the prior year, £27,998 of the expenditure related to unrestricted funds and £234 to restricted funds.

7. CHARITABLE ACTIVITIES COSTS

	Direct Costs (see note 8) £	Support costs (see note 9) £	Totals £
General	<u>575,890</u>	<u>8,770</u>	<u>584,660</u>

In the prior year, £488,646 of the expenses related to unrestricted funds and £30,686 to restricted funds.

8. DIRECT COSTS OF CHARITABLE ACTIVITIES

	2024 £	2023 £
Staff costs	481,907	404,279
Recruitment and Health & Safety	218	621
Consultancy	24,683	55,922
Project costs	4,956	918
Travel	17,451	14,837
Information materials and awareness raising	10,779	5,673
Volunteer training & expenses	2,649	2,179
Office and running costs	31,789	24,309
Workforce training and experts by experience costs	<u>1,458</u>	<u>2,446</u>
	<u>575,890</u>	<u>511,184</u>

9. SUPPORT COSTS

	Governance costs £
General	<u>8,770</u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 DECEMBER 2024

9. SUPPORT COSTS - continued

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

	2024	2023
	General	Total
	£	activities
	£	£
Independent examiners fee	2,370	2,310
Accountancy fees	5,884	5,559
Other fees	<u>516</u>	<u>279</u>
	<u>8,770</u>	<u>8,148</u>

10. NET INCOME/(EXPENDITURE)

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

	2024	2023
	£	£
Depreciation - owned assets	610	-
Independent Examination Fee	<u>2,370</u>	<u>2,310</u>

11. TRUSTEES' REMUNERATION AND BENEFITS

There were no trustees' remuneration or other benefits for the year ended 31 December 2024 nor for the year ended 31 December 2023.

Trustees' expenses

There were no trustees' expenses paid for the year ended 31 December 2024 nor for the year ended 31 December 2023.

12. STAFF COSTS

	2024	2023
	£	£
Wages and salaries	437,723	384,988
Social security costs	30,913	24,612
Other pension costs	<u>33,497</u>	<u>13,416</u>
	<u>502,133</u>	<u>423,016</u>

The average number of full-time equivalent employees during the year was 10.3. (2023: 9.8).

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

	2024	2023
	<u>16</u>	<u>15</u>

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 £98,536 (2023: £55,767).

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 DECEMBER 2024

13. TANGIBLE FIXED ASSETS

	Office equipment £
COST	
At 1 January 2024 and 31 December 2024	<u>2,887</u>
DEPRECIATION	
At 1 January 2024	1,200
Charge for year	<u>610</u>
At 31 December 2024	<u>1,810</u>
NET BOOK VALUE	
At 31 December 2024	<u><u>1,077</u></u>
At 31 December 2023	<u><u>1,687</u></u>

14. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2024	2023
	£	£
Trade debtors	19,232	52,191
Other debtors	125	-
Prepayments and accrued income	<u>43,666</u>	<u>11,725</u>
	<u><u>63,023</u></u>	<u><u>63,916</u></u>

15. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2024	2023
	£	£
Trade creditors	9,944	516
Other creditors	702	299
Accruals and deferred income	<u>60,803</u>	<u>77,988</u>
	<u><u>71,449</u></u>	<u><u>78,803</u></u>

Deferred income includes income received during the period of £53,580 (2023: £38,186) which relates to services to be provided during the financial year ended 31 December 2025.

16. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Unrestricted funds	Restricted funds	2024 Total funds	2023 Total funds
	£	£	£	£
Fixed assets	1,077	-	1,077	1,687
Current assets	207,932	24,025	231,957	193,216
Current liabilities	<u>(71,449)</u>	<u>-</u>	<u>(71,449)</u>	<u>(78,803)</u>
	<u><u>137,560</u></u>	<u><u>24,025</u></u>	<u><u>161,585</u></u>	<u><u>116,100</u></u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued **FOR THE YEAR ENDED 31 DECEMBER 2024**

17. 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
	<u>3,779</u>	<u>20,246</u>	<u>24,025</u>
TOTAL FUNDS	<u>116,100</u>	<u>45,485</u>	<u>161,585</u>

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	<u>5,834</u>	<u>(5,834)</u>	<u>-</u>
	<u>123,888</u>	<u>(103,642)</u>	<u>20,246</u>
TOTAL FUNDS	<u>664,115</u>	<u>(618,630)</u>	<u>45,485</u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2024

17. MOVEMENT IN FUNDS - continued

Comparatives for movement in funds

	At 1.1.23 £	Net movement in funds £	At 31.12.23 £
Unrestricted funds			
General Fund	114,049	(1,728)	112,321
Restricted funds			
Dad's and Co-parents Peer Support in 2023	4,000	(4,000)	-
Diverse Communities Peer Support	-	3,393	3,393
Rosa Voices from the Frontline	-	386	386
	<u>4,000</u>	<u>(221)</u>	<u>3,779</u>
TOTAL FUNDS	<u>118,049</u>	<u>(1,949)</u>	<u>116,100</u>

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

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General Fund	514,916	(516,644)	(1,728)
Restricted funds			
National Peer Support	7,500	(7,500)	-
Dad's and Co-parents Peer Support in 2023	6,959	(10,959)	(4,000)
Digital Capacity Building	700	(700)	-
Diverse Communities Peer Support	5,540	(2,147)	3,393
NE Cafe Group	3,000	(3,000)	-
Rosa Voices from the Frontline	7,000	(6,614)	386
	<u>30,699</u>	<u>(30,920)</u>	<u>(221)</u>
TOTAL FUNDS	<u>545,615</u>	<u>(547,564)</u>	<u>(1,949)</u>

Unrestricted funds

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

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued **FOR THE YEAR ENDED 31 DECEMBER 2024**

17. MOVEMENT IN FUNDS - continued

Restricted funds

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.

National Peer Support

APP received grants from two charitable foundations - 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. We also ran a Big Give match funding campaign 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.

Dads, Co-parents and Grandparents 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.

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. The donations will be spent in 2025 on work to develop web content based on the information gathered from our peer support survey and interviews in 2023 and 2024.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued **FOR THE YEAR ENDED 31 DECEMBER 2024**

17. MOVEMENT IN FUNDS - continued

Rosa Voices from the Frontline

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.

Dads & Co-parents Peer Support

In December 2022, The D'Oyly Carte Charitable Trust made a grant of £4,000 to support APP's Dads and Co-parents peer support project. In addition, APP successfully applied to the Big Give's Kind2Mind Fund to run a match funding campaign in May 2023. The campaign raised more than £5,000, including match funding, for the Dads & Co-parents peer support project. We also received an unexpected £1,500 payment from the Big Give which was to match the gift aid received on our 2023 Women & Girls match funding campaign. This earlier campaign had supported the entirety of our national peer support service, including the Dads & Co-parents work, so this extra funding was used for the Dad's & Co-parents work. The Dads & Co-parents Peer Support project connected dads and co-parents whose partner has 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 provided 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. Our peer support staff and trained dad and co-parent volunteers also provide support on our online forum. The D'Oyly Carte Charitable Trust grant and Big Give fundraising income were spent on this project in 2023.

NE Café Group

In 2023, APP received a grant (£3,000) from the Sir James Knott Trust to continue running a peer support café group in the North East of England following the end of our NHS contract in this region.

Digital Capacity Building

APP received a second grant for digital capacity building of £700 from The Big Give in 2023. We used this grant to continue exploring new ways using our social media to reach existing and potential new supporters, as well as developing our supporter newsletter systems and a new presentation template for our training.

18. 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 £33,497 (2023: £13,417). Contributions totalling £nil (2023: £nil) were payable to the fund at the balance sheet date.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 DECEMBER 2024

19. RELATED PARTY DISCLOSURES

Action on Postpartum Psychosis was hosted by the University of Birmingham until 31st December 2023. In the prior year, Action on Postpartum Psychosis paid a hosting fee to the University of £42,560. The charity received benefits from this relationship including meeting and office space.

In the prior year, the charity included an accrual of £28,496 representing the amount outstanding to the University of Birmingham at 31 December 2023, which has been paid in full in this financial year.

During the year, Trustees made donations to the charity totalling £3,450 (2023: £2,493).

Accounts

REGISTERED COMPANY NUMBER: 07466643 (England and Wales)
REGISTERED CHARITY NUMBER: 1139925

ACTION ON POSTPARTUM PSYCHOSIS
(A COMPANY LIMITED BY GUARANTEE)

TRUSTEES' REPORT AND

UNAUDITED FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2023

ACTION ON POSTPARTUM PSYCHOSIS

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FOR THE YEAR ENDED 31 DECEMBER 2023

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ACTION ON POSTPARTUM PSYCHOSIS

REFERENCE AND ADMINISTRATIVE DETAILS
FOR THE YEAR ENDED 31 DECEMBER 2023

TRUSTEES	A Bauer G S Berrisford C K Cho (appointed 30.3.23) C Dolman S A Hind I R Jones A R Jones T C Robinson (appointed 20.7.23)
CHIEF EXECUTIVE	J Heron
DIRECTOR OF FINANCE AND OPERATIONS	K Mullard
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
SOLICITORS (PRO BONO)	Howard Kennedy LLP No 1 London Bridge London SE1 9BG

ACTION ON POSTPARTUM PSYCHOSIS

REFERENCE AND ADMINISTRATIVE DETAILS **FOR THE YEAR ENDED 31 DECEMBER 2023**

BANKERS

HSBC Bank PLC
18 High Street
Burton on
Trent
Staffordshire
DE14 1HU

The Cooperative Bank
PLC 1 Balloon Street
Manchester
M60 4EP

Bath Building
Society 15 Queen
Square Bath
BA1 2HN

Saffron Building Society
Saffron House
1A Market Street
Saffron Walden
Essex,
CB10 1HX

ACTION ON POSTPARTUM PSYCHOSIS
TRUSTEES' REPORT
FOR THE YEAR ENDED 31 DECEMBER 2023

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 2023. 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 the largest percentage of psychiatric deaths. During the last decade, PP-related maternal deaths have become rare, although maternal suicides as a whole have continued to increase. Early evidence suggests that deaths due to PP are again 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 new 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 and 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.

ACTION ON POSTPARTUM PSYCHOSIS
TRUSTEES' REPORT
FOR THE YEAR ENDED 31 DECEMBER 2023

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 volunteer: 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 more impact in all areas of our work.

Objectives and Activities in 2023

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 2023 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 2023, we aimed to maintain and grow our national and regional peer support service by:

- Maintaining our strong peer support presence, offering online, in person, video call and café group support to all who need it nationally and via our NHS projects, and maintaining long term contact with those we support.
- Continuing to: train new peer supporters, prioritising volunteers from diverse communities and project regions; and develop the ongoing training programme and activities for volunteers, holding six evening training sessions and offering online social and wellbeing activities.
- Seeking funding to maintain and grow our peer support offer for dads, co-parents and grandparents through one-to-one support and online meet ups.
- Seeking funding to maintain and grow our peer support for women and families from diverse communities.
- Maintaining high-quality service delivery and good functioning of existing NHS partnership

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contracts and seeking to add new NHS contracts to the APP portfolio, particularly those with APP staff embedded in MBUs.

- Finalising the translation of APP's guides into the first five languages and obtaining funding for further translation and international partnerships.
- Continuing work to review our journey for beneficiaries, volunteers and fundraisers.

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 2023, 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.
- Developing training in specialist areas, for example supporting dads and co-parents, and working with women from diverse backgrounds.
- Continuing collaborations with the Institute of Health Visiting (iHV) and other professional bodies, training, supporting and developing resources for Lived Experience speakers.

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 2023, 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:

- Developing media and communications for the main 'moments' across the year (for example Maternal Mental Health Awareness Week, Black Maternal Mental Health Week, World Mental Health Day, and Suicide Awareness Week); placing case studies in the media and social media to support APP campaigns, new projects, and to raise awareness of APP peer support, training and information resources.
- Continuing our diverse communities outreach work: promoting understanding of PP in all cultures and raising awareness of APP's peer support; supporting sessional staff and volunteers to take part in social media activities and tell their stories in the media; linking with MBU professionals from diverse communities for communications pieces and seeking funding for a staff member who could lead this area of our work.
- Continuing the development of our new website.

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.

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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 2023, we aimed to use our specialist expertise and lived experience voice to create change in systems, by

- Continuing APP's Mother and Baby Unit (MBU) campaign, with a particular focus on an MBU for Northern Ireland: calling for urgent action for MBUs for NI, North Wales & the north of Scotland; developing communications to showcase the value of MBUs and positive MBU stories; and continuing analysis of our MBU survey data.
- Continuing APP's antenatal education class campaign: developing web content from the antenatal provider survey outlining why talking about PP is important, sharing what women and families need to know; building on previous social media and media work to raise awareness of the campaign.

Research

In 2023, we aimed to continue to facilitate research studies of importance to women and families affected by postpartum psychosis, as capacity and funding allowed, by

- Finalising APP's Impact Report and MBU survey reports.
- Completing a research gaps survey and promoting the findings to universities/funders.
- Developing a plan and costings to support APP's involvement in research and seeking funding to support APP as a research resource.
- Publishing the drafted 'Being A Parent' Guide in electronic format and in hard copy once funds are secured.

Fundraising and strengthening our capacity

In 2023, we aimed to strengthen our capacity to fulfil our charitable objectives through strengthening our internal systems to support sustainable growth. We planned to:

- Develop the data manager role and implement a data project to simplify data collection and develop a simpler cloud-based data recording system.
- Continue to develop and improve user journey and functionality of the updated APP website.
- Continue work supporting Coordinators' development as project managers, with work on business planning, reporting & budget responsibilities.
- Continue development as gold standard lived experience, family friendly employer.

Achievements and performance

Peer Support to affected women and families

In 2023, APP continued its national peer support service, expanding our work with dads and co-parents and families from diverse communities. We set up a new café group for Muslim women who have experienced psychosis in the perinatal period and promoted our dads and co-parents peer support widely, including distributing hundreds of posters to Mother and Baby Units, Perinatal Mental Health teams and community midwife teams. Overall, in 2023 APP provided peer support to more than 1,062 people, including those personally affected, partners, grandparents, wider families and friends (2022: 828). An average of 226 people used our online peer support forum every month (2022: 234) with the number of registered users increasing from 3,299 to 3518. Staff and volunteers supported 338 people via email, telephone, video call, in person meet-up and café groups, which included 275 women, 31 partners and 32 grandparents. Our NHS embedded partnership projects supported 335 individuals.

We conducted our annual peer support user survey towards the end of 2023, promoting it widely and adding new questions about whether peer support had helped with specific elements of people's PP experience and whether users would like more support and information on legal, rights-based and financial issues as a result of PP. In 2023, our peer support survey found: 99 percent of respondents would recommend the peer support forum to others (2022: 97%), and 98 percent would recommend APP's 1:1 support (2022: 95%). Before finding APP, 69 percent of respondents had not met anyone else with experience of PP. Since finding APP, 52 percent had met 8 or more people (in-person or virtually). Almost all respondents (99%) felt more supported since finding APP (2022: 100%); 96 percent felt less

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isolated (2022, 100%); 97 percent felt more informed about PP (2022, 93%), and 87 percent felt less negative about PP (2022, 82%). Meanwhile, 94 percent felt more hopeful about the future (2022: 92%), and 97 percent felt that APP had helped, or was helping, them to recover. Nearly half of respondents (46%) said they might not be alive if they had not found APP's peer support services this year – which is a 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:

"The support APP provides is life saving and life changing. APP's service means community to me - from picnics, to fundraising events to cafe groups I've always felt included. All staff and volunteers inspire me every day - keep doing the amazing work you do APP!"

"The support I have been receiving has been tremendously amazing. I have been recovering very well and without the support I don't think I would be where I am now. I am very grateful, and I hope to help someone in the future by providing the same support."

"Absolutely amazing charity that does a lot of work to support mothers and women at large to take control of their mental health. The support and listening ear is so valuable for recovery where sometimes we wait weeks or months for therapeutic treatment. APP is quick in response and the online community is brilliant. Peer support is so important: someone who has "been there" gives a level of empathy and close touch that professionals can't always give and that's why I think my access to APP was pivotal in my recovery and continual maintenance of my mental well-being."

"I feel that all the support services APP provides are invaluable both to the mothers and their families and friends. I do not know what I would have done without the support and reassurance of APP when my daughter became ill with postpartum psychosis. I had not heard of this traumatic illness before, they were there for me and my daughter through the ups and downs of her recovery. APP has also worked to inform and educate about this shocking illness."

The 2023 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.		Proportion of respondents with the symptom who found APP peer support had helped with this symptom
Anxiety	98%	96%
Depression	90%	98%
Further episode(s) of psychosis	36%	94%
Ongoing bipolar illness	37%	94%
Intrusive thoughts	71%	84%
Suicidal thoughts	51%	83%

Finally, our 2023 peer support survey asked questions to explore whether our community of peer support users need more support and information on legal, rights-based and financial issues as a result of PP. Our peer supporters often discuss and signpost users to further support in this area, so we wanted to understand more about the prevalence of these issues. Survey respondents had experienced issues

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with returning to work (49%), reinstatement of their full driving licence (36%), problems at work (36%), accessing life, travel or car insurance (31%), benefits entitlements (28%), accessing the right medical treatment (28%), money worries, debt or financial difficulties (21%). In 2024, we will work to understand more about women's experiences and what support and information APP could develop.

Café groups and wellbeing activities.

We extended our monthly regional café groups to ten (2022: 9). They now operate in Wales, Sussex & Hampshire, Yorkshire, Lancashire & Cumbria, Morpeth & the North-East, Birmingham, Manchester, London, Scotland and Northern Ireland. In total, 113 women and family members attended a regional group. Groups not linked to NHS projects mainly took place online due to funding constraints, but we are seeking funding to run these as face-to-face groups. We also extended our online café groups. We now run a monthly dads/co-parents group, a quarterly grandparents' group (attended by 14 people in 2023), a quarterly Muslim women's group (attended by 9 women in 2023), and a quarterly group for volunteers who manage an ongoing bipolar disorder/ psychosis diagnosis (attended by 16 people in 2023). Partners' virtual café group meetings were held throughout the year, on the third Wednesday of each month (except December). A total of nine partners, at all stages of the PP journey, attended the groups. Feedback from our annual peer support survey shows how women and their partners value café group peer support:

"I wish I could meet up with other mums every week! In the early days, after being discharged I pushed myself to attend local mum and baby/toddler groups, but they didn't offer the same relief that APP café groups do."

"As a partner, being able to utilise the forums and use the virtual café to chat to other dads has been brilliant and made me feel much happier and positive about the future. I think ... that sometimes there isn't anyone to turn to and having the option of a dedicated service for PP where you can talk to people that have lived and breathed it could literally be a life saver during the recovery phase."

We continued to use social media to provide peer support, running live events and activities online for volunteers and beneficiaries - for example our regular book club – and ensuring that there was always a trained peer supporter monitoring our social media to provide support and signposting to anyone needing help who commented or messaged us. We used social media to promote our online café groups, online volunteer meetups and community activities.

Training and supporting volunteers

We recruited and trained 13 new peer supporters in 2023, three of whom are now working as staff on our Manchester NHS partnership project. We have 112 active peer support volunteers (2022: 96) 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 2023 we received good feedback from new volunteers about the peer support training we provided – 100 percent would recommend the training to others (2022: 100%). Many also found it supported their own wellbeing and recovery: 100 percent felt more supported (2022: 94 %), and 100 percent felt less isolated and better connected with others with similar experiences (2022: 78 %). We received positive feedback in training evaluation forms:

"A really fabulous day, came away feeling very empowered to help others" "Very valuable training. Made me want to take the information to all pre/postnatal groups & individuals!" Attendee.

"The training gave information about how to support others, in a way that was inspiring. The training explained how giving information about my experience is beneficial and how it is important to signpost and give information, rather than advise people." Attendee.

Our peer support volunteers were supported during 2022 with both training and social Zoom sessions, including: case discussions; an expert-led session about supporting sleep; and a Q&A with APP Trustee and world-leading expert on postpartum psychosis, Professor Ian Jones. Peer support volunteers were also invited to additional sessions which were open to our wider volunteer and staff groups or whole APP network including: a creative writing workshop with APP's Ambassador, author Laura Dockrill; a self-compassion session; APP's book club; a festive meet up and quiz. We received good feedback from our peer supporters on how these sessions met their training needs, for example:

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"I thought it was a brilliant session. I really appreciate everyone's time spent organising it and a big thank you most of all to Prof. Jones for sharing his knowledge...I thought the level of information was good and very informative. It kept my interest throughout." APP Volunteer.

We continued with our two regular volunteer newsletters: one for peer support volunteers, and one for all volunteers, including 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.

Peer support embedded in NHS perinatal mental health services

In 2023, we had four 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; and in the Community Perinatal Mental Health Teams in the Black Country. We began a new partnership, 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 holiday cover and additional support to women and families.

Our NHS embedded peer supporters helped 333 women (2022: 274) in 2023, in the Chorley, Birmingham and Manchester MBUs and in the community in Birmingham, Solihull, Lancashire and South Cumbria and the Black Country. Café groups remain an integral part of our NHS partnership projects to enable recovering women to meet; we held 53 café groups in 2022 (2022: 58), 11 of which were held virtually. 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 café groups held in NHS partnership projects 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.

In September 2023, we began providing peer support on Andersen Ward, the MBU in Manchester, as part of a new partnership project with Greater Manchester Mental Health NHS Foundation Trust. The project also involves supporting the transition home and running a monthly café group. Our work on Andersen Ward is closely linked to our work at Ribblesmere, the MBU in Chorley Lancashire, providing joined-up peer support for women and families across the northwest of England. Some APP staff work across both the Lancashire and Manchester partnership projects, and we find that women from the Manchester area may be admitted in Chorley and vice versa, before returning home and receiving support from the café group in their home area. Our contract with Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust to provide peer support in the Morpeth MBU and support the transition home ended in early 2023. However, we were able to secure funding to continue running a café group in the northeast of England, providing ongoing support for women and families recovering from PP as part of our national peer support service. In the West Midlands, we continued to provide peer support in the community in Birmingham, Solihull and the Black Country, as well as Chamomile Suite MBU in Birmingham. APP attended a "Celebrating Perinatal" event, organised by Midlands Partnership University NHS Foundation Trust and North Staffordshire Combined Healthcare NHS Trust in May. APP's Hannah Bissett, National NHS Contracts Coordinator, gave a presentation about our NHS partnership work in peer support, coproduction and service improvement. Our Black Country Peer Support Facilitator, National Online Peer Support Coordinator also attended, whilst APP's Chair of Trustees, Dr Giles Berrisford, gave a national update on the progress of perinatal services in his Specialty Advisor role for NHS England.

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

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themselves. Postpartum psychosis affects women's extended families and often the baby's grandparents provide considerable emotional and practical support when their daughter or their child's partner is diagnosed with PP. This case study demonstrates the impact of APP's peer support on one partner and their family's journey to recovery:

"The first call I had was an emotional and cathartic affair, talking through our particular experience...the empathy/sympathy given (as well as the advice) was a huge comfort. This would manifest into a weekly catch-up for the next 4-5 months...I would look forward to each conversation and the support felt invaluable to my own management and recovery from what was happening. After ~12 weeks my partner returned home from the Mother and Baby Unit permanently, which was undeniably scary. The support from APP remained steadfast and truly helped me to rebuild my confidence in myself, as well as in my relationship - all whilst sleep deprived and learning to be a parent for the first time properly. I will be forever grateful for APP and the service they provide. I have a wonderfully supportive family and friends, but they cannot relate to your situation in the same way as someone that has experienced the initial shock and the saw-edge/staggered recovery from the illness."

Raising awareness amongst health professionals

In 2023, we continued to provide training and Expert by Experience talks to health professionals across the UK. A total of 2,671 health professionals heard one of APP's lived experience speakers in 2023 (2022: 2,287), including one-day and half-day training courses. These were across 21 different online training events (2022: 18) and 20 onsite events (2022: 17). The health professionals attending these events included midwives, health visitors, psychiatrists, mental health staff, perinatal mental health and MBU teams, psychologists, nursery nurse staff, obstetrics and gynaecology doctors, pharmacists, social workers, occupational therapists, psychology, nursing and midwifery students and mental health link workers. These events consisted of NHS training days, perinatal mental health study days, study days for health visitors, lectures to student midwives and mental health nurses, and conferences.

We continued our partnership with the Institute of Health Visiting (iHV) inputting into their two-day perinatal mental health champions training. In 2023, we delivered 8 lived experience talks on their online training courses (2022: 10), reaching 172 health visitors (2022: 250) and will continue to deliver on these courses in 2024. We also worked in collaboration with Judy Shakespeare (GPCPC (General Practitioners Championing Perinatal Mental Health)) and with the iHV to update their Good Practice resource on postpartum psychosis, which sets out what health visitors need to know about PP. The resource provides up-to-date evidence and references; it was launched during May's Maternal Mental Health Awareness Week and shared widely.

In 2023, we input into course design for midwifery and mental health degrees (Undergraduate and Postgraduate level) at three universities (Universities of York, Hull, and Central London). These courses now include three to four hours on PP, including a lived experience talk, up to date research and case study discussions to allow the students to think about their roles as professionals in the future. Feedback on APP lived experience talks in 2023 included:

"The lived experience was extremely powerful, and I will remember this forever".

"This was the most powerful part of the whole training, amazing to be given such a window into someone's lived experience. It felt like a privilege, will make me think about every interaction and its impact, and importance of being alongside clients, advocating".

"We are still talking about the excellent talk you gave us about postpartum psychosis and would like to thank you again for such a stimulating evening. It has really informed our work and will have a huge impact on the way we support our clients".

Our lived experience speakers continued to give talks and presentations in support of APP's campaigns, in particular in relation to our antenatal campaign, where speakers presented to midwifery students, obstetricians, gynaecologists and midwives at the Royal College of Obstetricians and Gynaecologists (RCOG) perinatal mental health conference, antenatal educators at the International Journal of Parent Educators Conference (antenatal educators) and a wide range of professionals at our suicide prevention webinar (see below).

In 2023, we delivered 4 sessions of APP's one-day training course (2022: 2) – Managing Postpartum

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Psychosis, training 80 health professionals (2022:33) from NHS Trusts in Lancashire and South Cumbria, Shropshire, Kent and Medway, Gloucestershire, Devon, Cambridgeshire and Peterborough. 99 percent of the delegates rated the training as excellent (2022: 100 percent, 2021: 86.7 percent) and 100 percent would recommend to other health professionals working in the perinatal period. Onsite training is consistently rated slightly higher than for those delivered online. Individual feedback included:

“Really brilliant session. Balanced, informed, inspiring, emotional. So raw and real and yet very professional and contained. Best training I've attended in a very long time.” Attendee.
“Your lived experiences were so powerful and truly emotive to hear- they inspired me to continue to improve practice and continue to love what I do in perinatal care.” Attendee

We ran two new half-day online courses for health professionals in 2023:

- Supporting dads and co-parents affected by postpartum psychosis. Delivered by our Training Coordinator, Partners Coordinator, three dad and one female partner volunteers, the workshop provided 13 attendees with research knowledge, strategies and interventions to improve support for dads and co-parents. 100 percent of attendees said they would recommend the training to other health professionals.
- Supporting Black, Asian and Minority Ethnic families affected by postpartum psychosis: The workshop, delivered by our Training Coordinator and staff from our Diverse Communities Outreach project provided 15 attendees with research knowledge of the support and information needs of women from Black, Asian and Minority Ethnic communities; and considered strategies to remove barriers and improve care.

After both workshops, 100 percent of attendees said they would recommend the training to other health professionals. Feedback included:

“The stories gave real insight into what it is like for families to go through PP.”
“The personal stories were so powerful and seeing how APP has invested in this, learning about your diverse communities and about the resources you have created was inspiring and so useful.”

The workshops were recorded and content from them is being used to develop online training modules which we plan to launch in 2024.

The phenomenal fundraising by Richard Baish, his family, colleagues and friends in memory of his wife (see p.17 below), enabled us to develop and deliver a free training webinar on suicide prevention (as well as resources to support PP antenatal education, see p14). On Wednesday 18th October, we hosted the first annual Alex Baish Memorial Lecture - Essential knowledge in preventing maternal suicide - in collaboration with the National Centre for Mental Health, General Practitioners Championing Perinatal Care, and the International Journal of Birth and Parent Education. The webinar highlighted the early symptoms of PP and the actions that should be taken to support and protect those who develop the condition. It covered the basic information all expectant families should know about PP and the information and support needs of those at higher risk. The webinar included a Q&A session with clinical, academic and lived experience speakers. We promoted the webinar widely, 2,547 health professionals, including GPs and other frontline professionals, registered to attend and many more have watched back the recording on YouTube since. Of the attendees, 92 percent rated the training as 'excellent'; 8 percent rated it 'good', whilst 100 percent agreed they would change their practice because of the webinar.

Feedback was excellent and will be used to plan the 2024 webinar:

“The webinar exceeded my expectations. It is not often that I will watch a webinar that has such a profound emotional impact on me and left me thinking and talking about a topic in the days after (in a positive way).” Attendee.
“There are no words that can really sum up how powerful this webinar was. I watched this with a student nurse, and it created such a rich conversation. Thanks so much to all involved.” Attendee.
“This webinar was so powerful that I think this should be a mandatory training video for all working in perinatal.” Attendee.

Raising awareness amongst the general public

In 2023, 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

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heard regionally and nationally. As in 2022, 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). We continued to raise awareness of PP and the vital need for an MBU in Northern Ireland. A media consultant from Northern Ireland again helped our team with media coverage and supporting storytellers there. A quarter of the regional news pieces we worked on in 2023 were focused on Northern Ireland. We also launched our antenatal campaign toolkit in May. In response to poor media reporting of tragedies related to PP in a case in the USA and UK, we developed guidance for journalists on “Responsible reporting on suicide, infanticide and intrusive thoughts linked to postpartum psychosis” and published this on our website.

In 2023, 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. We supported pieces in national, regional and health sector media. In May, we ran a social media campaign for Maternal Mental Health Awareness Week (MMHW), with support from Media Trust volunteers from UK advertising agency Ogilvy, global media agency Initiative and brand experience agency Sense Marketing (see Fundraising and strengthening our capacity below). During the campaign for Maternal Mental Health Awareness Week 2023, we reached 111,000 people: our social media reach increased by 262 percent week-on-week. Media highlights in 2023 included:

- APP storyteller Charity Horton shared her experience of PP following the birth of her triplets with The Sun.¹
- APP’s Chief Executive, Dr Jessica Heron, was quoted in a Guardian article describing APP’s MBU campaign.²
- APP Storyteller, Nia Foulkes, and APP’s National Coordinator Sally Wilson shared their experiences of Mother and Baby Units for a piece in the BBC about the new unit for North Wales.³ Sally also spoke to Wales Online about postpartum psychosis.⁴
- APP Storyteller, Karen Savage, and APP National Coordinator Hannah Bissett shared their postpartum psychosis stories in the Manchester Evening News⁵ and the Mirror.⁶
- A piece in the Reader’s Digest written by APP’s Lucy Nichol featuring comment from Jess Heron and Zebunisa Pathan - Everything You Needed to Know About Postpartum Psychosis.⁷
- APP storyteller, Tara Maguire spoke to the BBC about the need for a Mother and Baby Unit in Northern Ireland.⁸

APP has always sought to increase the public understanding of the experience of PP in a variety of ways, from writing clinical and research findings to supporting personal stories and awareness raising pieces in the arts. In 2023, we continued to support the Good Enough Mums Club, a musical produced, written, directed and performed by mums for their UK theatre tour and supported the development of a new short film, ‘Wild Animal’, directed by Beth Park. We began working with Zah Ahmad on a film short he is developing, provisionally titled “A quiet woman”. In 2022, we promoted the UK tour of “after birth”, a play written by Zena Forster and directed by Grace Duggan. APP had supported the development of this comedy which is deeply rooted in the real-life testimonies of women within the APP network. In 2023, we participated in an afterbirth project development group with the National Perinatal Epidemiology Unit at Oxford University to explore developing the play for health professional education.

In 2023, we grew both our social media followers 27,035 (2022:24,683) and reach 1,211,858 (2022: 1,052,295). Using a digital capacity building grant from The Big Give, we explored new ways of using our

¹ <https://www.thesun.co.uk/fabulous/24661144/postpartum-psychosis-triplets-mums-warning/>

² <https://www.theguardian.com/lifeandstyle/2023/jan/15/poverty-in-uk-could-increase-death-rates-during-or-after-pregnancy-warns-who>

³ <https://www.bbc.co.uk/news/articles/c7218q270q1o>

⁴ <https://www.walesonline.co.uk/news/health/my-brain-telling-baby-going-26823001>

⁵ <https://www.manchestereveningnews.co.uk/news/greater-manchester-news/thousands-women-no-idea-until-27372407>

⁶ <https://www.mirror.co.uk/news/uk-news/new-mums-rushed-mental-wards-30648666>

⁷ <https://www.readersdigest.co.uk/health/everything-you-need-to-know-about-postpartum-psychosis>

⁸ <https://www.bbc.co.uk/news/uk-northern-ireland-67417664>

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social media to reach existing and potential supporters, as well as developing our supporter newsletter systems to manage supporter journeys more effectively. The increase in newsletter engagement we saw in 2022 was sustained with an open rate of 39.5 per cent (December 2022: 38.9 per cent; December 2021: 30 per cent). We supported 32 national and regional media stories in 2023 (2022: 34) and shared these across our four main social media channels.

Campaigning for improved services

In 2023, we used our specialist expertise and lived experience voice 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), and campaigning for PP to be an essential part of all antenatal class training. PP must be managed as a medical emergency for the safety of both mother and baby. APP continues to raise awareness of PP and campaign for improved services because each year, babies lose a mother and families are bereaved, when the fact is, PP is a treatable illness and full recovery is possible. Although numbers are small, consistent with other perinatal mental health and maternity charities, we continue to see an increased number of bereaved families contact us in the post pandemic period.

In 2023, we joined two networks to further our campaigning work and collaboration with other organisations. We joined the National Suicide Prevention Alliance⁹ and the Pregnancy and Baby Charities Network¹⁰. We also continued to be an active member of the Maternal Mental Health Alliance.

Mother & Baby Unit campaign

In 2023, with support from a Rosa Women's Voices grant, we sustained our campaign for women throughout the UK to have access to a Mother and Baby Unit (MBU). In Northern Ireland, we continued to partner with local charity Maternal Advocacy and Support and the Maternal Mental Health Alliance, and to work with our volunteers from bereaved families and from our café group to engage with MPs, support media pieces, and attend meetings to keep the need for a Mother and Baby Unit on the agenda. Media pieces included: BBC News Online¹¹, The Detail¹², UTV¹³, the Guardian¹⁴ as well as podcast and YouTube discussions. In November 2023, it was announced that the Belfast Trust had been chosen as the site of a Northern Ireland Mother and Baby Unit. APP welcomed the news but with no funding yet allocated, no timeline given and no plans for women who develop PP before an MBU, we are committed to continuing the campaign. There are high levels of stigma around mental health issues in Northern Ireland. By supporting women to share their experiences of PP our campaign has helped to address this stigma, opening up conversations around perinatal mental health, its impact on mothers and their families. When women attending our NI café group first began to share their experiences, they did so anonymously but as the campaign has progressed, we have seen a marked increase in the number of people willing to tell their stories more openly and use their names. Volunteers and families in NI have valued being able to support APP's campaign.

"Action on Postpartum Psychosis has helped me in so many ways. It has helped me connect with other mums who experienced PP here in N. Ireland. This has taken away how isolating it was to have gone through PP and even discuss how it felt to have experienced this here in Northern Ireland. I was privileged to be a part of the campaign to help bring about awareness of the necessity of Northern Ireland having its own Mother and Baby Unit. I imagine when I experienced PP after my fourth child was born, recovery would have been so different as I would have not been taken to a general psychiatric ward and separated from my son. I hope for the many generations to come that Northern Ireland has better resources for mums when it comes

⁹ <https://nspa.org.uk/>

¹⁰ <https://www.miscarriageassociation.org.uk/pregnancy-baby-charities-network/>

¹¹ <https://www.bbc.co.uk/news/uk-northern-ireland-67417664>

¹² <https://www.thedetail.tv/articles/northern-ireland-s-first-psychiatric-mother-and-baby-unit-due-to-be-announced-within-days>

¹³ <https://www.itv.com/news/utv/2023-08-16/ni-mother-and-baby-unit-would-save-lives>

¹⁴ <https://www.theguardian.com/lifeandstyle/2023/jan/15/poverty-in-uk-could-increase-death-rates-during-or-after-pregnancy-warns-who> and <https://www.theguardian.com/lifeandstyle/2023/jan/15/postpartum-psychosis-new-mothers-speak-out-over-need-for-support>

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to mental illness. I am now a peer volunteer with APP, and I love that I am a part of this fantastic community of women who all come from various walks in life but are united by one thing and that is to support and uplift each other." APP volunteer.

"I wouldn't have been brave enough to share my story without the support of the café group." APP volunteer.

We continued to campaign for an MBU in Wales and Scotland, including: supporting a petition developed by APP volunteer, Lesley, for accessible MBU beds in the north of Scotland¹⁵; and, media pieces in Wales Online¹⁶, BBC News Online¹⁷, the Courier¹⁸ and Reader's Digest¹⁹.

In May, plans for a new Mother and Baby Unit were announced by Cheshire and Wirral Partnership NHS Foundation Trust to support new and expectant parents across Cheshire, Merseyside and North Wales. The APP team is working with the Cheshire, Wirral and North Wales NHS teams to ensure the voices of lived experience are heard during the development process, as well as ensuring the unit meets the specific needs of families from North Wales. Our volunteers have input into the design, landscaping, and functionality of the MBU.

Antenatal Campaign

We continued our campaign for information about postpartum psychosis to be shared at every antenatal class in the UK. Working with families affected by PP, our volunteers and antenatal class providers, we produced a toolkit to support the delivery of information about PP in classes²⁰. The toolkit, posters and downloadable social media graphics were launched as a free resource in May during Maternal Mental Health Awareness Week, shared on our social media platforms and via email to more than 700 recipients. The resources have received positive feedback:

"Just wanted to say that your awareness campaign is great. I do talk about postnatal psychosis with my antenatal class parents-to-be. I have supported one family where the mother developed PP." Antenatal class provider.

"Thank you so much for these downloadable resources. I'm an NCT antenatal teacher and have been spending 5 mins on PP since you encouraged us to, but these resources will help make the message clearer." NCT antenatal teacher.

During Maternal Mental Health Awareness week, we presented an Instagram live with the Perinatal Mental Health Partnership: 'Let's talk about postpartum psychosis'. Members of APP staff with lived experience spoke about the importance of antenatal education on PP. Also, during May, a blog post on antenatal education was published on Tommy's Pregnancy Hub with APP team member Zebi's story, which resulted in increased visits to our website²¹. 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 2023, we used our limited research capacity to support and promote a variety of studies, and to seek funding for APP's research support infrastructure.

Preliminary analysis of the data from our national survey on experiences of care for PP between 2010 and 2021 was completed in 2022 and has been used to inform meetings and service development. Detailed analysis and reporting of survey results was delayed due to capacity and funding. APP has

¹⁵ <https://petitions.parliament.scot/petitions/PE2017>

¹⁶ <https://www.walesonline.co.uk/news/health/my-brain-telling-baby-going-26823001>

¹⁷ <https://www.bbc.co.uk/news/articles/c7218q270q1o>

¹⁸ <https://www.thecourier.co.uk/fp/lifestyle/health-wellbeing/4418422/perthshire-mum-postpartum-psychosis/>

¹⁹ <https://www.readersdigest.co.uk/health/everything-you-need-to-know-about-postpartum-psychosis>

²⁰ <https://www.app-network.org/training-on-pp/antenataltoolkit/>

²¹ <https://www.tommys.org/pregnancy-information/pregnancy-news-blogs/what-postpartum-psychosis>

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been building networks to be able to support APP's research activities. In early 2024 we were working with a team at Oxford University on the detailed analysis of our 10-year dataset and preparation for publication.

We continue 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. In May 2023 we partnered with NCMH researchers to present a live webinar entitled Postpartum psychosis: from research to recovery; the webinar has since had more than 1,200 views on YouTube²². The webinar discussed recovery from postpartum psychosis and the latest research, including three projects we are collaborating on:

- *The causes and triggers of severe perinatal mental illness:* The National Centre for Mental Health (NCMH) and Action on Postpartum Psychosis (APP) are working together to understand more about the causes and triggers of severe mental illness during pregnancy and following childbirth.
- *The role of sleep in the development of postpartum psychosis:* Researchers at the Institute of Mental Health, Birmingham University, led by Dr Isabel Morales-Munoz, are investigating the role of sleep in postpartum psychosis (PP).
- *Enhancing recovery following postpartum psychosis:* Researchers at the University of East Anglia, led by Dr Jo Hodgekins, are planning a programme of research resulting in a recovery toolkit.

In 2023, publications from research we had been involved in included: our study working with NCMH examining the feasibility of cross-cultural work on PP in India and Malawi (Motherhood and Mental health (MAM-CC) study)²³; and a review of the role of sleep in the triggering of PP working with University of Birmingham Institute of Mental Health²⁴. We also published a letter in the British Journal of Psychiatry about the importance of Mother & Baby Units to women with PP²⁵.

In 2023, APP supported with recruitment or application development for over 22 research projects (2022: 42) into postpartum psychosis across a variety of UK universities. In addition to the three projects discussed in the research webinar above, our other involvement in research projects included:

- Continuing supporting a drug discovery study with the Medicines Discovery Institute, Cardiff university: 'Developing small molecules as a neurosteroid replacement strategy for treating postpartum psychosis'.
- Supporting recruitment for a University of Essex study looking at experiences of those from black backgrounds and how race affects care.
- Supporting recruitment for a University of Hull Doctorate in Clinical Psychology study on decisions about further pregnancies after postpartum psychosis.

²² <https://www.youtube.com/watch?v=umhGWwNAqQc> <https://www.ncmh.info/2023/05/05/postpartum-psychosis-from-research-to-recovery/> <https://www.app-network.org/research-into-postpartum-psychosis/from-research-to-recovery/>

²³ Yang JMK, Vaiphei K, Siliya M, Mkandawire T, Dolman C, Heron J, Wilson S, Yaresheemi S, Kitney D, Bailey L, Apsey C, Liwimbi O, Stewart R, Thippeswamy H, Jones I, Chorwe-Sungani G, Chandra P, Di Florio A. Postpartum psychosis: a public involvement perspective across three continents. Arch Womens Ment Health. 2023 Dec;26(6):831-837. doi: 10.1007/s00737-023-01347-8. Epub 2023 Aug 24. PMID: 37615717; PMCID: PMC10632256. <https://pubmed.ncbi.nlm.nih.gov/37615717/>

²⁴ Carr, C, Borges, D, Lewis, K, Heron, J, Wilson, S, Broome, MR, Jones, I, Di Florio, A & Morales-Muñoz, I 2023, 'Sleep and Postpartum Psychosis: A Narrative Review of the Existing Literature', Journal of Clinical Medicine, vol. 12, no. 24, 7550. <https://doi.org/10.3390/jcm12247550>

²⁵ Heron, J., Berrisford, G. and Bauer, A. (2023) 'RE: Effectiveness and cost-effectiveness of psychiatric mother and baby units: quasi-experimental study', The British Journal of Psychiatry, 222(4), pp. 176–177. doi:10.1192/bjp.2022.196. <https://www.cambridge.org/core/journals/the-british-journal-of-psychiatry/article/re-effectiveness-and-costeffectiveness-of-psychiatric-mother-and-baby-units-quasiexperimental-study/B81E23B1FC00A0C49E097BBE52934325>

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- Supporting with the design of the study programme and the ethics application for a University of Central London study on understanding sleep disturbance and its role in postpartum psychosis.

Fundraising and strengthening our capacity

As in 2022, the aftermath of the coronavirus pandemic, together with the cost-of-living crisis and challenges faced by the NHS, had an impact on APP. The pandemic impacted the nation's mental health, and this is especially true of women with a history of postpartum psychosis or bipolar disorder. Our staff, like many around the country, are experiencing increased mental health relapses, and we continue to increase our focus on wellbeing. We continued to improve our staff and volunteer training and development, particularly the sessions offered to peer support staff and volunteers, and to seek opportunities for staff to participate in training and events relevant to their roles and new areas of work we are developing.

On International Women's Day, APP participated in the Media Trust Women's Voices event at Google Academy in London. APP staff were teamed up with volunteers from UK advertising agency Ogilvy, global media agency Initiative and brand experience agency Sense Marketing. The team identified creative ways to increase the reach and impact of our Maternal Mental Health Awareness Week campaign (see p. 14 above for details of the campaign). Jessie, APP's Marketing and Digital Communications Coordinator, was also given the opportunity to speak at the event about APP, raising awareness of PP and our work.²⁶ We are very grateful to Media Trust for the opportunity, and our volunteer team for their hard work and creativity.

APP's new website was launched in 2023, and the team are continuing the process of reviewing older content and improving functionality and user journeys. New content was added when we launched, including information on being a parent after postpartum psychosis that would form the basis of our new insider guide published in 2024. Our data manager completed a project to simplify data recording and reporting on our NHS projects and the new system was rolled out across all of our NHS projects.

APP's Fundraiser continued to develop our fundraising strategy and improve our systems for supporting and communicating with individual fundraisers. We were successful in a number of funding applications. We ran two Big Give match funding campaigns, in May and October, raising more than £5,000 for our dads and co-parents and diverse communities peer support work. Our community voted for us to be one of six charities supported by JoJo Maman Bébé, receiving a £10,000 Helping Hands grant.

We continued to grow our Miles for Mums and Babies fundraising campaign. We had our most successful Miles for Mums and Babies campaign ever, raising nearly £33,000. Each mile reflects the journey mums, babies and families travel to be together, whilst mums receive care in Mother and Baby Units (MBUs). Many fundraisers told their own stories to help raise awareness, whilst Mother and Baby Unit and community perinatal staff teams also took part this year. Fundraisers and their chosen challenges included:

- Hazel, who cycled the 65-mile journey that she made when unwell with postpartum psychosis - from Ninewells Hospital in Dundee to the general psychiatric ward at the Murray Royal Hospital in Perth, to the Mother and Baby Unit at St John's hospital in Livingston. Hazel completed the ride one day in May and raised more than £5,200.²⁷
- Becky, who raised more than £3,300 walking the 43 miles from her home to her nearest MBU in a single day.²⁸
- Georgina and Chris, who raised more than £3k each running 54 miles in 8 weeks – the distance from their home to Nottingham MBU – raising more than £2,800.²⁹
- Adeline McCann, who ran the 10k Chase the Sun in Battersea Park to raise money and awareness after experiencing postpartum psychosis following the birth of her son, raising

²⁶ <https://mediatrust.org/2024/01/10/womens-voices-postpartum-psychosis-campaign/>

²⁷ <https://www.gofundme.com/f/action-on-postpartum-psychosis>

²⁸ <https://www.gofundme.com/f/finding-becky>

²⁹ <https://www.justgiving.com/page/georgina-woodcock-1680076895892>

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more than £1,500.³⁰

- The North Wales Perinatal Mental Health Team raised more than £1,500 by each walking 165 miles over the month of May to represent the distance from Wales's only Mother and Baby Unit in Swansea to their base in North Wales, finishing with a team away day walking up Moel Famau (meaning Mother Mountain) - the highest hill in the Clwydian range in Denbighshire.³¹
- Alice, who swam the distance from her home to the MBU where she received treatment over the number of days she spent in hospital - 71 miles in 30 days – raising more than £900.³²
- A huge team of staff, mums, and families from Nottingham's Margaret Oates' MBU completed 318 miles. The whole team completed the miles with a fabulous family walk and raised nearly £850.³³

We are very grateful to all our individual fundraisers who have found many inventive ways to fundraise and increase awareness. We'd particularly like to thank:

- Lee Smith who completed an epic 12 month, 13 challenge fundraiser including: running 5k a day for a month, a Total Warrior obstacle course, climbing Scafell Pike and a 140ft bungee jump. We'd also like to thank his friends Donna, Chris, Andrew and Phil who joined Lee's team for the Great North Run; together they raised over £2000. More details of Lee's challenges are on our website ³⁴ Lee planned to carry on fundraising with a place in the 2024 London Marathon.
- Alex Heron, a GB Triathlete from Mumbles, Wales, who took on the Tenby Ironman in September 2023, hoping to be the first 75–79-year-old category entrant to complete the gruelling Welsh contest – one of the world's toughest Ironman races. It consists of a sea swim of 3.8 kilometres, a cycle race of 180 kilometres, ending with a full 42-kilometre marathon run. Although the exceptionally hot weather on the day meant that he couldn't fully complete the challenge, Alex completed the sea swim and most of the cycle race and raised more than £3,700.
- A group of 12 APP staff and families from the northwest took part in the 'Color Rush' at Manchester in June. It was a fun event consisting of lots of coloured powder, foam, giant inflatable obstacles, and some running. They raised more than £1,000 and had so much fun that a larger team is entering the event in 2024.
- Our many marathon, half-marathon and other runners, including: Rob Rowe who ran his first marathon in Brighton raising more than £2,600³⁵; Claire who ran the Hillsborough half marathon in memory of her friend Orlaith³⁶, raising more than £2,500; and Flora and Mollie, who ran the Hackney half after their friend suffered from PP, raising more than £4,100³⁷.

Finally, we would like to thank Richard Baish, his family, friends and colleagues who in 2023 raised more than £70,000, and an immeasurable amount of awareness of postpartum psychosis, in memory of Richard's wife Alex. Richard and a team of friends completed a 475-mile, 5-day bike ride from Glasgow down to Oxfordshire in May.

Katie Ball completed the Three Peaks Challenge, whilst Michael Henderson-Sowersby took on the 100km 'Race to the Stones' ultra-marathon. Colleagues, friends of the family and local people attended a quiz evening, disco and raffle in September, raising more than £3,300 and further awareness. Claire Willis, event organiser, told APP: "When I was asking local business for prizes for the raffle one lady in her late 60's started to cry and went on to tell me she had PP over 40 years ago, but it wasn't recognised, she explained to me what she went through and how the doctors thought she was crazy. This, to me, shows how important the work that you do is." The incredible fundraising by Richard Baish, his family

³⁰ <https://www.justgiving.com/page/adeline-mccann-app10k>

³¹ <https://www.justgiving.com/page/perinatalteambcuhb>

³² <https://www.justgiving.com/page/a-doyle-1681976901337>

³³ <https://www.justgiving.com/page/nottsmbu-1681209781226>

³⁴ <https://www.app-network.org/news/fundraising/lees-final-challenge/>

³⁵ <http://www.justgiving.com/Rob-Rowe6>

³⁶ <https://www.justgiving.com/page/claire-tennyson-1682358796435>

³⁷ <https://www.justgiving.com/fundraising/Flora-Mollie>

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and friends enabled us to deliver a free webinar on suicide prevention (see p. 11 above) and supported the development of our postpartum psychosis (PP) toolkit for antenatal educators and the associated media campaign (see p. 14 above).

Financial Review

The Statement of Financial Activities on page 25 shows APP's income and expenditure for the year. During the year ended 31 December 2023, expenditure very slightly exceeded income by £1,949. In our Unrestricted Funds, expenditure exceeded income by £1,728. Income from charitable activities increased, reflecting a higher number of grants received and a slight increase in contract income. Income from donations was similar to 2022. Income from charitable activities increased with new grants being secured and an increase in contract income. Investment income increased significantly due to increases in the interest rate on an existing account and new interest-bearing accounts being opened to hold funds held in reserve. In our restricted funds expenditure exceeded income by £221. This reflects expenditure of funds carried forward from the prior year for dads and co-parents peer support which was offset by income from a Big Give match funding campaign in October 2023 which will be spent across the 2023 and 2024 financial years.

The Balance Sheet on page 26 shows that at 31st December 2023, APP was holding £ 116,100; of which £3,779 was restricted funds. At the start of 2023, APP's reserves policy was to hold three months core operating costs in reserve to guard against fluctuations in income. On 1st January 2023, APP was holding £114,049 in free reserves, which was within the range then recommended by our reserves policy. (£110,000 - £120,000). During 2023, Trustees reviewed APP's reserves policy, considering income risks, working capital requirements, future expenditure commitments and cessation risk. Trustees agreed a new reserves policy, which is to maintain reserves within the range of three to five months of core charitable expenditure. In determining this range, Trustees 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. At the end of 2023, core charitable expenditure was considered to be £37,634 per month, and the recommended reserves range was deemed to be £113,000 to £188,000. On 31st December 2023, APP was holding £110,634 in free reserves, which was slightly below the range then recommended by our reserves policy. Trustees have agreed an annual plan and budget which would bring reserves back into the 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. Her time for this was bought by the charity from the University of Birmingham until 31st December 2023. From 1st January 2024, Dr Heron has been employed directly by 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

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Peer Support Coordinator; Peer Support Groups Coordinator; Partners Peer Support Coordinator; National NHS Projects 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. A skills audit has been undertaken and efforts are made to recruit Trustees who meet the skills requirement. In 2016, the Board agreed to aim towards a leaner Board, with all the skills necessary to the functioning of the charity. During 2023, two new board members were appointed.

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.

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 early 2022 we recruited a dedicated fundraiser who has overhauled fundraising systems and processes. In December 2022, the board agreed a plan to increase income, control expenditure and focus staff time on income generation. 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 (for example peer support contracts), 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 2022 were financial sustainability, management capacity and operational risks, in particular high rates of mental health relapse in staff and volunteers and the approaching end of the hosting arrangement with Birmingham University. Financial sustainability was addressed by: frequent reviews of forecast income and expenditure by the board; implementing plans for increasing income and cutting costs; securing new grant and contract funding, reviewing our fundraising strategy and stewardship of supporters; and carefully planning and budgeting for 2024. Management capacity risks were addressed through utilising the skills of new staff members to improve systems and processes, and contracting support for the website development project. We continued to actively network to seek Board members to fill identified skills gaps, with two new board members with lived experience of PP and relevant professional experience joining in 2023. Operational risks arising from mental health relapse were addressed through: continuing to agree new flexible working patterns, prioritise and reassign work; holding regular meetups with staff, contractors and volunteers to provide pastoral care and support; and reviewing staff Wellbeing Plans. Operational risks arising from the end of the hosting relationship with Birmingham University were addressed through: exploring relationships with other universities with maternal mental health or psychosis research programmes; and the board researching and agreeing appropriate terms and conditions to employ Dr Heron directly.

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Plans for Next Year

Action on Postpartum Psychosis plans for 2024 were grouped under the following objectives:

- 1. Supporting women and families.** We plan to maintain and grow our national and regional peer support service by:
 - Maintaining our strong peer support presence, offering online, in person, video call and café group support to all who need it nationally and via our NHS projects, and maintaining long term contact with those we support.
 - Continuing to: train new peer supporters, prioritising volunteers from diverse communities Northern Ireland, Scotland, Wales & NHS project regions, holding two training days; and continue developing the ongoing training programme and creative and wellbeing activities for volunteers, holding monthly sessions, building a strong engaged, well supported volunteer community.
 - Developing a bereavement support online group and one-to-one calls, training our first bereaved partner peer supporter and grandparent volunteer. We will work with our volunteers and a consultant to run a series of focus groups to better understand the support and information needs of bereaved partners and family members.
 - Growing our diverse communities peer support using sessional staff and volunteers, supporting staff to outreach into communities to educate about PP, using pieces in social media, and networking to identify more volunteers from Black, Asian, and other ethnic communities and LGBTQ+ backgrounds. To continue our Muslim women's group and to set up a Black women's café group once staff/volunteers have been identified. Funding for a diverse communities' Coordinator and project will be sought to further develop this work.
 - Increasing attendance at café groups, building community and café group activities, developing protocols and resources for café group leaders.
 - Developing initiatives to identify more partner volunteers, increasing staff capacity and awareness of the dads and co-parents project as funding allows.
- 2. Raising awareness amongst health professionals.** We plan reach more health professionals with training by:
 - Continuing to offer online bookable one-day training and NHS commissioned in-person training days.
 - Arranging a second 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 (RCPsych) and strengthening new collaborations with GP bodies and antenatal educators training, delivering tailored training & lived experience talks.
 - Continuing to run specialist training on supporting partners and working with women from diverse backgrounds, using recorded content to develop our first two paid online modules.
- 3. Raising awareness amongst the general public.** We plan to raise awareness in the general public to reduce stigma and misinformation by:
 - Developing media and communications for the main 'moments' across the year (for example Maternal Mental Health Awareness Week, Black Maternal Mental Health Week, World Mental Health Day, and Suicide Awareness Week); placing case studies in the media and social media to support APP campaigns, new projects, and to raise awareness of APP peer support, training and information resources.
 - Supporting APP's relationship with: Ambassadors; Maternal Mental Health Alliance; National Suicide Prevention Alliance; Pregnancy & Baby Charities Network; NHS (influencers in perinatal mental health professionals, midwifery, health visiting, psychiatry); universities (key postpartum psychosis and PMH academics). Using the Radio 4 appeal media campaign and other opportunities to engage our community and raise awareness of PP.
 - Supporting engagement with & reporting on creative projects as staff capacity

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allows.

4. **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:
 - Continuing APP's MBU campaign, with a particular focus on: maintaining pressure for an MBU for Northern Ireland; supporting calls for MBU beds in Northern Scotland; building good relationships with all MBUs, connecting and helping to amplify their social media; sharing positive MBU stories to demonstrate their value; engaging with the North Wales/Chester MBU build, supporting Lived Experience engagement; and monitoring NHS England bed number commitments and responding to any risk of bed closures.
 - Continuing APP's antenatal education class campaign: developing social media assets to convey PP information to pregnant women and partners and to raise awareness of the antenatal education toolkit to midwives, health visitors, antenatal educators and GPs; and repeat APP's YouGov survey at the end of 2024 and social media midwife survey to determine the impact of the campaign.
5. **Research.** We will continue to facilitate research studies of importance to women and families affected by postpartum psychosis, if capacity and funding allows, by:
 - Introducing an annual research gaps survey and promoting findings to universities/funders.
 - Seeking funding for our research support infrastructure
 - Finalising APP's MBU survey reports.
6. **Strengthening our capacity to fulfil our charitable objectives.** We plan to strengthen our internal systems to support sustainable growth by:
 - Developing a more diverse fundraising base, stronger fundraising processes and increased grassroots income, in particular: delivering an effective Radio 4 appeal; building relationships with grassroots fundraisers, offering new events and activities; increasing our capacity for trust and foundation application writing; and identifying potential funding opportunities to develop APP as a research support facility.
 - Further developing the data manager role - implementing more efficient processes to manage organisational data simply and effectively.
 - Continuing work on our First Point of Contact project, reviewing our beneficiary journey and information, supporting recruitment to research and long-term engagement with APP.
 - Further developing our impact reporting
 - Continuing development as gold standard lived experience, family friendly employer.

ACTION ON POSTPARTUM PSYCHOSIS
TRUSTEES' REPORT
FOR THE YEAR ENDED 31 DECEMBER 2023

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. grant fundraising and health economics). Directors/Trustees during 2023 were as follows:

Dr Giles Berrisford	Chair	
Annette Bauer	Treasurer	
Catherine Cho		(appointed 30 th March 2023)
Dr Clare Dolman		
Sarah Hind		
Anna Jones	Vice Chair	
Professor Ian Jones		
Tracey Robinson		(appointed 20 th July 2023)

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 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.

ACTION ON POSTPARTUM PSYCHOSIS
TRUSTEES' REPORT
FOR THE YEAR ENDED 31 DECEMBER 2023

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

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 2023.

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:

ACTION ON POSTPARTUM PSYCHOSIS

STATEMENT OF FINANCIAL ACTIVITIES **(INCORPORATING AN INCOME AND EXPENDITURE ACCOUNT)** **FOR THE YEAR ENDED 31 DECEMBER 2023**

	Notes	Unrestricted funds £	Restricted funds £	2023 Total funds £	2022 Total funds £
INCOME AND ENDOWMENTS FROM					
Donations and legacies	2	252,231	5,999	258,230	265,463
Charitable activities	5				
General		261,397	24,700	286,097	232,996
Other trading activities	3	-	-	-	1,212
Investment income	4	1,288	-	1,288	86
Other income		-	-	-	25
Total		<u>514,916</u>	<u>30,699</u>	<u>545,615</u>	<u>499,782</u>
EXPENDITURE ON					
Raising funds	6	27,998	234	28,232	19,494
Charitable activities	7				
General		<u>488,646</u>	<u>30,686</u>	<u>519,332</u>	<u>552,701</u>
Total		<u>516,644</u>	<u>30,920</u>	<u>547,564</u>	<u>572,195</u>
NET INCOME/(EXPENDITURE)		(1,728)	(221)	(1,949)	(72,413)
RECONCILIATION OF FUNDS					
Total funds brought forward		<u>114,049</u>	<u>4,000</u>	<u>118,049</u>	<u>190,462</u>
TOTAL FUNDS CARRIED FORWARD		<u>112,321</u>	<u>3,779</u>	<u>116,100</u>	<u>118,049</u>

CONTINUING OPERATIONS

All income and expenditure has arisen from continuing activities.

STATEMENT OF FINANCIAL POSITION
31 DECEMBER 2023

	Notes	2023 £	2022 £
FIXED ASSETS			
Tangible assets	13	1,687	-
CURRENT ASSETS			
Debtors	14	63,916	35,324
Cash at bank		<u>129,300</u>	<u>172,065</u>
		193,216	207,389
CREDITORS			
Amounts falling due within one year	15	(78,803)	(89,340)
		<u> </u>	<u> </u>
NET CURRENT ASSETS		<u>114,413</u>	<u>118,049</u>
TOTAL ASSETS LESS CURRENT LIABILITIES		<u>116,100</u>	<u>118,049</u>
NET ASSETS		<u>116,100</u>	<u>118,049</u>
FUNDS	17		
Unrestricted funds:			
General Fund		112,321	114,049
Restricted funds		<u>3,779</u>	<u>4,000</u>
TOTAL FUNDS		<u>116,100</u>	<u>118,049</u>

The charitable company is entitled to exemption from audit under Section 477 of the Companies Act 2006 for the year ended 31 December 2023.

The members have not required the company to obtain an audit of its financial statements for the year ended 31 December 2023 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 financial statements were approved by the Board of Trustees and authorised for issue on and were signed on its behalf by:

.....
A Bauer - Trustee

The notes form part of these financial statements

ACTION ON POSTPARTUM PSYCHOSIS

STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 DECEMBER 2023

	Notes	2023 £	2022 £
Cash flows from operating activities			
Cash generated from operations	1	<u>(41,078)</u>	<u>30,010</u>
Net cash (used in)/provided by operating activities		<u>(41,078)</u>	<u>30,010</u>
Cash flows from investing activities			
Purchase of tangible fixed assets		(1,687)	-
Sale of tangible fixed assets		<u>-</u>	<u>25</u>
Net cash (used in)/provided by investing activities		<u>(1,687)</u>	<u>25</u>
		<u> </u>	<u> </u>
Change in cash and cash equivalents in the reporting period		(42,765)	30,035
Cash and cash equivalents at the beginning of the reporting period		<u>172,065</u>	<u>142,030</u>
Cash and cash equivalents at the end of the reporting period		<u>129,300</u>	<u>172,065</u>

The notes form part of these financial statements

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 31 DECEMBER 2023

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

	2023 £	2022 £
Net expenditure for the reporting period (as per the Statement of Financial Activities)	(1,949)	(72,413)
Adjustments for:		
Depreciation charges	-	280
Profit on disposal of fixed assets	-	(25)
(Increase)/decrease in debtors	(28,592)	53,760
(Decrease)/increase in creditors	<u>(10,537)</u>	<u>48,408</u>
Net cash (used in)/provided by operations	<u>(41,078)</u>	<u>30,010</u>

2. ANALYSIS OF CHANGES IN NET FUNDS

	At 1.1.23 £	Cash flow £	At 31.12.23 £
Net cash			
Cash at bank	<u>172,065</u>	<u>(42,765)</u>	<u>129,300</u>
	<u>172,065</u>	<u>(42,765)</u>	<u>129,300</u>
Total	<u>172,065</u>	<u>(42,765)</u>	<u>129,300</u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS **FOR THE YEAR ENDED 31 DECEMBER 2023**

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.

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 its estimated useful economic life of 3 years, on a straight line basis.

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.

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.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued **FOR THE YEAR ENDED 31 DECEMBER 2023**

1. ACCOUNTING POLICIES - continued

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 £	2023 Total funds £	2022 Total funds £
Donations	231,688	5,010	236,698	258,211
Gift aid	<u>20,543</u>	<u>989</u>	<u>21,532</u>	<u>7,252</u>
	<u>252,231</u>	<u>5,999</u>	<u>258,230</u>	<u>265,463</u>

In the prior year, £242,978 of the income related to unrestricted funds and £22,485 to restricted funds.

3. OTHER TRADING ACTIVITIES

	Unrestricted funds £	Restricted funds £	2023 Total funds £	2022 Total funds £
Sale of literature	-	-	-	91
Income from Other Trading activities	<u>-</u>	<u>-</u>	<u>-</u>	<u>1,121</u>
	<u>-</u>	<u>-</u>	<u>-</u>	<u>1,212</u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2023

4. INVESTMENT INCOME

	Unrestricted funds £	Restricted funds £	2023 Total funds £	2022 Total funds £
Bank interest	<u>1,288</u>	<u>-</u>	<u>1,288</u>	<u>86</u>

In the prior year, £86 of the income related to unrestricted fund and £nil to restricted funds.

5. INCOME FROM CHARITABLE ACTIVITIES

	2023 General £	2022 Total activities £
Voices From The Front/Rosa	7,000	-
Other Trusts and Foundations	19,200	4,375
Contract Income - Lancashire and South Cumbria NHS Foundation Trust	68,665	67,530
Contract Income - Birmingham and Solihull Mental Health NHS Foundation Trust	100,823	96,489
Contract Income - Black Country Healthcare NHS Foundation Trust	50,695	11,775
Contract Income - Greater Manchester Mental Health NHS Foundation Trust	16,021	-
Contract Income - Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust	-	34,429
Workforce Training and Experts by Experience	17,643	18,398
Research contracts	6,050	-
	<u>286,097</u>	<u>232,996</u>

In the prior year, £228,621 of the income related to unrestricted funds and £4,375 to restricted funds.

6. RAISING FUNDS

Raising donations and legacies

	Unrestricted funds £	Restricted funds £	2023 Total funds £	2022 Total funds £
Staff costs	18,737	-	18,737	14,393
Fundraising materials and other fundraising costs	<u>9,261</u>	<u>234</u>	<u>9,495</u>	<u>5,101</u>
	<u>27,998</u>	<u>234</u>	<u>28,232</u>	<u>19,494</u>

In the prior year, £19,394 of the expenditure related to unrestricted funds and £100 to restricted funds.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued **FOR THE YEAR ENDED 31 DECEMBER 2023**

7. CHARITABLE ACTIVITIES COSTS

	Direct Costs (see note 8) £	Support costs (see note 9) £	Totals £
General	<u>511,184</u>	<u>8,148</u>	<u>519,332</u>

In the prior year, £524,503 of the expenses related to unrestricted funds and £28,198 to restricted funds.

8. DIRECT COSTS OF CHARITABLE ACTIVITIES

	2023 £	2022 £
Staff costs	404,279	397,000
Recruitment and Health & Safety	621	32
Consultancy	55,922	68,993
Project costs	918	914
Travel	14,837	18,555
Information materials and awareness raising	5,673	30,160
Volunteer training & expenses	2,179	1,330
Office and running costs	24,309	27,885
Workforce training and experts by experience costs	2,446	32
Bad debts	-	195
Depreciation	-	280
	<u>511,184</u>	<u>545,376</u>

9. SUPPORT COSTS

	Governance costs £
General	<u>8,148</u>

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

	2023 General £	2022 Total activities £
Independent examiners fee	2,310	2,310
Accountancy fees	5,559	4,768
Other fees	<u>279</u>	<u>247</u>
	<u>8,148</u>	<u>7,325</u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 DECEMBER 2023

10. NET INCOME/(EXPENDITURE)

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

	2023	2022
	£	£
Depreciation - owned assets	-	280
Surplus on disposal of fixed assets	-	(25)
Independent Examination Fee	<u>2,310</u>	<u>2,310</u>

11. TRUSTEES' REMUNERATION AND BENEFITS

There were no trustees' remuneration or other benefits for the year ended 31 December 2023 nor for the year ended 31 December 2022.

Trustees' expenses

There were no trustees' expenses paid for the year ended 31 December 2023 nor for the year ended 31 December 2022.

12. STAFF COSTS

	2023	2022
	£	£
Wages and salaries	384,988	375,209
Social security costs	24,612	23,883
Other pension costs	<u>13,416</u>	<u>12,301</u>
	<u>423,016</u>	<u>411,393</u>

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

	2023	2022
Core charitable activity	<u>15</u>	<u>17</u>

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 £55,767 (2022: £42,824).

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 DECEMBER 2023

13. TANGIBLE FIXED ASSETS

	Office equipment £
COST	
At 1 January 2023	1,200
Additions	<u>1,687</u>
At 31 December 2023	<u>2,887</u>
DEPRECIATION	
At 1 January 2023 and 31 December 2023	<u>1,200</u>
NET BOOK VALUE	
At 31 December 2023	<u><u>1,687</u></u>
At 31 December 2022	<u><u>-</u></u>

14. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2023	2022
	£	£
Trade debtors	52,191	23,686
Prepayments and accrued income	<u>11,725</u>	<u>11,638</u>
	<u><u>63,916</u></u>	<u><u>35,324</u></u>

15. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2023	2022
	£	£
Trade creditors	516	4,548
Social security and other taxes	-	7,228
Other creditors	299	543
Accruals and deferred income	<u>77,988</u>	<u>77,021</u>
	<u><u>78,803</u></u>	<u><u>89,340</u></u>

Deferred income includes income received during the period of £38,186 (2022: £54,100) which relates to services to be provided during the financial year ended 31 December 2023.

16. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Unrestricted funds	Restricted funds	2023 Total funds	2022 Total funds
	£	£	£	£
Fixed assets	1,687	-	1,687	-
Current assets	189,437	3,779	193,216	207,389
Current liabilities	<u>(78,803)</u>	<u>-</u>	<u>(78,803)</u>	<u>(89,340)</u>
	<u><u>112,321</u></u>	<u><u>3,779</u></u>	<u><u>116,100</u></u>	<u><u>118,049</u></u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued **FOR THE YEAR ENDED 31 DECEMBER 2023**

17. MOVEMENT IN FUNDS

	At 1.1.23 £	Net movement in funds £	At 31.12.23 £
Unrestricted funds			
General Fund	114,049	(1,728)	112,321
Restricted funds			
Dad's & Co-parents Peer Support	4,000	(4,000)	-
Diverse Communities Peer Support	-	3,393	3,393
Voices From The Frontline/Rosa	-	386	386
	<u>4,000</u>	<u>(221)</u>	<u>3,779</u>
TOTAL FUNDS	<u>118,049</u>	<u>(1,949)</u>	<u>116,100</u>

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

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General Fund	514,916	(516,644)	(1,728)
Restricted funds			
Other Peer Support	7,500	(7,500)	-
Dad's & Co-parents Peer Support	6,959	(10,959)	(4,000)
Digital Capacity Building	700	(700)	-
Diverse Communities Peer Support	5,540	(2,147)	3,393
NE Cafe Group	3,000	(3,000)	-
Voices From The Frontline/Rosa	<u>7,000</u>	<u>(6,614)</u>	<u>386</u>
	<u>30,699</u>	<u>(30,920)</u>	<u>(221)</u>
TOTAL FUNDS	<u>545,615</u>	<u>(547,564)</u>	<u>(1,949)</u>

Comparatives for movement in funds

	At 1.1.22 £	Net movement in funds £	At 31.12.22 £
Unrestricted funds			
General Fund	126,494	(12,445)	114,049
Designated Fund	<u>58,530</u>	<u>(58,530)</u>	<u>-</u>
	185,024	(70,975)	114,049
Restricted funds			
Other Peer Support	5,438	(5,438)	-
Dad's & Co-parents Peer Support	-	4,000	4,000
	<u>5,438</u>	<u>(1,438)</u>	<u>4,000</u>
TOTAL FUNDS	<u>190,462</u>	<u>(72,413)</u>	<u>118,049</u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued **FOR THE YEAR ENDED 31 DECEMBER 2023**

17. 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	426,718	(439,163)	(12,445)
Designated Fund	<u>46,204</u>	<u>(104,734)</u>	<u>(58,530)</u>
	472,922	(543,897)	(70,975)
Restricted funds			
Other Peer Support	-	(5,438)	(5,438)
Dad's & Co-parents Peer Support	4,000	-	4,000
Big Give Peer Support	16,235	(16,235)	-
Digital Capacity Building	375	(375)	-
Marce 2022	<u>6,250</u>	<u>(6,250)</u>	<u>-</u>
	<u>26,860</u>	<u>(28,298)</u>	<u>(1,438)</u>
TOTAL FUNDS	<u>499,782</u>	<u>(572,195)</u>	<u>(72,413)</u>

Unrestricted funds

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

Designated funds

Organisational Transformation Fund

In 2019, Trustees designated £60,000 for organisational transformation work in 2020. Whilst significant progress was made, the impact of the pandemic meant some planned organisational transformation work was set aside. In planning for 2021, Trustees considered the constraints under which the Charity was operating in 2020 as the organisation expanded and the pandemic impacted upon capacity and priorities. Organisational transformation priorities were included in the 2021 plan and budget including: data management and financial forecasting systems; conducting a data security review; a ten-year impact project; website structure and content review; recruiting a fundraiser; and further developing APP's project management structure. The Trustees designated a further £25,000 to complete the work initially planned in 2020 and the new priorities added for 2021.

In 2021, the coronavirus pandemic continued to have a significant impact on APP: plans for the year were adapted; staff and resources were directed to peer support, signposting and disseminating information about PP and the support available. This reprioritisation meant that some organisational transformation work was delayed, in particular the website, CRM and impact report projects were running behind their original schedules at year end.

In 2022, the remaining designated organisational transformation funds allocated to complete these projects were spent in full.

Morpeth and Black Country Peer Support Fund

In December 2021, Trustees decided to designate the funds required for APP to meet its existing commitments to peer support projects in the Black Country and Morpeth. The funding for these projects to October 2022 and April 2022 had already been paid to APP, so Trustees felt it was important to set aside the funds to complete the agreed work. In 2022, the funds allocated were spent in full.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued **FOR THE YEAR ENDED 31 DECEMBER 2023**

17. MOVEMENT IN FUNDS - continued

Restricted funds

Dads & Co-parents Peer Support

In December 2022, The D'Oyly Carte Charitable Trust made a grant of £4000 to support APP's Dads and Co-parents peer support project. In addition, APP successfully applied to the Big Give's Kind2Mind Fund to run a match funding campaign in May 2023. The campaign raised more than £5,000, including match funding, for the Dads & Co-parents peer support project. We also received an unexpected £1,500 payment from the Big Give which was to match the gift aid received on our 2023 Women & Girls match funding campaign. This earlier campaign had supported the entirety of our national peer support service, including the Dads & Co-parents work, so this extra funding was used for the Dad's & Co-parents work.

The Dads & Co-parents Peer Support project connects dads and co-parents whose partner has 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. Our peer support staff and trained dad and co-parent volunteers also provide support on our online forum. The D'Oyly Carte Charitable Trust grant and Big Give fundraising income were spent on this project in 2023.

Digital Capacity Building

APP received a second grant for digital capacity building of £700 from The Big Give in 2023. We used this grant to continue exploring new ways using our social media to reach existing and potential new supporters, as well as developing our supporter newsletter systems and a new presentation template for our training.

National Peer Support

APP received grants from three charitable foundations - The Hospital Saturday Fund (£2,000); John Coates Charitable Trust (£3,000) and The Carmela and Ronnie Pignatelli Foundation (£2,500) - to support its national peer support project in 2023. These grants funded staff time on our national peer support work, training for our peer support staff, and online and face-to-face café groups.

NE Café Group

APP received a grant (£3,000) from the Sir James Knott Trust to continue running a peer support café group in the North East of England following the end of our NHS contract in this region.

Voices From The Frontline/Rosa

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.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued **FOR THE YEAR ENDED 31 DECEMBER 2023**

17. MOVEMENT IN FUNDS - continued

Marce 2022

APP received a donation to support research into postpartum psychosis, particularly through APP participating in the biennial International Marcé Society for Perinatal Mental Health Conference, which was held in London in 2022. This would promote lived experience involvement in research and develop APP's global profile and networks. APP staff and volunteers with lived experience presented in two symposiums including presenting the impact of APP's work over the last decade, exploring the ingredients for lasting impact, lessons learned, and how this learning might be used to influence care for women and families affected by PP globally. The funds were used for conference and staff travel costs.

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.

18. 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 £13,417 (2022: £11,913) Contributions totalling £nil (2022: £nil) were payable to the fund at the balance sheet date.

19. RELATED PARTY DISCLOSURES

Action on Postpartum Psychosis was hosted by the University of Birmingham until 31st December 2023. During 2023 Action on Postpartum Psychosis paid a hosting fee to the University of £42,560 (2022: £40,660) The charity receives benefits from this relationship including meeting and office space.

The charity has included an accrual of £28,496 (2022: £10,555) representing the amount outstanding to the University of Birmingham at 31 December 2023.

During the year, Trustees made donations to the charity totalling £2,493 (2022: £7,503).

Accounts

REGISTERED COMPANY NUMBER: 07466643 (England and Wales)
REGISTERED CHARITY NUMBER: 1139925

ACTION ON POSTPARTUM PSYCHOSIS
(A COMPANY LIMITED BY GUARANTEE)

TRUSTEES' REPORT AND

UNAUDITED FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2022

ACTION ON POSTPARTUM PSYCHOSIS

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FOR THE YEAR ENDED 31 DECEMBER 2022

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ACTION ON POSTPARTUM PSYCHOSIS

REFERENCE AND ADMINISTRATIVE DETAILS **FOR THE YEAR ENDED 31 DECEMBER 2022**

TRUSTEES	A Bauer G S Berrisford C K Cho (appointed 30.3.23) C Dolman S A Hind I R Jones A R Jones A Sampson (resigned 5.10.22)
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
SOLICITORS (PRO BONO)	Howard Kennedy LLP No 1 London Bridge London SE1 9BG

ACTION ON POSTPARTUM PSYCHOSIS

REFERENCE AND ADMINISTRATIVE DETAILS
FOR THE YEAR ENDED 31 DECEMBER 2022

BANKERS

HSBC Bank PLC
18 High Street
Burton on Trent
Staffordshire
DE14 1HU

The Cooperative Bank PLC
1 Balloon Street
Manchester
M60 4EP

Bath Building Society
15 Queen Square
Bath
BA1 2HN

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT FOR THE YEAR ENDED 31 DECEMBER 2022

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 the largest percentage of psychiatric deaths. During the last decade, PP-related maternal deaths have become rare, although maternal suicides as a whole have continued to increase. Early evidence suggests that deaths due to PP are again 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 new 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 and 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.

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT **FOR THE YEAR ENDED 31 DECEMBER 2022**

Objectives and Activities in 2022

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 2022 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 2022, we aimed to maintain and grow our national and regional peer support services by:

- Maintaining our NHS projects and ensuring the resilience of each project under a range of scenarios (e.g., staff sickness, pandemic restrictions) by training and supporting employees, sessional workers and new volunteers. Strengthening our NHS peer worker team with ongoing training, opportunities to meet regularly online, sharing resources and participating in co-working days.
- Building links with the newly developing provider collaboratives and strengthening links with all UK MBU peer workers and ward managers with the aim of reaching all MBUs with peer support in the future.
- Growing our national peer support team, to meet demand for forum, email, and social media support, together with online wellbeing, creative and community building activities, and further developing our staff and volunteer ongoing training programme.
- Developing protocols to support our network of café groups, increasing attendance, and ensuring they are safely run and well-advertised.
- Recruiting volunteers in Northern Ireland, Scotland and North Wales and setting up café groups to deliver support and facilitate campaigning. Continuing supporting café groups in Wales and establishing up to two new café groups in Northern Ireland and Scotland.
- Running regular activities to engage partners, grandparents, and Black, Asian and minority ethnic communities to increase engagement. Producing a written plan to reach into Black, Asian and minority ethnic communities with input from our volunteers.

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.

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT **FOR THE YEAR ENDED 31 DECEMBER 2022**

Raising awareness amongst health professionals

In 2022, we aimed to reach more health professionals with training by:

- delivering six one-day workforce training sessions (either as online sessions, in person sessions, or NHS-commissioned sessions for particular NHS teams), promoting, evaluating and seeking accreditation for this training
- Continuing our training collaboration with the Institute of Health Visiting (iHV) and building collaborations with other professional bodies, training, supporting and developing resources for Lived Experience speakers to engage with health professionals. Supporting up to 50 lived experience speaker events throughout the year.
- Surveying professional groups to identify training needs with a view to the future development of e-modules. Identifying a provider to develop APP training modules and creating a timetable for module development and outline of costs.

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 2022, 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. We planned to use media case studies and social media to raise awareness of our lifesaving information and support, using storytelling to help the public understand PP and the importance of our work. In particular, we planned to share stories from women, partners and families:

- about care received in an MBU and the impact of not being able to access an MBU bed; and
- about the impact of not hearing about PP during antenatal classes, and not knowing about the illness before diagnosis.

We also planned to continue supporting support film, theatre, TV or book projects that tell PP stories, linking creatives to our network of women and families with lived experience.

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

In 2022, we aimed to use our specialist expertise and lived experience voice to create change in systems that are important to women and families affected by postpartum psychosis. Our campaigning work is towards our goal that that all women and families in the UK have access to the services they need to get help and recover from PP.

We planned to continue campaigning for all women affected by postpartum psychosis in the UK to have access to a Mother and Baby Unit (MBU), a specialist perinatal mental health team, well-trained health professionals, information and peer support. We planned to continue our campaign to highlight the gaps in Mother and Baby Unit provision in North Wales, Northern Ireland and Scotland working with the Maternal

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT **FOR THE YEAR ENDED 31 DECEMBER 2022**

Mental Health Alliance (MMHA) and National Society for the Prevention of Cruelty to Children (NSPCC). We aimed to ensure MBUs are valued by the public and policy makers, by sharing powerful stories from women, partners and families at national events, at key meetings, to influencers, on social media and in the press. We planned to continue connecting with MBU staff and NHS Trusts to support MBU communications and share good news stories. We planned to prepare press releases and expert commentary, analysing and reporting on APP's MBU data collected in our recent 10-year survey.

We planned to continue developing our campaign for PP to be an essential part of all antenatal class training. We would: promote the findings of our YouGov survey about PP antenatal class education; survey midwives and antenatal educators about PP content in antenatal education, fears and practice, using the results to develop content, suggested phrases, and an online Q&A for midwives/NCT providers in 2023.

Research

In 2022, we aimed to continue to facilitate research studies of importance to women and families affected by postpartum psychosis. We aimed to analyse and report on APP's MBU survey and plan to maximise the impact of the results. We planned to build stronger links with the Institute of Mental Health in Birmingham University and the National Centre for Mental Health at Cardiff University, working with them to raise awareness of APP, develop funding proposals, and share communications. We would survey women and families on research gaps, publishing results on our website, liaising with funders and research groups to make plans to fill these gaps. We would support and engage our Lived Experience research consultation group, developing our processes for supporting lived experience co-production, and begin considering improvements to processes needed to build APP's research register and engage our community in research participation.

Fundraising and strengthening our capacity

In 2022, we aimed to strengthen our capacity to fulfil our charitable objectives through transforming APP's data and management systems in order to manage our rapid growth. We planned to build fundraising capacity by appointing an experienced fundraiser to oversee the growth of APP's fundraising campaigns and grassroots fundraising. We planned to increase core capacity by increasing administrative support to the management team, research, training and NHS projects. We aimed to continue to develop staff training, staff support practices, and report on pay and conditions best practice to support the further development of APP as a model lived experience/working parent employer. We also aimed to refresh the website design and work through web content section by section. We planned to improve internal processes by appointing a staff member with data management and CRM implementation expertise to implement a CRM towards the end of 2022 and oversee a review of data policies and IT security. We also planned to carry out the groundwork considering the organisational capacity and structure required for future growth which would enable us to begin to seek funding for pilot international work in 2023.

Achievements and performance

Peer Support to affected women and families

In 2022, APP continued its national peer support service, making ongoing adaptations to plans and activities as we learned from the pandemic. Overall, in 2022 APP provided peer support to more than 828 people, including those personally affected, partners, grandparents, wider families and friends. An average of 234 people used our online peer support forum every month (2021: 252) with the number of registered users increasing from 3065 to 3,299. Coordinators and volunteers provided support to 241 individuals which included telephone support to 16 people, video call support to 19 women, email support to 145 people, plus one-to-one support for 15 grandparents. In addition, 37 people not included in the above figures attended a regional café group only. A total of 15 partners received one-to-one email, phone or video call support in 2022, with two more opting to receive support through the forum only. In October 2022, we celebrated the tenth anniversary of our online peer support forum, thanking our peer support volunteers and staff, and all those within our APP community who help to offer support via the forum.

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT **FOR THE YEAR ENDED 31 DECEMBER 2022**

After not conducting our annual peer support service user survey in 2021, due to capacity constraints, we conducted a survey in the third quarter of 2022, promoting it widely and adding new response options to allow us to gather more detail about our different groups as well as our NHS projects. Most respondents had experienced postpartum psychosis (PP), but 12% were responding as a partner or family member of someone who had experienced PP, giving us valuable feedback on our peer support for dads, co-parents and grandparents. We found that 100% of respondents felt more supported and less isolated since finding APP (2020 survey: 95%); 93% of respondents felt more informed about PP (2020: 98%), and 82% felt less negative about PP since finding APP (2020: 88%). In addition, 92% of respondents felt more hopeful about the future since finding APP (2020: 92%). Nearly 1 in 3 people who answered the question (30%) said 'I might not be alive if I had not found APP's peer support services' (2020: 32%) 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:

"It is hard to put into words how much it's meant to me finding others who've had this horrible illness. APP makes me feel accepted, reassured and supported and proud that I am able to use my experience to help others as a volunteer peer supporter."

"Speaking with women who truly understand the impact PP has on your whole life has given me hope when I had none. Knowing women do get better with time and support."

"Amazing community of people. Always have several responses if I post on the forum. Have had amazing peer support from my peer supporter. Just like getting to know a new friend with good advice when feeling not so great."

Around half of those who answered the question (51%) had used APP's virtual peer support (including virtual groups and clubs) more than before due to the impact of Covid. Comments show that the availability of this support was clearly very valued during Covid and helped to reduce isolation.

Café groups and wellbeing activities.

Our number of regional café groups increased to nine. They operate in Wales, Sussex & Hampshire, Yorkshire, Lancashire & Cumbria, Morpeth & the North-East, Birmingham, London, Scotland and Northern Ireland. The Scotland and Northern Ireland café groups were established during 2022, with the new North Wales group combining with the South Wales group into one online group. Three grandparent café group meet ups were held in 2022. In total, 106 people attended these support meetings during the course of the year, whilst a further 8 people attended the virtual dads and coparents café group meetings on the third Wednesday of each month. Whilst partner and grandparent support remained online, most other café groups continued to offer both virtual and in-person events to reach more women. Our new Northern Ireland café group held its first meeting with 10 individuals attending in June, with a first face-to-face meeting taking place in October. The Scotland group met a couple of times virtually before meeting in person in Edinburgh in June. One of our new volunteers in Northern Ireland described the impact of meeting other women affected by PP:

"Action on Postpartum Psychosis has helped me in so many ways. It has helped me connect with other mums who experienced PP here in N. Ireland. This has taken away how isolating it was to have gone through PP and even discuss how it felt to have experienced this here in Northern Ireland. I was privileged to be a part of the campaign to help bring about awareness of the necessity of Northern Ireland having its own Mother and Baby Unit. I imagine when I experienced PP after my fourth child was born, recovery would have been so different as I would have not been taken to a general psychiatric ward and separated from my son. I hope for the many generations to come that Northern Ireland has better resources for mums when it comes to mental illness. I am now a peer volunteer with APP and I love that I am a part of this fantastic community of women who all come from various walks in life but are united by one thing and that is to support and uplift each other." Emma, APP Peer Support Volunteer.

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT **FOR THE YEAR ENDED 31 DECEMBER 2022**

Training and supporting volunteers

We recruited and trained 26 new peer support volunteers in 2022. This included one new partner peer support volunteer and three new grandparent peer support volunteers. The new volunteers included four new peer support volunteers in Scotland, four new peer support volunteers in or from Northern Ireland and one new peer support volunteer in Wales. As at the end of 2022, we had 96 active peer support volunteers 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 2022 we received good feedback from new volunteers about the online peer support training we provided – 100 per cent would recommend the training to others. Many also found it supported their own wellbeing and recovery: 94 per cent felt more supported, 94 per cent had more understanding about PP and 78 per cent felt less isolated and better connected with others with similar experiences. We received positive feedback in training evaluation forms:

"I felt this day met my needs as I feel I have a much better understanding of what peer support is and the type of things I may be able to do as an APP volunteer. All the speakers/trainers were very knowledgeable and it was great to be able to ask questions and interact with others."

"There was so much love, care and compassion shown by your team and the way you talked to us all was fantastic."

Our peer support volunteers were supported during 2022 with both training and social Zoom sessions, including: a self-compassion session; connecting with your baby; meditation techniques; supporting users in crisis and a review of best practice guidance for managing suicidal content online; and three online café group sessions for peer supporters. We received good feedback from our peer supporters on how these sessions met their training needs, for example:

"...when supporting women who are struggling to connect with their baby I feel confident in approaching this a bit differently - reassuring them that it takes time to build that relationship, the importance of watching and observing their baby and what they bring to that relationship, and just being there without the need for constant interaction etc."

"clearly explained what self-compassion is all about and provided with additional resources to look into the topic in more depth as we wish"

"I felt that it met my training needs by helping me learn and practice relaxation techniques that I may be able to use in volunteer work for APP. It helped me meet other volunteers and listen to shared experiences."

Peer support volunteers were also invited to additional sessions which were open to our wider volunteer and staff groups or whole APP network including: a writing workshop; a yoga session; a mindful crafting session; APP's Book Club; and the annual Festive meet up. Finally, a new internal newsletter for peer support volunteers was established during 2022.

Peer support embedded in NHS perinatal mental health services

In 2022, we had five 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; in the Morpeth MBU and supporting the transition home, and in the Community Perinatal Mental Health Teams in the Black Country. In addition, we had sessional peer support workers in the Birmingham, Lancashire & South Cumbria and Morpeth partnership projects able to provide holiday cover and additional support to women and families. The partnerships we had begun with Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust and Black Country Healthcare NHS Foundation Trust in 2021 were both renewed for a second year during 2022.

Our NHS embedded peer supporters helped 274 women (2021: 157) in 2022, in the Chorley, Morpeth and Birmingham MBUs and in the community in Birmingham, Solihull, Lancashire and South Cumbria and the Black Country. Café groups remain an integral part of our NHS partnership projects to enable recovering women to meet; we held 58 café groups in 2022 (2021: 41), 13 of which were held virtually. We found that

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT **FOR THE YEAR ENDED 31 DECEMBER 2022**

continuing to offer a choice of virtual or in-person groups was beneficial: virtual groups enabled people to attend if they were not comfortable or able to travel, whilst virtual evening groups helped those who had returned to work to participate. We continued to support dads, coparents and other family members of women experiencing PP, supporting 33 individuals in 2022 (2021: 12). We referred women's partners for further support from our national dads and coparents peer support team and women's (or their partner's) parents to our grandparent peer support group.

As Covid restrictions eased we were able to share learning between our NHS projects with peer supporters visiting different MBUs we work in. In March 2022, Jocelyn our Peer Support Facilitator in Lancashire and South Cumbria visited Chamomile Suite in Birmingham to meet Soukaina, our Facilitator there, and share ways of working at the ward. Our Black Country Peer Support Facilitator, Jo, visited Ribblesmere MBU in Chorley over the summer and in November 2022 our sessional peer supporters from the Morpeth MBU project also visited. Our NHS peer supporters also shared learning through a series of facilitated reflective sessions where they considered scenarios, self-care for peer supporters and themes such as managing trauma, guilt and suicidality.

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. Postpartum psychosis affects women's extended families and often the baby's grandparents provide considerable emotional and practical support when their daughter or their child's partner is diagnosed with PP. This case study demonstrates the impact of APP's peer support on one family and their journey to recovery:

"When I was in the MBU, my mum would mention APP to me a few times in conversation, but I didn't quite understand what it was at the time and most definitely didn't have the capacity to seek it out or enquire. She mentioned a forum and was able to let me know that she'd read a lot and knew that I would definitely 'get better'. The phrase 'you will get better' felt like it was on loop every day from my family and staff, as I would always ask why I was there and if I'd ever get better. I'm not sure I fully believed I would.

My first point of direct contact with APP was over the telephone with Naomi. My mum had arranged this and I obliged, looking for some comfort. I remember it well as I was sat in the sensory room in the MBU (depressed and without hope) and while speaking to her as a 'well' person who seemed totally normal, I felt a glimmer of hope...[the conversation] allowed me to just imagine that one day that could actually be me-and I could lead a lovely, normal life.

My mum said that she had many calls from Naomi that were reassuring at times of worry. She also received emails from a grandparent volunteer as part of the grandparents peer support- 'to keep in touch and help'.

Later on, upon leaving the MBU and getting treated at home ... my mum gave me the APP guide to PP and I was able to semi understand what had actually happened. My partner Malcolm had read both guides and found them extremely helpful.

After a few emails with Ellie, I attended my first cafe meet up alone- and although I felt nervous, I was ready. I wanted to meet someone who would understand. Although my parents and Malcolm have been the best support I could ever have, I still needed to see and talk to someone who knew what it was like having PP (and facing the aftermath.)

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT **FOR THE YEAR ENDED 31 DECEMBER 2022**

I had been emailing Ellie for cafe details and she was fabulous. I turned up to the group and immediately felt at ease. Jessie was also there, and in her own gentle way, told me about her experience and her work for APP. I was honestly really inspired by each member of the group, and it made me feel stronger and hopeful. I even thought about the future and ways in which I could help others who had PP.

I had been touched by Laura Dockrill's story on the website and I soon read her book...I decided to give writing a bit of a go - and joined a course called Mothership writers, which ended up being a huge, positive contributor to my recovery.

I'll be running 10km for APP in June and with Fliss as my contact- I've received plenty of encouragement and advice.

It goes without saying I admire what you do at APP. I feel truly lucky that you exist and help so many women (and their families) that suffer from this horrendous illness. Your many points of contact- email, telephone, website and Instagram have helped me in various ways. My parents and partner had a trustworthy point of call in APP and for that too, I thank you!"

Raising awareness amongst health professionals

In 2022, we continued to provide training and expert by experience talks to health professionals across the UK. A total of 2,287 health professionals heard one of APP's lived experience speakers in 2022 (2021: 1,553), including one-day training courses. These were across 21 different online training events (2021: 35) and 30 onsite events. The health professionals attending these events included midwives, health visitors, psychiatrists, mental health staff, perinatal mental health and mother and baby unit teams, psychologists, nursery nurse staff, obstetrics and gynaecology doctors, pharmacists, social workers, occupational therapists, nursing and midwifery students and mental health link workers. Events included NHS workforce training, perinatal mental health study days, University lectures to midwives and mental health nurses, conferences, webinars, and awareness raising events.

We continued our partnership with the Institute of Health Visiting (iHV) and supported their two-day perinatal mental health champions training courses. In 2022, we delivered 10 lived experience talks on their online training courses (2021: 15) and will continue to deliver on these courses in 2023. Our talks continued receive excellent feedback:

"The delegates were visibly moved by what was so honestly shared. They were still talking about the impact it had had on them on the second day, and again at the end of the training - it was obviously a real highlight."

"I remember you saying you'd carry on telling your story until it wasn't making a difference - so I think you'll be doing this for a good while longer." iHV Training Facilitator

Our relationship with the Royal College of Psychiatry (RCPsych) also continued and we delivered an online training session for psychiatrists in collaboration with them: RCPsych Perinatal Psychiatry Masterclass on Lived Experience and Coproduction. During 2022, in addition to iHV and RCPsych, we collaborated with various other professional bodies in relation to existing training and developing new training opportunities including NSPCC, Royal College of Midwives, NHS Ambulance Education Service and the Royal College of Occupational Therapists. As part of our antenatal campaign, we surveyed midwives and other antenatal educators on their opinions about discussing PP and what training and resources they felt they needed (see Campaigning for improved services below). We also supported the launch of the Maternal Mental Health Alliance's report¹ about investing in training for midwives and health visitors and recruiting more specialist perinatal mental health midwives. The role of midwives and health visitors is critical in identifying postpartum psychosis and ensuring that women receive the support they need. APP wrote a piece for the

¹ http://maternalmentalhealthalliance.org/news/new-economic-research-maternal-mental-health/?fbclid=IwAR2aWfa9Z25kSuuKxv6_Mn2SfL-W1dyf6yPRYPTAgMtMlr12mTQiXkW0_uM

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National Health Executive about the importance of training midwives and health visitors in postpartum psychosis.²

Our lived experience speakers also gave talks and presentations in support of APP's campaigns. APP's National Training Coordinator was a keynote speaker at the Maternity and Midwifery Forum conference in Scotland, which was attended by maternity professionals from across Scotland, presenting about APP's antenatal campaign and the results of our antenatal survey. APP's National Peer Support Coordinator spoke to health professionals and politicians from Northern Ireland at an event organised by the Maternal Advocacy and Support (MAS) project at the Northern Ireland Assembly in Stormont as part of our campaigning for an MBU in Northern Ireland.

In 2022, we delivered two sessions of APP's one-day training course (2021: 3) – Managing Postpartum Psychosis, training 33 health professionals (2020:53) from Cheshire and Merseyside NHS and maternal mental health link workers from Cumbria, Sunderland, and Northumberland. 100 percent of the delegates rated the training as excellent (2021: 86.7 percent) and 100 percent would recommend to other health professionals working in the perinatal period. Individual feedback included:

"Listening to the lived experiences was so inspiring. The group discussions and activities were really useful."

"This training was engaging and captivating – wonderful presenters."

"The format and delivery kept me engaged for the duration of the training – this is very difficult online."

"The lived experience input really brings this to life, it also role models speaking about experiences which I think is so valuable, the storytelling approach with questions really worked."

We also agreed with Lancashire and South Cumbria Foundation NHS Trust to conduct training for their MBU and community perinatal teams in 2023, following up on training first carried out at the start of our NHS partnership project in 2018. Work on developing e-modules (virtual training modules) was put on hold in 2022 due to capacity issues.

Raising awareness amongst the general public

In 2022, our lived experience storytellers helped us to 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. 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). In Northern Ireland in particular, these stories helped raise awareness of PP and the vital need for an MBU, and advertised our new peer support group meaning more women and families were able to access APP's support. A media consultant from Northern Ireland supported our team with media coverage and recruiting and supporting three new storytellers in the region. We increased the diversity of the stories and imagery on our website, featuring women and their partners from different ethnic, religious and linguistic backgrounds, and women in same sex partnerships.

In July 2022 we welcomed a third APP Ambassador, author and literary agent Catherine Cho. Catherine's critically-acclaimed book about her experience of postpartum psychosis, *Inferno: A Memoir of Motherhood and Madness*, was published in 2021 providing readers with a poetic, honest and raw account of the illness and inspiring hope in recovery. Catherine said:

"It is important for me to become an APP ambassador, because it is so important to be open about postpartum psychosis. Maternal mental health, particularly postpartum psychosis, is something that holds so much stigma and shame, which makes it even more of a frightening and isolating experience. I hope that I can help APP in sharing my story and the stories of others. When I was in the midst of recovery, I couldn't imagine becoming well, but it was in finding this community and the kindness of others who were so open in sharing their stories that I could begin to hope that this would, one day, be a story from my past."

² <https://mag.nationalhealthexecutive.com/articles/the-next-generation-of-midwives-health-visitors>

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In 2022, 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. We supported pieces in national, regional and health sector media. In May, we ran a campaign for Maternal Mental Health Awareness Week (MMHW), reaching 324,750 people across our social media channels in the month. We also had awareness raising media pieces during the week: Claire, one of our volunteers and Storytellers, shared her story for MMHW week on ITV Tyne Tees³; whilst APP staff member Naomi wrote a piece about her experience of motherhood and PP for the Metro.⁴ We worked with international organisations - Cherished Mom and Postpartum Support International - on two events for Pregnancy and Postpartum Psychosis Awareness Day, which fell on the Friday of Maternal Mental Health Awareness Week. These events - an author panel, featuring five published authors with lived experience of postpartum psychosis and a Pregnancy and Postpartum Psychosis Resources and Research Update - aimed to raise awareness of PP globally.

We marked Father's Day/Father's Mental Health Day on 20th June 2022 with a live and recorded 'APP Dads Chat' about postpartum psychosis and dads' mental health. The event involved with Simon O'Mara (APP Partners coordinator), Hugo White (APP Ambassador, musician and record producer), Professor Ian Jones (world-leading expert on postpartum psychosis), Mark Williams, (organiser of International Fathers Mental Health Day) and guest hosted by Kieran Anders (Dad Matters UK).⁵ Other highlights included:

- Significant media coverage in Northern Ireland raising awareness of PP and our MBU campaign including the front cover and full statement from APP in The Irish News, Belfast Telegraph and interviews on BBC Radio Foyle Breakfast Show and BBC Radio Ulster Good Morning Ulster. See "Campaigning for Improved Services" below.
- A double page spread in the Mirror, featuring APP's storyteller, Nia, about the impact of not receiving care in an MBU and our MBU campaign.⁶
- A radio documentary which celebrated the first year of the South Wales MBU, Uned Gobaith and other MBU campaign related coverage in Lancashire Telegraph⁷, The Big Issue North, Good to Know magazine⁸, Hull Daily Mail⁹ and Ramadan Radio.
- APP's Chief Executive, Dr Jessica Heron took part in CNN's As Equals maternal mental health roundtable discussion.¹⁰
- APP Ambassador, Laura Dockrill, shared her story in Hello Magazine's Mental Health Issue¹¹
- APP Storyteller, Lobeh Osagie-Asiah shared her experience of PP with Yahoo Live¹² in September to highlight issues around access to the right type of care among Black women for Black Maternal Mental Health Week which is organised by The Motherhood Group.

APP has always sought to understand the experience of PP in a variety of ways, from clinical and research studies to supporting personal stories and awareness raising pieces in the arts. In early 2022, we promoted the UK tour of "after birth", a play written by Zena Forster and directed by Grace Duggan. APP had supported the development of this comedy which is deeply rooted in the real-life testimonies of women within the APP network. APP storyteller, Lobeh, wrote a review of "after birth" for Mental Health Today,

³ https://www.itv.com/news/tyne-tees/2022-05-13/i-wouldnt-be-where-i-am-without-specialist-care-and-support?utm_source=NewsApp&utm_medium=SocialShare

⁴ <https://metro.co.uk/2022/06/28/i-was-sectioned-just-10-days-after-my-daughter-was-born-16560551/>

⁵ <https://www.instagram.com/p/Cf6xqNEjVJC/>

⁶ <https://www.mirror.co.uk/news/health/new-mums-being-failed-devastating-27383358>

⁷ <https://www.lancashiretelegraph.co.uk/news/20108976.lancashire-mums-praise-local-mental-health-service-following-perinatal-struggles/>

⁸ <https://www.goodto.com/family/pregnancy/postpartum-psychosis-283244>

⁹ <https://www.hulldailymail.co.uk/news/uk-world-news/mums-postpartum-psychosis-made-believe-6616882>

¹⁰ CNN As Equals maternal mental health roundtable discussion

¹¹ <https://www.hellomagazine.com/healthandbeauty/mother-and-baby/20220509138214/laura-dockrill-honest-account-postpartum-psychosis/>

¹² <https://www.yahoo.com/lifestyle/postpartum-psychosis-mental-illness-mother-forgot-had-baby-162330690.html?guccounter=1>

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after watching it at London's Omnibus Theatre.¹³ The play was highly commended in the University of Oxford Vice-Chancellor's Innovation and Engagement Awards, being recognised by the awards for its work to engage with maternal mental health research through theatre.¹⁴

In 2022, staff and volunteers continued working with Company Four on the development of a theatre piece based on an historic account of postpartum psychosis, taking part in research and development days in the north of England.¹⁵ Gemma Whiteley, one of the founders of Company Four said:

"Working with real experiences and voices of people from the APP network, we developed performance material and shared this with an invited audience for feedback. We used performance and audio recordings and puppetry, and we're now looking at how to take the story further, so we are seeking a commitment from a venue to host a production, and funding to produce it as a full-length piece. It can be a long process putting on a production, but it's also been an exciting and life-changing process – I've really changed the way I feel about motherhood and speaking to the women and them sharing their stories with me is something I'll always hold close to my heart."

APP also supported Lauren-Nicole Mayes, a writer and actress from Blackpool, with research for her screen play BABYNUN X0, which explores postpartum psychosis. With support from Arts Council England and The Lowry in Salford Quays, Lauren began a five-day research and development period. In April, APP was invited to attend a "scratch" performance of a short theatre piece at The Lowry. We were able to provide feedback on the piece and look forward to further work towards a completed performance in the future. In October we collaborated with Sampad, South Asian Arts to host a screening of No Bond So Strong - a film that addresses perinatal mental health encompassing pre and postnatal depression and postpartum psychosis – followed by a Q&A. We also continued to support the development of the Good Enough Mums Club, a musical produced, written, directed and performed by mums. Finally, APP volunteer, Danielle shared her PP story with BBC investigative journalist Stacey Dooley for her latest book, Are You Really OK? published by BBC books.¹⁶ Danielle's story forms part of a wider collection of first-person stories about mental health. It includes positive stories of recovery to inspire and offer hope.

We continued to use social media to provide peer support in a variety of ways, running live events and activities online for volunteers and beneficiaries - for example our regular book club – and ensuring that there was always a trained peer supporter monitoring our social media to provide support and signposting to anyone needing help who commented or messaged us. We used social media to promote our online café groups, online volunteer meetups and community activities. In July, APP's book club read Alison Cobb's "A Secret Never to be Told" and we interviewed her about her story for our website discovering how the stigma surrounding mental illness almost prevented her from meeting her own mother who developed postpartum psychosis after Alison's birth in the 1930s.

Our social media followers increased by 10 percent across all platforms, from 22,375 to 24,683. Our total social media reach was 1,052,295 (2021: 2,469,054). Our reach is lower than previous years. This however seems consistent with the findings of other charities who use organic reach rather than paid-for advertising and seems to be driven by platforms trying to increase paid advertising. We have set aside a new budget for social media advertising for 2023. Newsletter engagement increased with an open rate increase from 30% in December 2021 to 38% in December 2022. The number of emails delivered peaked at 1,923 in July 2022 with 320 click throughs in October 2022. We had 116,647 website hits (2021: 132,833), including 6,398 views of our Insider Guides web page (2021: 6,448); we believe the decline in hits is due to increased search competition. We supported 34 national and regional media stories in 2022 and shared these across our four main social media channels.

¹³ <https://www.mentalhealthtoday.co.uk/blog/parental-mental-health/an-exploration-of-motherhood-and-postpartum-psychosis-reviewing-afterbirth>

¹⁴ <https://www.npeu.ox.ac.uk/news/2292-after-birth-play-highly-commended-in-vice-chancellor-s-innovation-and-engagement-awards>

¹⁵ <https://www.companyfourmcr.co.uk/untitled-rd-who-is-your-mummy-and-where-did-she-go.html>

¹⁶ <https://www.app-network.org/uncategorized/apps-danielle-thomas-shares-her-story-with-stacey-dooley/>

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Campaigning for improved services

In 2022, we used our specialist expertise and lived experience voice to work towards 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), and developing our campaign for PP to be an essential part of all antenatal class training. PP must be managed as a medical emergency for the safety of both mother and baby. APP continues to raise awareness of PP and campaign for improved services because each year, babies lose a mother and families are bereaved, when the fact is, PP is a treatable illness and full recovery is possible. In 2022, an inquest into the tragic death of Orlaith Quinn, due to postpartum psychosis stated that her death was “both foreseeable and preventable”. Coroner Maria Dougan recommended that a specialist mental health Mother and Baby Unit (MBU) should be established in Northern Ireland as a matter of urgency. The findings of the Confidential Enquiry into maternal deaths 2018-20 noted that that deaths of women with psychosis continued to be lower than in the early part of the century:

*“In keeping with the general trend in recent Enquiry reports, there is a relative absence of women suffering from psychosis amongst those who died ... which had been a feature in the reports in the first decade of this century”*¹⁷(Knight et al, 2022: 31).

Whilst this is encouraging evidence of APP's UK impact, early evidence suggests that deaths due to PP are again on the increase in the post-pandemic period. Unusually in late 2022, we were supporting three separate families who had been recently bereaved. In 2023 we will have discussions and examine national datasets to determine the cause of this increase and actions needed.

Mother & Baby Unit campaign

The first stage of APP's Northern Ireland MBU campaign was launched in May 2022. Staff and volunteer storytellers spoke to journalists throughout Northern Ireland, on TV, radio and in the press to demonstrate the need for a Mother and Baby Unit (MBU) in Northern Ireland:

- APP's Policy and Campaigns Coordinator, Naomi, was interviewed on BBC Radio Foyle's Breakfast show and BBC Radio Ulster's Good Morning Ulster.
- APP Chief Executive, Dr Jess Heron, discussed the need for an MBU in Northern Ireland in the Irish News.¹⁷
- One of our Storytellers shared her experience of PP with UTV, also calling for a Northern Ireland MBU.¹⁸
- APP-led article in The Mirror¹⁹ and 2-page spread in-paper in the Sunday People, featuring a number of diverse experiences, including Joanne, our first Northern Irish story.
- APP's National Peer Support Coordinator, Ellie Ware, and psychiatrist Dr Keira Walsh were interviewed on The Lynette Fay Show on BBC Radio Ulster.

We partnered with Northern Ireland charity the Maternal Advocacy and Support Unit (MAS) and built a coalition of nearly 40 charities and organisations calling for a MBU in Northern Ireland. On World Mental Health Day in October 2022, we presented an open letter to the NI Health Minister Robin Swann signed by all 40 organisations to ask him to urgently prioritise setting up a Mother and Baby unit. A short film was created to show the presentation of the letter.²⁰

We worked with our Northern Ireland regional rep volunteer, Oorlagh Quinn, to develop and promote a public petition calling for a MBU for NI, which received nearly 6,000 signatures. The petition was presented

¹⁷ <https://www.irishnews.com/news/northernirelandnews/2022/05/27/news/orlaith-quinn-death-specialist-mental-health-mother-and-baby-unit-badly-needed-2724720/>

<https://www.irishnews.com/news/northernirelandnews/2022/06/16/news/postpartum-psychosis-support-group-to-have-first-meeting-2744177/>

¹⁸ <https://www.itv.com/news/utv/2022-06-14/new-mum-suffering-psychosis-heard-voices-saying-youre-going-to-kill-your-baby>

¹⁹ <https://www.mirror.co.uk/news/health/new-mums-being-failed-devastating-27383358>

²⁰ <https://www.youtube.com/watch?v=oZ6Kq0AaB2c>

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alongside the letter to ministers. It was supported by a large group of mums, showing the strength of public support for an MBU. Oorlagh can be seen talking about the petition in this extract from the above film.²¹

We continued campaigning work in Wales and Scotland, including:

- APP's storytellers Danielle and Barbara took part in 'Unit of Hope' a programme about postpartum psychosis, the campaign that led to the opening of the Uned Gobaith MBU in South Wales and how they participated in the design of the unit on BBC Radio Wales.²²
- APP's storyteller Nia wrote in The i Paper about her experience of travelling from North Wales to Manchester to access the MBU care she needed.²³
- APP's Chief Executive, Dr Jessica Heron and National Training Coordinator, Dr Sally Wilson, joined the speaker panel in a filmed one-year anniversary celebration of the opening of Uned Gobaith, the South Wales MBU. Welsh Assembly Members joined the event and reconfirmed their commitment to supporting a North Wales unit.
- Continuing involvement in Wales perinatal networks, the All Wales PMH Steering group, All Wales PMH Board and Communities of Practice.
- Participating in the Scottish government's consultation on options to increase Mother and Baby Unit (MBU) capacity, providing evidence and quotes from our Scottish volunteers about the importance of a unit in the north of Scotland.
- APP's media consultant, Lucy Nichol wrote a piece for The i Paper about MBUs: A lack of NHS beds will force mothers away from their babies.²⁴
- Submitting evidence to the Senedd Cymru / Welsh Parliament Health & Social Care Committee consultation on Mental Health Inequalities.²⁵

We continued to work in collaboration with the Betsi Cadwaladr University Health Board to develop services for women in North Wales. APP will be involved in the development process for the new Cheshire MBU in 2023²⁶ which will significantly reduce travel times for patients and families from across North Wales and will have Welsh language provisions. We will seek to continue amplifying the voices of women and families from North Wales to ensure their voices are heard.

Finally, we presented the initial findings of our 10-year survey on experiences of care for PP in the UK at the International Marce Society Conference in September 2022 (see Research below for more information). Further analysis of the data will be used to support our ongoing MBU campaigning.

Antenatal Campaign

In May 2022 we launched our campaign for information about postpartum psychosis to be shared at every antenatal class in the UK. We promoted our YouGov survey findings showing that only 6% of women report having received information about PP at their antenatal classes. We invited midwives and antenatal class providers to complete a survey into how providers feel about discussing PP with expectant parents. We also asked antenatal class providers to share what resources they need from APP to feel confident in giving this information to expectant parents. The results of our survey were presented at the International Marce Society Conference and a variety of midwifery and other conferences. In 2023 we will work with women, families, midwives and educators on a web resource and media campaign aimed at antenatal class providers to support them to give the correct information.

²¹ <https://www.facebook.com/watch/?v=108551882223367>

²² <https://www.bbc.co.uk/programmes/m00159hr>

²³ <https://inews.co.uk/opinion/post-partum-psychosis-mother-baby-postcode-lottery-1621961>

²⁴ <https://inews.co.uk/opinion/lack-nhs-beds-force-mothers-babies-christmas-2038862>

²⁵ <https://business.senedd.wales/documents/s123797/MHI%2045%20-%20Action%20on%20Postpartum%20Psychosis.pdf>

²⁶ <https://bcuhb.nhs.wales/news/health-board-news/new-unit-set-to-transform-mental-health-experience-for-new-and-expectant-mums/>

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Research

APP facilitates research, supports lived experience consultancy, and helps disseminate findings, ensuring evidence-based information is accessible to women, families, and health professionals. We continue to work closely with researchers at the National Centre for Mental Health (NCMH) at Cardiff University. In 2022 we supported the following large-scale studies from the NCMH:

- Cross Cultural study of Motherhood and Mental health (MAM-CC)
- Mums and Mental Health (MaM) study: postpartum psychosis cohort

In 2022, APP supported 42 research projects into postpartum psychosis across a variety of UK universities, including:

- University of East Anglia: New psychological intervention to support women and families who have experienced postpartum psychosis
- Institute of Mental Health, University of Birmingham: An investigating of the role of sleep in triggering postpartum psychosis
- Royal Holloway, University of London: Understanding beliefs and emotional experiences following postnatal mental health difficulties.
- University of Sheffield: Research to improve care for women with severe mental illness
- Coventry University: Hallucinations in early motherhood study.

In February 2022, we announced the news that APP is joining and being hosted by Birmingham University's new Institute for Mental Health (IMH) – an inter-disciplinary research hub. Towards the end of 2022, we started to streamline the research process to support studies that align with APP's strategies and focus. Moving into 2023, APP will be supporting studies in the following areas, from larger research groups, that have potential for funding opportunities;

- Genetic and clinical studies related to bipolar and postpartum psychosis
- Evidence based psychological therapies for recovery from postpartum psychosis
- The role of sleep in postpartum psychosis
- Care and services for those affected by postpartum psychosis
- Drug discovery studies
- Experiences of postpartum psychosis in those from Black, Asian and ethnic minority backgrounds

During Maternal Mental Health Awareness Week in May, NCMH and APP hosted a webinar entitled 'Understanding Postpartum Psychosis' with leading researchers in the field and women with lived experience of PP. Over 200 people attended the webinar live, with thousands more subsequently viewing it on You Tube.²⁷

We had launched our survey on experiences of care in autumn 2021 and 350 women with experience of postpartum psychosis in the last 10 years completed the survey. The survey results will help us to understand: the impact of APP's work and campaigns over the last decade; and how differences in the types of care women receive for postpartum psychosis impacts on their experiences and recovery outcomes. The survey data was analysed in 2022 to assess and compare recovery and care outcomes in women cared for in MBUs and on General Units, and to inform APP's future work and objectives. The results showed that, as with our 2010 survey, women cared for in MBUs report much better outcomes than those admitted to general psychiatric units. We found that care in both groups had considerably improved since 2010, with more women admitted to MBUs and fewer to mixed sex general wards; women reported that staff in both groups are better informed than they were prior to 2010, and that women feel safer during care for PP than those admitted prior to 2010. We presented the initial findings of our survey on experiences of care at the International Marce Society Conference in September 2022. Further analysis and reporting will be undertaken in 2023.

A team from APP attended the International Marce Society for Perinatal Mental Health conference in London, which brings together researchers, clinicians and those with lived experience of perinatal mental illness from around the world to share research and learning. APP aimed to raise the profile of postpartum

²⁷ https://www.youtube.com/watch?v=Oy_FWgcSTj0

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psychosis in the perinatal research community and promote the voices of lived experience, influencing research of importance to women and families. APP participated in two symposiums:

- **What do women and families need from perinatal mental health services?** This session was chaired by Dr Clare Dolman (APP trustee) and featured our brilliant ambassador Laura Dockrill, who powerfully and beautifully shared her personal experience of PP, as well as our National NHS Contracts Coordinator, Hannah Bissett, speaking about the value of peer support in perinatal services. They were joined by Dr Henry Fay on video – a former GP with experience of PP as a partner, and trustee of the Maternal Mental Health Alliance.
- **Postpartum psychosis: strategies and collaborations to increase knowledge, address stigma and improve care globally.** This session was chaired by our CEO, Dr Jess Heron, and featured discussion from Hannah Bissett as well as Dr Sally Wilson, APP's National Training and Research Coordinator. We shared APP evaluations showing: that care for PP has improved considerably in 10 years; that women admitted to MBUs have better outcomes than those separated from their baby in General Psychiatric Units; that peer support is essential and life-saving during recovery; and the impact of our co-produced and co-delivered health professional training on clinical practice, empathy and knowledge. We discussed the impact of each project, exploring the ingredients for lasting impact, lessons learned, and how this learning might be used to influence care for women and families affected by PP globally.

Dr Heron said: *"It was great to be at conferences again, raising the profile of postpartum psychosis in the perinatal research community. The weeklong academic conference is a valuable opportunity for us to hear from world leading experts about their cutting-edge work. The voices and values of the Third Sector and lived experience play an important role in scientific conferences, helping translate the evidence base into practice, reducing stigma, and influencing research of importance to women and families."*

In 2022, we developed our website content on the menopause²⁸ highlighting what is known about the risks of mental ill health during perimenopause for women with experience of PP. Capacity constraints meant that we didn't launch our survey on research gaps and work on guidelines for researchers. Ongoing discussions with NCMH about engaging our community in research participation led to a project for 2023 to improve the processes needed to build APP's research register and promote engagement with research.

Fundraising and strengthening our capacity

The aftermath of the coronavirus pandemic, together with the cost-of-living crisis and challenges faced by the NHS, continued to have an impact on APP in 2022. The pandemic has impacted the nation's mental health, and this is especially true of women with a history of postpartum psychosis or bipolar disorder. Existing mental health problems are being exacerbated, and more women in our community are experiencing relapses. For APP's staff and volunteers, all of whom are parents themselves and many of whom have a history of psychosis or bipolar disorder, 2022 continued to be challenging. APP supported them by offering flexible working and focusing more management time on overseeing wellbeing, pastoral care and training. Unlike 2020 and 2021, we didn't need to change our plan for the year in 2022 but certain activities were delayed as staff capacity was reassigned to cover staff sickness, towards the most urgent and important tasks. A new mobile friendly website template was developed ready to be launched in 2023, however the review of website content was ongoing. Groundwork for future international growth was also delayed, but we attended the International Marce Society conference, enabling us to meet international researchers (see research above) and we began working with groups in Italy, Spain, Thailand and Malta on translations and cultural adaptations of APP Insider Guides.

We continued to improve our staff and volunteer training and development, particularly the sessions offered to peer support staff and volunteers, and to seek opportunities for staff to participate in training and events relevant to their roles and new areas of work we are developing. We were part of the Media Trust Headlining Mental Health training programme. On 25 May, APP's Jessie (APP Marketing and Digital Communications Coordinator), Lucy (APP Media Consultant) and Naomi (APP Policy and Campaigns Coordinator) were given the opportunity to take part in the Media Trust 'Headlining Mental Health Charity Challenge Day 2022'. For one full day, they had the support of a dedicated group of PR and media industry

²⁸ <https://www.app-network.org/what-is-pp/getting-help/postpartum-psychosis-and-the-menopause/>

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experts from the creative agency HAVAS to work on APP's antenatal education campaign, identifying ways to increase its reach and impact.

A fundraiser was recruited in the early part of 2022 and started in post in mid-March. They completed an audit of current income streams and worked to revamp our existing fundraising strategy to ensure income streams can be maximised. We also recruited an administrator with data management skills who has streamlined systems and processes in fundraising and many other areas of the organisation. Improved processes have been put in place to support and steward individual donors. We plan to build on this further in 2023.

We developed our strategies for supporting and retaining individual fundraisers and had some fantastic amounts of money raised. We were successful in our applications to the Big Give Women and Girls Fund and the Christmas Challenge, which enabled us to run match funding campaigns in July and December. July's month-long campaign raised more than £11,000 and a week-long December campaign raised nearly £5,000. We also made a successful application to Charity Job's annual giving fund - more than 700 charities applied and only seven were chosen to receive funds – receiving a £15,000 unrestricted grant. We developed our Big Bake fundraising campaign – a way to raise awareness and funds through cake based social events, with healthcare settings and individuals getting involved. This raised £2,000, with one of our peer supporters on our Birmingham NHS project, Jenni, raising around half of this amount at a coffee morning she organised in Birmingham.

We continued to grow our Miles for Mums and Babies fundraising campaign. Each mile reflects the journey mums, babies and families travel to be together, whilst mums receive care in Mother and Baby Units (MBUs). Many fundraisers told their own stories to help raise awareness, whilst three Mother and Baby Unit staff teams also took part this year. Fundraisers and their chosen challenges included:

- To mark 10 years since she was admitted to an MBU with PP, APP's National Peer Support Coordinator, Jenny, and her family raised more than £2,500 in July. Her initial target was to jog and walk 37 miles during the month, the distance from her home to the MBU. But then she got some family members involved and between them they covered 375 miles through running, walking and swimming. The 375-mile distance reflects five return journeys from Jenny's home to the MBU in Stafford, a journey travelled by her husband every day during her stay.
- Trichana had PP after the birth of her son in 2014, having never heard of the illness before. She chose to run 300km over a period of six months to help other mums affected by PP and raised more than £500.
- APP volunteer Tara had PP after the birth of her daughter and chose to cycle 10 kilometres every day in May 2022.
- A team of 17 staff members from Uned Gobaith MBU in Swansea Bay covered 1,000 miles between them during the month of May raising more than £1,200. In their first week they covered more than 300 miles, initially doing the most miles separately but they went on to organise a series of group walks - with a team even making it to the top of Pen Y Fan - the highest peak in South Wales.
- A team of 30 staff from Chamomile MBU in Birmingham climbed Yr Wyddfa (Snowdon) in June, raising nearly £3,000. They said *"APP (Action on Postpartum Psychosis) has provided irreplaceable support to our ward during a time of staffing crisis offering peer support to instil hope into our recovering families and providing recovery-based activities. Postpartum psychosis is a life-threatening condition that can have detrimental impacts on mothers, babies and families and we would like to support APP in their mission to increase awareness to enable families to get support early and save lives"*²⁹
- A team from Clover MBU in Winchester covered 428 miles during November, representing the distance that one of their mothers and her family had to make to receive care.

We are very grateful to all our individual fundraisers who have found creative ways to fundraise and increase awareness. We'd particularly like to thank our Royal Parks Half Marathon and London Marathon runners, Jamie, Sarah, Steve, Debbie, Vanessa and Sara who raised almost £10,000 between them, and

²⁹ <https://www.justgiving.com/fundraising/chamomile-mbu>

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT **FOR THE YEAR ENDED 31 DECEMBER 2022**

finally Alice Stroud who completed her triathlon challenge in 2022 having never done a triathlon before starting fundraising for APP. Alice said:

"Last year I completed five triathlons in support of APP finishing with an Olympic distance at the London Tri. The experience of the support and hugging my daughter at the end and being reminded how far I've come in recovery was incredible."

Financial Review

The Statement of Financial Activities on page 26 shows APP's income and expenditure for the year. During the year ended 31 December 2022, expenditure exceeded income by £72,413. These net outgoing resources are primarily the result of the planned spending down of funds in several areas: £24,078 had been designated by the Trustees to complete organisational transformation work to respond to APP's growth; whilst £8,631 and £25,821 had been designated by the Trustees to complete planned work in Morpeth and the Black Country respectively. In our Unrestricted Funds, expenditure exceeded income by £70,975. Income from charitable activities decreased, reflecting contract income received in 2022 for work in Morpeth and the Black Country, decreased grant income with the Comic Relief Peer Support Project coming to an end, but offset by increased income from training health professionals. Income from donations increased, particularly corporate and major donor donations and as a result of our two Big Give match funding campaigns. In our restricted funds expenditure exceeded income by £1,438, reflecting the expenditure of funds carried forward from the prior year for peer support which was offset by a £4,000 grant received at the end of 2022 for peer support for Dads and Coparents in 2023.

The Balance Sheet on page 27 shows that at 31st December 2022, APP was holding £ 118,049; of which £4,000 was restricted funds. APP's reserves policy is to hold three months core operating costs in reserve to guard against fluctuations in income. At the end of the 2021 financial year, the Board deemed three months core operating costs to be in the range of £110,000 to £120,000. On 1st January 2022, APP was holding £126,494 in free reserves, which was slightly above the range then recommended by our reserves policy. On 31st December 2022, APP was holding £114,049 in free reserves, which was within the range then recommended by our reserves policy. (£110,000 - £120,000). The Board continues to review the appropriate reserves level and take steps to keep the funds held in line with that.

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 is still hosted by the University of Birmingham today. The University provides office space, expert time, infrastructure and resources to the charity. We are co-hosted by the Birmingham and Solihull Mental Health Foundation NHS Trust and the University of Cardiff National Centre for Mental Health, who provide 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. Her time for this is bought by the charity from the University of Birmingham. Operational plans and all major strategic decisions are discussed and agreed by the Board of Trustees.

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. A skills audit has been undertaken and efforts are made to recruit Trustees who meet the skills requirement. In 2016, the Board agreed to aim towards a leaner Board, with all the skills necessary to the functioning of the charity. During 2022, one Board member resigned, and a new Board member was appointed in early 2023.

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT **FOR THE YEAR ENDED 31 DECEMBER 2022**

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.

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 is high, and capacity pressures impact on income generation. Since 2017, a new fundraising strategy has been implemented to improve sustainability and diversify our funding base, whilst in 2021 we began recruiting for a dedicated fundraising role. 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 (for example peer support contracts), 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 2022 were financial sustainability, management capacity and operational risks, in particular high rates of mental health relapse in staff and volunteers (80 percent of APP's staff, and all volunteers have personal experience of PP and/or ongoing bipolar disorder. In the post pandemic period, we have seen increased rates of mental illness throughout the UK – and this is particularly the case for those with previous diagnoses). Financial sustainability was addressed by: frequent reviews of forecast income and expenditure by the Board; developing plans for increasing income and cutting costs; reviewing our fundraising strategy and stewardship of supporters; and carefully planning and budgeting for 2023. Management capacity risks were addressed though utilising the skills of new staff members to improve systems and processes, and contracting administrative support to fill a vacant post until recruiting a new administrator with project management skills. We continued to actively network to seek Board members to fill the identified skills gaps, with new board members joining in 2023. Operational risks arising from mental health relapse were addressed through: continuing to agree new flexible working patterns, prioritise and reassign work; holding regular meet-ups with staff, contractors and volunteers to provide pastoral care and support; reviewing staff Wellbeing Plans and increasing staff capacity, in particular casual peer support workers who can work additional hours at short notice.

Plans for Next Year

Action on Postpartum Psychosis plans for 2023 were grouped under the following objectives:

- 1. Supporting women and families.** We plan to maintain and grow our national and regional peer support service by:
 - Maintaining our strong peer support presence, offering online, in person, video call and café group support to all who need it nationally and via our NHS projects, and maintaining long term contact with those we support.
 - Continuing to: train new peer supporters, prioritising volunteers from diverse communities and project regions; and develop the ongoing training programme and activities for volunteers, holding six evening training sessions and offering online social and wellbeing activities.
 - Seeking funding to maintain and grow our peer support offer for dads, co-parents and grandparents through one-to-one support and online meet ups.
 - Seeking funding to maintain and grow our peer support for women and families from diverse communities.

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT **FOR THE YEAR ENDED 31 DECEMBER 2022**

- Maintaining high-quality service delivery and good functioning of existing NHS partnership contracts and seeking to add new NHS contracts to the APP portfolio, particularly those with APP staff embedded in MBUs.
 - Finalising the translation of APP's guides into the first five languages and obtaining funding for further translation and international partnerships.
 - Continuing work to review our journey for beneficiaries, volunteers and fundraisers.
2. **Raising awareness amongst health professionals.** We plan reach more health professionals with training by:
- Continuing to offer online bookable one-day training and NHS commissioned in-person training days.
 - Developing training in specialist areas, for example supporting dads and co-parents, and working with women from diverse backgrounds.
 - Continuing collaborations with the Institute of Health Visiting (iHV) and other professional bodies, training, supporting and developing resources for Lived Experience speakers.
3. **Raising awareness amongst the general public.** We plan to raise awareness in the general public to reduce stigma and misinformation by:
- Developing media and communications for the main 'moments' across the year (for example Maternal Mental Health Awareness Week, Black Maternal Mental Health Week, World Mental Health Day, and Suicide Awareness Week); placing case studies in the media and social media to support APP campaigns, new projects, and to raise awareness of APP peer support, training and information resources.
 - Continuing our diverse communities outreach work: promoting understanding of PP in all cultures and raising awareness of APP's peer support; supporting sessional staff and volunteers to take part in social media activities and tell their stories in the media; linking with MBU professionals from diverse communities for communications pieces, and seeking funding for a staff member who could lead this area of our work.
 - Continuing the development of our new website.
4. **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:
- Continuing APP's MBU campaign, with a particular focus on an MBU for Northern Ireland: calling for urgent action for MBUs for NI, North Wales & the north of Scotland; developing communications to showcase the value of MBUs and positive MBU stories; and continuing analysis of our MBU survey data.
 - Continuing APP's antenatal education class campaign: developing web content from the antenatal provider survey outlining why talking about PP is important, sharing what women and families need to know; building on previous social media and media work to raise awareness of the campaign.
5. **Research.** We will continue to facilitate research studies of importance to women and families affected by postpartum psychosis, as capacity and funding allows, by
- Finalising APP's Impact Report and MBU survey reports.
 - Completing a research gaps survey and promote findings to universities/funders.
 - Developing a plan and costings to support APP's involvement in research and seeking funding to support APP as research resource.
 - Publishing the drafted 'Being A Parent' Guide in electronic format and in hard copy once funds secured.

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT **FOR THE YEAR ENDED 31 DECEMBER 2022**

6. **Strengthening our capacity to fulfil our charitable objectives.** We plan to strengthen our internal systems to support sustainable growth by:
- Developing the data manager role and implementing a data project to simplify data collection and develop simpler cloud-based data recording system.
 - Continuing to develop and improve user journey and functionality of the updated APP website.
 - Continuing work supporting coordinators' development as project managers, with work on business planning, reporting & budget responsibilities.
 - Continuing development as gold standard lived experience, family friendly employer.

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT **FOR THE YEAR ENDED 31 DECEMBER 2022**

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. grant fundraising and health economics). Directors/Trustees during 2022 were as follows:

Dr Giles Berrisford	Chair	
Annette Bauer	Treasurer	
Catherine Cho		(appointed 30 th March 2023)
Dr Clare Dolman		
Sarah Hind		
Anna Jones	Vice Chair	
Professor Ian Jones		
Abbie Sampson		(resigned 5 th October 2022)

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 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.

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT **FOR THE YEAR ENDED 31 DECEMBER 2022**

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;
- 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.

Approved by order of the board of trustees on and signed on its behalf by:

.....

A Bauer - Trustee

**INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF
ACTION ON POSTPARTUM PSYCHOSIS**

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 2022.

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:

ACTION ON POSTPARTUM PSYCHOSIS

STATEMENT OF FINANCIAL ACTIVITIES
(INCORPORATING AN INCOME AND EXPENDITURE ACCOUNT)
FOR THE YEAR ENDED 31 DECEMBER 2022

	Notes	Unrestricted funds £	Restricted funds £	2022 Total funds £	2021 Total funds £
INCOME AND ENDOWMENTS FROM					
Donations and legacies	2	242,978	22,485	265,463	137,683
Charitable activities	5				
General		228,621	4,375	232,996	301,407
Other trading activities	3	1,212	-	1,212	-
Investment income	4	86	-	86	8
Other income		25	-	25	-
Total		<u>472,922</u>	<u>26,860</u>	<u>499,782</u>	<u>439,098</u>
 EXPENDITURE ON					
Raising funds		19,394	100	19,494	6,019
Charitable activities	6				
General		<u>524,503</u>	<u>28,198</u>	<u>552,701</u>	<u>424,246</u>
Total		<u>543,897</u>	<u>28,298</u>	<u>572,195</u>	<u>430,265</u>
 NET INCOME/(EXPENDITURE)		(70,975)	(1,438)	(72,413)	8,833
 RECONCILIATION OF FUNDS					
Total funds brought forward		<u>185,024</u>	<u>5,438</u>	<u>190,462</u>	<u>181,629</u>
 TOTAL FUNDS CARRIED FORWARD		<u>114,049</u>	<u>4,000</u>	<u>118,049</u>	<u>190,462</u>

CONTINUING OPERATIONS

All income and expenditure has arisen from continuing activities.

The notes form part of these financial statements

ACTION ON POSTPARTUM PSYCHOSIS (REGISTERED NUMBER: 07466643)

STATEMENT OF FINANCIAL POSITION
31 DECEMBER 2022

	Notes	2022 £	2021 £
FIXED ASSETS			
Tangible assets	12	-	280
CURRENT ASSETS			
Debtors	13	35,324	89,084
Cash at bank		<u>172,065</u>	<u>142,030</u>
		207,389	231,114
CREDITORS			
Amounts falling due within one year	14	(89,340)	(40,932)
		<u>118,049</u>	<u>190,182</u>
NET CURRENT ASSETS			
		<u>118,049</u>	<u>190,182</u>
TOTAL ASSETS LESS CURRENT LIABILITIES			
		<u>118,049</u>	<u>190,462</u>
NET ASSETS			
		<u>118,049</u>	<u>190,462</u>
FUNDS	16		
Unrestricted funds:			
General Fund		114,049	126,494
Designated Fund		<u>-</u>	<u>58,530</u>
		<u>114,049</u>	<u>185,024</u>
Restricted funds		<u>4,000</u>	<u>5,438</u>
TOTAL FUNDS		<u>118,049</u>	<u>190,462</u>

The charitable company is entitled to exemption from audit under Section 477 of the Companies Act 2006 for the year ended 31 December 2022.

The members have not required the company to obtain an audit of its financial statements for the year ended 31 December 2022 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

ACTION ON POSTPARTUM PSYCHOSIS (REGISTERED NUMBER: 07466643)

STATEMENT OF FINANCIAL POSITION - continued
31 DECEMBER 2022

These financial statements have been prepared in accordance with the provisions applicable to charitable companies subject to the small companies regime.

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

The notes form part of these financial statements

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS **FOR THE YEAR ENDED 31 DECEMBER 2022**

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.

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.

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.

Debtors

Prepayments are valued at the amount prepaid.

Cash and cash equivalents

Cash and cash equivalents include cash in hand and deposits held at call with banks.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued **FOR THE YEAR ENDED 31 DECEMBER 2022**

1. ACCOUNTING POLICIES - continued

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.

Pensions

Payments to defined contribution retirement benefit schemes are charged as an expense as they fall due.

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 £	2022 Total funds £	2021 Total funds £
Donations	<u>242,978</u>	<u>22,485</u>	<u>265,463</u>	<u>137,683</u>

In the prior year, £137,683 of the income related to unrestricted funds and £nil to restricted funds.

3. OTHER TRADING ACTIVITIES

	Unrestricted funds £	Restricted funds £	2022 Total funds £	2021 Total funds £
Sale of literature	91	-	91	-
Income from Other Trading activities	<u>1,121</u>	<u>-</u>	<u>1,121</u>	<u>-</u>
	<u>1,212</u>	<u>-</u>	<u>1,212</u>	<u>-</u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 DECEMBER 2022

4. INVESTMENT INCOME

	Unrestricted funds £	Restricted funds £	2022 Total funds £	2021 Total funds £
Bank interest	<u>86</u>	<u>-</u>	<u>86</u>	<u>8</u>

In the prior year, £8 of the income related to unrestricted funds and £nil to restricted funds.

5. INCOME FROM CHARITABLE ACTIVITIES

	2022 Total activities £	2021 Total activities £
Comic Relief – APP Peer Support Community Project	-	32,452
Other Trusts and Foundations	4,375	2,500
Government Grants – Coronavirus Statutory Sick Pay Rebate Scheme	-	128
Contract Income - Lancashire and South Cumbria NHS Foundation Trust	67,530	67,530
Contract Income - Birmingham and Solihull Mental Health NHS Foundation Trust	96,489	96,614
Contract Income - Black Country Healthcare NHS Foundation Trust	11,775	48,050
Contract Income - Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust	34,429	29,998
Workforce Training and Experts by Experience	18,398	8,925
Research contracts	<u>-</u>	<u>15,210</u>
	<u>232,996</u>	<u>301,407</u>

In the prior year, £266,455 of the income related to unrestricted funds and £34,952 to restricted funds.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 DECEMBER 2022

6. CHARITABLE ACTIVITIES COSTS

	Direct Costs (see note 7) £	Support costs (see note 8) £	Totals £
General	<u>545,376</u>	<u>7,325</u>	<u>552,701</u>

In the prior year, £357,765 of the expenditure related to unrestricted funds and £66,481 to restricted funds.

7. DIRECT COSTS OF CHARITABLE ACTIVITIES

	2022 £	2021 £
Staff and freelance costs	397,032	304,339
Consultancy	68,993	62,887
Project costs	914	320
Travel	18,555	9,704
Information materials and awareness raising	30,160	11,806
Volunteer training & expenses	1,330	1,167
Office and running costs	27,885	26,070
Workforce training and experts by experience costs	32	127
Bad debts	195	-
Depreciation	<u>280</u>	<u>400</u>
	<u>545,376</u>	<u>416,820</u>

8. SUPPORT COSTS

	Governance costs £
General	<u>7,325</u>

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

	2022 General £	2021 Total activities £
Independent examiners fee	2,310	2,200
Accountancy fees	4,768	5,140
Other fees	<u>247</u>	<u>86</u>
	<u>7,325</u>	<u>7,426</u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 DECEMBER 2022

9. NET INCOME/(EXPENDITURE)

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

	2022	2021
	£	£
Depreciation - owned assets	280	400
Surplus on disposal of fixed assets	(25)	-
Independent Examination Fee	<u>2,310</u>	<u>2,200</u>

10. TRUSTEES' REMUNERATION AND BENEFITS

There were no trustees' remuneration or other benefits for the year ended 31 December 2022 nor for the year ended 31 December 2021.

Trustees' expenses

There were no trustees' expenses paid for the year ended 31 December 2022 nor for the year ended 31 December 2021.

11. STAFF COSTS

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

	2022	2021
Core charitable activity	<u>17</u>	<u>14</u>

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 £42,824 (2021: £42,412).

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 DECEMBER 2022

12. TANGIBLE FIXED ASSETS

Office
equipment
£

COST

At 1 January 2022 and 31 December 2022

1,200

DEPRECIATION

At 1 January 2022

920

Charge for year

280

At 31 December 2022

1,200

NET BOOK VALUE

At 31 December 2022

-

At 31 December 2021

280

13. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2022 £	2021 £
Trade debtors	23,686	79,492
Other debtors	-	96
Prepayments and accrued income	<u>11,638</u>	<u>9,496</u>
	<u>35,324</u>	<u>89,084</u>

14. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2022 £	2021 £
Trade creditors	4,548	2,637
Social security and other taxes	7,228	6,069
Other creditors	543	339
Accruals and deferred income	<u>77,021</u>	<u>31,887</u>
	<u>89,340</u>	<u>40,932</u>

Deferred income includes income received during the period of £54,100 (2021: £16,883) which relates to services to be provided during the financial year ended 31 December 2023.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2022

15. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Unrestricted funds £	Restricted funds £	2022 Total funds £	2021 Total funds £
Fixed assets	-	-	-	280
Current assets	203,389	4,000	207,389	231,114
Current liabilities	<u>(89,340)</u>	<u>-</u>	<u>(89,340)</u>	<u>(40,932)</u>
	<u>114,049</u>	<u>4,000</u>	<u>118,049</u>	<u>190,462</u>

16. MOVEMENT IN FUNDS

	At 1.1.22 £	Net movement in funds £	At 31.12.22 £
Unrestricted funds			
General Fund	126,494	(12,445)	114,049
Designated Fund	<u>58,530</u>	<u>(58,530)</u>	<u>-</u>
	185,024	(70,975)	114,049
Restricted funds			
Other Peer Support	5,438	(5,438)	-
Dad's & Co-parents Peer Support	<u>-</u>	<u>4,000</u>	<u>4,000</u>
	<u>5,438</u>	<u>(1,438)</u>	<u>4,000</u>
TOTAL FUNDS	<u>190,462</u>	<u>(72,413)</u>	<u>118,049</u>

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

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General Fund	426,718	(439,163)	(12,445)
Designated Fund	<u>46,204</u>	<u>(104,734)</u>	<u>(58,530)</u>
	472,922	(543,897)	(70,975)
Restricted funds			
Other Peer Support	-	(5,438)	(5,438)
Dad's & Co-parents Peer Support	4,000	-	4,000
Big Give Peer Support	16,235	(16,235)	-
Digital Capacity Building	375	(375)	-
Marce 2022	<u>6,250</u>	<u>(6,250)</u>	<u>-</u>
	<u>26,860</u>	<u>(28,298)</u>	<u>(1,438)</u>
TOTAL FUNDS	<u>499,782</u>	<u>(572,195)</u>	<u>(72,413)</u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued **FOR THE YEAR ENDED 31 DECEMBER 2022**

16. MOVEMENT IN FUNDS - continued

Comparatives for movement in funds

	At 1.1.21 £	Net movement in funds £	Transfers between funds £	At 31.12.21 £
Unrestricted funds				
General Fund	86,300	118,242	(78,048)	126,494
Designated Fund	<u>58,362</u>	<u>(77,880)</u>	<u>78,048</u>	<u>58,530</u>
	144,662	40,362	-	185,024
Restricted funds				
Comic Relief Covid Response	4,502	(4,502)	-	-
Comic Relief Peer Support	16,291	(16,291)	-	-
National Lottery - Leaders With Lived Experience	9,955	(9,955)	-	-
Other Peer Support	<u>6,219</u>	<u>(781)</u>	<u>-</u>	<u>5,438</u>
	<u>36,967</u>	<u>(31,529)</u>	<u>-</u>	<u>5,438</u>
TOTAL FUNDS	<u>181,629</u>	<u>8,833</u>	<u>-</u>	<u>190,462</u>

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

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General Fund	404,146	(285,904)	118,242
Designated Fund	<u>-</u>	<u>(77,880)</u>	<u>(77,880)</u>
	404,146	(363,784)	40,362
Restricted funds			
Comic Relief Covid Response	-	(4,502)	(4,502)
Comic Relief Peer Support	32,452	(48,743)	(16,291)
National Lottery - Leaders With Lived Experience	-	(9,955)	(9,955)
Other Peer Support	500	(1,281)	(781)
Wales Peer Support	<u>2,000</u>	<u>(2,000)</u>	<u>-</u>
	<u>34,952</u>	<u>(66,481)</u>	<u>(31,529)</u>
TOTAL FUNDS	<u>439,098</u>	<u>(430,265)</u>	<u>8,833</u>

Unrestricted funds

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

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued **FOR THE YEAR ENDED 31 DECEMBER 2022**

16. MOVEMENT IN FUNDS - continued

Designated funds

In 2021, funds were designated for the Black Country and Morpeth peer support projects and the Organisational Transformation Fund, which have all been fully expensed during this financial year.

Organisational Transformation Fund

In 2019, Trustees designated £60,000 for organisational transformation work in 2020. Whilst significant progress was made, the impact of the pandemic meant some planned organisational transformation work was set aside. In planning for 2021, Trustees considered the constraints under which the Charity was operating in 2020 as the organisation expanded and the pandemic impacted upon capacity and priorities. Organisational transformation priorities were included in the 2021 plan and budget including: data management and financial forecasting systems; conducting a data security review; a ten-year impact project; website structure and content review; recruiting a fundraiser; and further developing APP's project management structure. The Trustees designated a further £25,000 to complete the work initially planned in 2020 and the new priorities added for 2021.

In 2021, the coronavirus pandemic continued to have a significant impact on APP: plans for the year were adapted; staff and resources were directed to peer support, signposting and disseminating information about PP and the support available. This reprioritisation meant that some organisational transformation work was delayed, in particular the website, CRM and impact report projects were running behind their original schedules at year end.

In 2022, the remaining designated organisational transformation funds allocated to complete these projects were spent in full.

Morpeth and Black Country Peer Support Fund

In December 2021, Trustees decided to designate the funds required for APP to meet its existing commitments to peer support projects in the Black Country and Morpeth. The funding for these projects to October 2022 and April 2022 had already been paid to APP, so Trustees felt it was important to set aside the funds to complete the agreed work. In 2022, the funds allocated were spent in full.

Restricted funds

Dads & Co-parents Peer Support

In December 2022, The D'Oyly Carte Charitable Trust made a grant of £4000 to support APP's Dads and Co-parents peer support project. This project connects dads and co-parents whose partner has 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. Our peer support staff and trained dad and co-parent volunteers also provide support on our online forum. The grant will be spent on this project in 2023.

Big Give Peer Support

APP successfully applied to the Big Give's Women and Girls Fund and their Christmas Challenge, which enabled us to run match funding campaigns in July and December. July's month-long campaign raised more than £11,000 and a week-long December campaign raised nearly £5,000 in donations and match funding. Both fundraising campaigns focused on APP's national peer support and the funds were used to support that work in 2022.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued **FOR THE YEAR ENDED 31 DECEMBER 2022**

16. MOVEMENT IN FUNDS - continued

Digital Capacity Building

APP received a grant for digital capacity building of £375 from The Big Give. The grant was in addition to the match funding we received from their Women & Girls Match Fund for our July fundraising campaign. The grant was used to explore new ways using our social media to reach existing and potential new supporters.

Marce 2022

APP received a donation to support research into postpartum psychosis, particularly through APP participating in the biennial International Marcé Society for Perinatal Mental Health Conference, which was held in London in 2022. This would promote lived experience involvement in research and develop APP's global profile and networks. APP staff and volunteers with lived experience presented in two symposiums including presenting the impact of APP's work over the last decade, exploring the ingredients for lasting impact, lessons learned, and how this learning might be used to influence care for women and families affected by PP globally. The funds were used for conference and staff travel costs.

Comic Relief - Covid Response

In 2020, APP received a grant from Comic Relief co-funded from the Comic Relief 'The Big Night In' Match Fund - COVID Response through a partnership between Comic Relief and the Department for Digital, Culture, Media and Sport (the DCMS). The grant helped APP adapt our services to meet the needs of women and families suffering from postpartum psychosis during the pandemic: increasing our use of social media; developing our support for partners of women with PP; and working to understand and better meet the needs of diverse communities. The project ended in February 2021.

Comic Relief Peer Support and Other Peer Support

Our Comic Relief funded peer support project had ended during 2019. The Comic Relief grant for the APP Peer Support Community Project enabled our Peer Support Coordinators to support and manage APP's existing Peer Support Volunteers and train new volunteers to provide peer support to women and families affected by Postpartum Psychosis across the UK. In 2020, Comic Relief made an additional grant to APP to extend this project in 2020 and 2021. The grant was for the continued operation of APP's peer support services and the development of APP's digital information and support to adequately meet the need of pregnant women at risk of PP, families in crisis developing PP, and families recovering from PP during the Covid-19 crisis. The additional Comic Relief grant ended in November 2021. The Other Peer Support fund consisted of donations restricted to peer support activities.

tnlcf - Leaders with Lived Experience

APP was awarded a project grant from the Leaders with Lived Experience Programme of the National Lottery Community Fund (tnlcf). The project started in July 2019 and enabled APP to provide additional training and support to our three national programme leaders. Project activities would enable our staff to develop as vocal lived experience leaders and enable APP to pilot gold standard ways of supporting and sustaining lived experience leadership, informing APP's future work, and championing lived experience at all levels within our charity. The project was due to end in 2020, however some activities were delayed due to the coronavirus pandemic and the Fund agreed to extend the project into 2021. The National Lottery Community Fund also provided some additional COVID-19 funding under this grant in 2020 which enabled APP to employ and develop a fourth lived experience leader, to co-ordinate APP's marketing and digital communications work. The project ended in 2021.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued **FOR THE YEAR ENDED 31 DECEMBER 2022**

16. MOVEMENT IN FUNDS - continued

Wales Peer Support

APP received a grant from the Gwendoline & Margaret Davies Charity in February 2021 to develop our peer support community and café groups in Wales. The grant enabled us to run our café groups in North Wales and South Wales, which met a total of 11 times throughout the year, both virtually and in person. mixture of virtual (video call) and in-person meet-ups. We now have 10 Welsh volunteers who support our PP awareness-raising work through lived experience talks and sharing their experiences in the media. The project ended in 2021.

17. RELATED PARTY DISCLOSURES

Action on Postpartum Psychosis is hosted by the University of Birmingham. During 2022 Action of Postpartum Psychosis paid a hosting fee to the University of £40,660 (2021: £39,167.) The charity receives benefits from this relationship including meeting and office space.

The charity has included an accrual of £10,555 (2021: £9,896) representing the amount outstanding to the University of Birmingham at 31 December 2022.

During the year, Trustees made donations to the charity totalling £7,503 (2021: £1,350).

Accounts

REGISTERED COMPANY NUMBER: 07466643 (England and Wales)
REGISTERED CHARITY NUMBER: 1139925

ACTION ON POSTPARTUM PSYCHOSIS
(A COMPANY LIMITED BY GUARANTEE)

TRUSTEES' REPORT AND
UNAUDITED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2021

ACTION ON POSTPARTUM PSYCHOSIS

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ACTION ON POSTPARTUM PSYCHOSIS

REFERENCE AND ADMINISTRATIVE DETAILS FOR THE YEAR ENDED 31 DECEMBER 2021

TRUSTEES	A Bauer (appointed 9.3.21) G S Berrisford C Dolman S A Hind I R Jones A R Jones A J Lambert (resigned 1.7.21) A Sampson
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
SOLICITORS (PRO BONO)	Howard Kennedy LLP No 1 London Bridge London SE1 9BG
BANKERS	HSBC Bank PLC 18 High Street Burton on Trent Staffordshire DE14 1HU The Cooperative Bank PLC 1 Balloon Street Manchester M60 4EP

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 DECEMBER 2021

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 a leading cause of death among new mothers, with postpartum psychosis responsible for a large percentage of these. Each year, babies lose mothers and families are bereaved, when the fact is, postpartum psychosis is a treatable illness and full recovery is possible. A shortage of Mother and Baby Units means that new mothers can be separated from their new-borns 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 and 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.

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 DECEMBER 2021

Objectives and Activities in 2021

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 2021 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 2021, we aimed to maintain and grow our national and regional peer support services by:

- increasing the number of regional café groups, social groups and wellbeing activities we offer.
- increasing our support to partners, grandparents, bereaved families and those from underrepresented groups.
- seeking a contract to deliver peer support in Wales, project funding for developing our work in Scotland.
- building our volunteer group and networks in Northern Ireland.

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 2021, we aimed to reach more health professionals with training by: delivering more training online, in addition to our face-to-face workforce training and lived experience talks; and, developing standalone in-depth/specialist and health professional e-modules and video content. Our workforce training courses are delivered by our world leading experts in Perinatal Psychiatry, APP staff members, and an APP Expert 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, the impact on their relationship with their baby, family and friends. We would continue to train, support and build our team of lived experience speakers and Regional Representatives who raise awareness and network with teams in their local areas. We also planned to continue our partnership with the Institute of Health Visiting.

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT FOR THE YEAR ENDED 31 DECEMBER 2021

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 2021, 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. We planned to use storytelling to help the public understand PP and the importance of our work. We planned to particularly target areas where we have projects, campaigns or need more volunteers, for example Wales, Northern Ireland and Scotland. In addition, we planned to conduct a ten-year anniversary campaign highlighting APP's impact and changes in women's and families' experiences over the past 10 years analysing questionnaire data.

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

In 2021, we aimed to use our specialist expertise and lived experience voice to create change in systems that are important to women and families affected by postpartum psychosis. We planned to continue campaigning for all women affected by postpartum psychosis in the UK to have access to a Mother and Baby Unit (MBU), a specialist perinatal mental health team, well-trained health professionals, information and peer support. We planned to continue our campaign to highlight the need for an MBU in Wales, Northern Ireland and Northern Scotland: sharing women's powerful stories; analysing and sharing data on MBU compared to general unit admissions over the past 10 years; and, producing a leaflet about MBUs - what they are and why they are important for women and families. We planned to run a fundraising and awareness raising campaign - "FromMe2MBU" - to raise awareness of the distances many women travel to access MBU care. We planned to start a campaign for PP to be an essential part of all antenatal class training, including surveying women and midwives, placing powerful media stories and using our charity ambassador Laura Dockrill as spokesperson. In addition, we would continue our calls for mandatory training for frontline health professionals working with perinatal families to gain an understanding of PP (midwives, GPs, health visitors, peer support staff), by sharing stories, running social media surveys, sharing our data and quotes, and developing strategic responses to consultations.

Research

In 2021, we aimed to continue to facilitate research studies of importance to women and families affected by postpartum psychosis, such as the causes of PP; parenting and long-term outcomes for children; management and prevention in high-risk women; reducing trauma; improving care; improving recovery outcomes for women and families; information and support needs in BAME populations; and information and support needs in countries outside UK. We planned to build our income from research and build our links to try to fill research and knowledge gaps identified by women, academics and clinicians. We would continue working closely with Cardiff University to facilitate projects that will improve the lives of women and families affected by postpartum psychosis, ensuring research is written up and accessible to patients; work with our NIHR collaboration and others to increase knowledge on PP in women from BAME populations. We would continue to advertise opportunities to take part in research into postpartum psychosis and work with researchers to facilitate lived experience input.

Fundraising and strengthening our capacity

In 2021, we aimed to strengthen our capacity to fulfil our charitable objectives through transforming APP's data and management systems in order to manage our rapid growth. We planned to continue upskilling staff by providing access to training and personal development opportunities and continue developing APP as a model lived experience and working parent employer. We planned to appoint a Treasurer to the

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT FOR THE YEAR ENDED 31 DECEMBER 2021

Board; recruit an experienced fundraiser, senior manager and lived experience Coordinator and to contract writers for our planned programme of report production and website content development. We planned to implement a CRM system to manage contacts and to continue reviewing reporting data and developing simpler cloud-based data recording systems.

Achievements and performance

COVID-19

The coronavirus pandemic continued to have a significant impact on APP in 2021. Service users, staff and volunteers all faced considerable challenges throughout the year. For the pregnant and perinatal women APP supports, the pandemic has increased anxieties; disrupted routes to care for women who are becoming unwell; and resulted in a lack of professional and familial support at a time when women need it most. Delayed treatment has led to women becoming more severely unwell, and greater risks to the safety of mothers and babies. Policies set up to manage coronavirus have impacted women's experience of care: for example, restrictions to partners attending births, restrictions to hospital visitation; mask-wearing carers and reduced physical contact, have all created obstacles to warm and holistic care. Recovery after PP is a long and arduous journey – in normal times, family members and social networks step in to provide support – but the isolation and lack of support has made recovery harder. The pandemic has impacted the nation's mental health, and this is especially true of women with a history of postpartum psychosis or bipolar disorder. Existing mental health problems are being exacerbated, and more women in our community are experiencing relapses.

For APP's staff and volunteers, all of whom are parents themselves and many of whom have a history of psychosis or bipolar disorder, 2021 was very challenging. They faced managing their own anxieties and stressors during the pandemic, juggling frequent disruption to schooling because of high covid case numbers in school and their family situations. APP supported them by offering flexible working and focusing more management time on overseeing wellbeing, pastoral care and training. As we did in 2020, APP continued to run more social and wellbeing activities online and checked in more often with our volunteers, holding regular video calls to offer support and reduce isolation.

Since the plan for 2021 was developed, and as detailed in risk management below, the Trustees reviewed the impact of the Coronavirus pandemic and made the following adaptations to APP's plans for 2021:

Agreeing new flexible working patterns, and agreeing adapted plans, directing all available staff and financial resources to **peer support, signposting and disseminating information** about PP and the support available. Similarly to the lockdown in 2020, Trustees anticipated the need to support four distinct groups of women and family members:

- **APP staff and volunteers:** (many of whom have a history of psychosis or bipolar) would need support to manage home-schooling, anxieties and stressors.
- **Pregnant women at risk of PP:** women who are pregnant and have had previous PP, psychosis or bipolar, who are experiencing fears about birth, support and the care that will be available. Access to routine birth planning appointments and medication advice is essential.
- **Women who develop postpartum psychosis and their families:** Those who develop PP and are in crisis during the pandemic would be in a very difficult position: many health professional home visits may not happen, and normal routes to care (the GP, mental health crisis team, ambulance, A&E) would be disrupted. Partners must be able to identify the symptoms of PP for themselves and know how to access care.
- **Women and families trying to recover** after discharge during social distancing would struggle without the usual NHS home visits, friend and family support.

Continuing to hold all regional café groups and the partners' group online and offer video call peer support widely. Holding regular online meetings for groups of volunteers (peer support volunteers, Regional Reps), staff and contractors ensuring that not only are they supported through the pandemic, but also that

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT FOR THE YEAR ENDED 31 DECEMBER 2021

they are aware of how they can help spread and amplify APP's messages, and contribute to peer support, signposting and information dissemination. Continuing planned investment in management, social media and marketing capacity. Joining with other organisations and campaigns to provide evidence on the impact of the pandemic on women and families experiencing or at risk of PP and share agreed campaigning. Regularly reviewing the impact of the pandemic on APP and on the women and families we support, adjusting plans and activities as required and continuing with lower priority activities in the original business plan as staff capacity allowed.

Peer Support to affected women and families

In 2021, APP continued its national peer support service, making adaptations to plans and prioritising activities because of the pandemic. Overall, in 2021 APP provided peer support to more than 876 people, including women, grandparents, wider families and friends through our national programme and our regional NHS projects. In addition, an average of 252 people used our anonymous online forum every month (2020: 270) with the number of registered users increasing from 2,806 to 3065. Alongside the forum and café groups, coordinators and volunteers provided ongoing telephone support to 56 people, video call support to 45 women, one-to-one messaging support to 8 people, support via email 145 people, plus one-to-one support for 25 partners.

Although we didn't promote our usual annual peer support service user survey in 2021 – due to capacity constraints – we still received completed feedback surveys from some peer support users of both our national service and a regional NHS project. Of this much smaller sample, 100 % felt less isolated because of the service (2020 survey: 95%), 100% of women felt more informed about PP since using the service (2020: 98%), 100% felt more hopeful about the future (2020: 92%) and 100% felt less negative about the experience of PP (2020: 88%). In 2020, 32% of felt that the service had saved their life, whilst in 2021, 57% of the women who answered this question agreed. Though not a full survey, the results, together with qualitative data such as case studies and stories, demonstrate that APP's peer support continues to change and save lives.

"This unique service has made a huge difference to my recovery. I felt so alone, partly due to covid, partly the nature of the PP illness. This service helped me realise I'm not alone in this and that caring compassionate people who have had similar experiences are available to talk through things with me. This service is vital. Without it I feel like my mood would have escalated and I could have ended up in hospital again." (APP peer support service user).

Café groups and wellbeing activities.

Our number of regional café groups rose to eight, after we added a group to support our new NHS collaboration in the northeast. Others operate in South Wales, North Wales, Sussex & Hampshire, Yorkshire, Lancashire & Cumbria, Birmingham and London. A total of 76 women and partners attended these support meetings during the year.

As pandemic restrictions eased in 2021, we were able to start offering face-to-face meet ups again, moving some of our café groups from online events to face-to-face meetings and re-introducing one-to-one meet ups between service users and volunteers or staff. Moving café groups to online meetings during the pandemic had however allowed us to reach more women, especially those in more remote areas and those who find it difficult to leave their homes. We therefore continued with a hybrid model, splitting meetings between virtual groups and in-person events. As in 2020, we continued to meet the needs of our volunteer population with regular volunteer group calls, online book clubs, art and craft activities, and health and wellbeing activities. To support our volunteers' wellbeing as well as their roles within APP, we also ran special evening training sessions for volunteers in April, July and August 2021 focusing on "Managing Crisis", "Self Care" and "Trauma-informed Peer Support". Feedback was excellent and we are planning more sessions for 2022.

"I really enjoyed this, great speaker and good time for me. I feel more equipped for my peer support role as a result. Many thanks for the opportunity." (APP Peer Support Volunteer)

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Reaching partners, grandparents, bereaved families and underrepresented groups

During the pandemic, pressure on partners has increased, due to fewer health professional home visits to unwell postnatal women and reduced support from wider family. In 2021, we increased our partner peer support team, recruiting a second part-time staff member to work alongside our Partner Peer Support Coordinator and five trained partner volunteers. The team supported 25 partners in 2021 via one-to-one email, telephone, video call, our online forum, and a new monthly virtual café group.

In Autumn 2021, APP's Partner Peer Support Coordinator, Simon undertook an 852-mile virtual cycling challenge to help raise awareness of the impact of PP on the partners of women who develop the illness. The ride took him 41 days and he followed a virtual path between the UK's Mother and Baby Units (MBUs). En route, he organised virtual meetings with staff at 12 Units to ask about the services they offer partners, and share information about APP's services. Following these meetings APP developed a new Dads and Co-parents poster, which will be displayed at MBUs across the UK.

Postpartum psychosis affects women's extended families and often the baby's grandparents provide considerable emotional and practical support when their daughter or their child's partner is diagnosed with PP. APP has always supported grandparents on the online forum and when they contact us directly, and in 2021 we continued to develop our support for grandparents. We now have three trained grandparent peer support volunteers, who are working with us to help extend the breadth of support we can offer to families affected by PP. In November 2020, we held the first group video call for grandparents who are supporting, or have supported, their children through postpartum psychosis. These sessions are now held bi-monthly.

In 2021, our Communities Outreach Facilitator spent time engaging with our volunteers from Black, Asian and Minority Ethnic backgrounds, giving talks to community groups about PP and linking with health professionals who are from Black or Asian communities to involve them in awareness raising for PP. She also set up video calls for women with lived experience of PP to share the specific challenges and stigmas they faced from their communities and supported our research with a Clinical Psychology student to understand the experiences and barriers to care in women from Black and Asian background who experience PP. We have now trained five peer support volunteers who are able to use their personal experiences of PP from the perspective of a Black or Asian woman. We also have new media volunteers and storytellers from diverse backgrounds (see raising awareness amongst the general public below). We continued to support individual bereaved families, but more substantive work to develop our work and resources in this area was put on hold due to the capacity pressures of the pandemic.

Expanding our work in the devolved nations

We were successful in securing two trust and foundation grants to fund our peer support work in Wales and nationally. Staffing pressures meant that planned work on larger funding proposals to expand our peer support was delayed until later in the year and early 2022. We provided one-to-one peer support to four women and one partner in Northern Ireland in 2021 and prepared to launch an online café group in 2022. We attended Maternal Mental Health Alliance's Northern Ireland meetings, networking with other organisations and encouraging them to signpost women and families experiencing PP to our peer support and resources. We also supported a volunteer in Northern Ireland to campaign for a Mother and Baby Unit (see campaigning for improved services below).

Training and supporting volunteers

We continued to train peer supporters online, training 17 new peer supporters in 2021 including three new staff and another grandparent volunteer. We currently have 76 active peer support volunteers who provide support to women and families via our online forum, café group meet-ups, video call and one-to-one emails and telephone calls. Since APP began, we have trained 102 women and family members with experience of PP to provide peer support.

In 2021, we received good feedback from volunteers about the online training we provided – 100 per cent would recommend the training to others. Many also found it supported their own wellbeing and recovery: 100 per cent felt more supported, 100 per cent had more understanding about PP and 88 per cent felt less

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isolated and better connected with others with similar experiences. We received positive feedback in training evaluation forms: *"I found that through the course I learnt more about boundaries, how to deal with situations and more understanding behind different experiences from the other women attending the training" and "I got a broad understanding of the different peer support styles and approaches to adopt depending on specific situations"*.

Peer support embedded in NHS perinatal mental health services

By the end of 2020, we had three Peer Support Facilitators embedded in NHS perinatal mental health services: in the Mother and Baby Unit in Chorley and Lancashire & South Cumbria community; in the Birmingham Mother and Baby Unit; and in the Birmingham & Solihull Community Perinatal Mental Health Teams. In addition, we had sessional peer support workers in both the Birmingham and Lancashire & South Cumbria regions able to provide holiday cover and additional support to women and families. In 2021, we began a new partnership with Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (CNTW) and recruited a new Peer Support Facilitator and two sessional peer support workers to provide peer support in the MBU at Morpeth and as women transition home. We also began a new partnership with Black Country Healthcare NHS Foundation Trust and recruited a Peer Support Facilitator to work within their Perinatal Community Mental Health Teams.

Our NHS embedded peer supporters helped 157 women (2020: 120) in 2021, in the Chorley, Morpeth and Birmingham MBUs and in the community in Birmingham, Solihull, Lancashire and Cumbria and the Black Country. With ongoing restrictions related to the COVID-19 pandemic in some areas for part of the year, we saw fewer MBU admissions at Ribblesmere MBU than the previous year for which we hold full year data to compare. Other in-patient peer support projects had started during the year or during the pandemic and we were not able to compare like for like figures. As in 2020 we had less opportunity to meet partners and family members due to continued visiting restrictions, although did provide peer support to 12 family members (2020: 13). We have found it extremely positive that in both 2020 and 2021, at the height of COVID-19 restrictions our peer support has continued face-to-face in all MBU settings in which we work; thanks to the NHS teams who have valued peer support and seen the difference it can make.

Café groups remain an integral part of our NHS partnership projects to enable recovering women to meet. In total, we held 41 groups (2020: 25). In our Lancashire & South Cumbria project, we held a record breaking 26 café groups in 2021 (2020: 19) with 15 of these held on Zoom due to ongoing restrictions in the area. We found that offering a choice of virtual or in-person groups was beneficial: virtual groups enabled people to attend if they were not comfortable or able to be outside, whilst virtual evening groups helped those who had returned to work to participate. From summer 2021, when face-to-face meetups were increasingly feasible, we increased our reach by starting café groups in Lancaster and Blackpool in September, in addition to the already popular groups in Preston and Chorley. Our CNTW Morpeth partnership project started a café group in September 2021 and met monthly for the remainder of the year, choosing venues across the vast geographical area covered by the MBU. Our Birmingham project remained as a single café group covering the four community teams and MBU, with two Peer Support Facilitators. Café groups in the area were again a mixture of virtual and in-person groups, depending on COVID-19 restrictions and the preference of women meeting. Evening groups are run regularly to enable attendance for those who have returned to work and will continue to remain an offer as part of this project.

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 peer support on one family and their journey to recovery.

"What is the APP network? For me and my family the APP network was a safety net we did not know existed until it stopped our world from crashing to the ground around us! Last year my wife

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was diagnosed with postpartum psychosis, and everything changed. To say it was an alarming time is an understatement and add to that the shocking lack of information available and we were in desperate need of support. It was then that our health visitor suggested APP.

I reached out, and just hours later was on a call with both Simon and Ellie. That turned out to be the most enlightening call of my life. They told me what to expect, reassured me that my wife would recover, and offered a wealth of information and guidance in the form of peer support and downloadable guides. These answered many of the questions the NHS had left unanswered, and the peer support is provided by those with first-hand experience of having survived or supported those with postpartum psychosis. Even now, I still use the peer support, only now I try and help others through what is a horrific and often heart-breaking experience.

Our situation was not unique, but being from Northern Ireland, a country where there is a shocking lack of support for new mothers I can't thank the APP network enough for all the work they do, and for their continuing efforts to ensure the provision of better facilities for everyone in need, like their efforts to establish a MBU in Northern Ireland, something that would have massively improved the care my wife received during her recovery."

Raising awareness amongst health professionals

In 2021, we continued to provide training and expert by experience talks to health professionals across the UK. A total of 1,500 health professionals attended a talk given by one of APP's lived experience speakers in 2021 (2020: 1,823), excluding one-day training courses. These were across 35 different online training events and four onsite events. The health professionals attending these events included midwives, health visitors, psychiatrists, mental health staff, perinatal mental health and mother and baby unit teams, psychologists, nursery nurse staff, obstetrics and gynaecology doctors, pharmacists, social workers, and mental health nurse and midwifery students. APP's National Training Coordinator supported our lived experience volunteer speakers to adapt to delivering their stories at online events including running practice sessions, creating backup plans in case the technology failed and providing hints and tips about how to manage question and answer sessions online.

We continued our partnership with the Institute of Health Visiting and participated in their two-day perinatal mental health training courses. In 2021, we delivered 15 lived experience talks on their online training courses and will continue to deliver on these courses in 2022. APP and iHVs training Coordinators have worked collaboratively to create guidelines to ensure staff and volunteers are well supported in an online space. We received excellent feedback from our speakers' sessions, including:

"We really appreciate the partnership working. The lived experience is one of the most highly rated parts of the programme and we are often asked for more of this!" (iHV Training Facilitator)

"Your sharing of your story will ensure I champion PIMH [Parent and Infant Mental Health] as best as I can." (iHV PIMH delegate)

Our relationship with the Royal College of Psychiatry (RCPsych) also continued and we co-delivered online consultant psychiatry Master Class training days. These were lived experience talks and related to the impact of postpartum psychosis on partners. These sessions received excellent feedback:

"I know that personal stories often have the biggest impact on professionals and are very memorable. I really think you gave these psychiatrists a lot to think about and reflect on and I'm sure it will make a difference to the women, partners and families they care for". (RCPsych Masterclass facilitator)

We presented lived experience talks to a wide range of audiences. In October 2021, approximately 100 trainee Obstetrics and Gynaecology doctors attended an online perinatal mental health training session at Homerton University Hospital, London. APP presented a lived experience talk and information about latest research and the charity. In November, APP presented to 25 psychiatrists from the University of Montreal Hospital, Canada. The session focussed on treatment, support and recovery from PP in the UK, and the importance of mother and baby units and peer support. Feedback was excellent, with delegates

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commenting that the session had: “Inspired us to fight for better care for women and families here”. Our Partner Peer Support Coordinator, Simon, was asked to take part in perinatal peer support workers induction training at Jasmine Lodge Mother and Baby Unit in Devon, receiving very good feedback: “it was great to hear the power of his testimony”. Our Under-represented Communities Facilitator took part in a well-received faith awareness workshop for Health professionals focusing on Muslim spiritual beliefs, organised by Approachable Parenting.

In 2021, we delivered three sessions of APP’s one-day training course (2020: 3) – Managing Postpartum Psychosis and Severe Mental Illness in the Perinatal Period, training 53 health professionals (2020:46). In our evaluation, 100 percent of the delegates rated the training as excellent (86.7 percent) or good (13.3 percent); 80 percent of the delegates said it would change their practice a lot. Individual feedback included:

“So informative and touched on all the emotions, inspiring”.

“The mixture of evidence-based information and first-hand experience is so helpful”.

“Honest, informative and absolutely fantastic, thank you”.

Raising awareness amongst the general public

In 2021, our lived experience storytellers helped us to 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. Our media volunteer team grew by 20, bringing our total number of media volunteers to 52. We trained three media volunteers from underrepresented communities who are part of our Storytellers team, sharing their experiences of PP. For example, APP volunteer Lobeh Osagie-Asiah who took part in the BBC World Service programme ‘The Conversation’ in August discussing how PP had affected her and her family¹. We’ve also worked with author Catherine Cho on opening the public conversation about religion, culture and PP with key publicity pieces and talks at national conferences. We targeted specific publications in order to reach more diverse communities, including the Urdu Times² and Eastern Eye³. Meanwhile, APP Volunteer Charity told her story as a mum of triplets, which was shared by a number of LGBTQ+ social media accounts⁴.

In January 2021 we celebrated our 10-year anniversary as a charity by announcing our first ambassadors: poet, author and illustrator, Laura Dockrill, who experienced postpartum psychosis in 2018, and her husband, Hugo White, a musician and record producer, formerly of The Maccabees. Working with Laura and Hugo enables APP to amplify its voice and reach people we might not otherwise be able to reach. Ambassadors play a hugely important role in getting the message out there and we’re absolutely delighted to have two passionate, experienced and influential individuals flying the flag for all the women and families who have been impacted by postpartum psychosis.

“Experiencing postpartum psychosis was bewildering and frightening. We had no idea what was happening and the symptoms left me feeling confused, afraid and, at times, suicidal. Jess and the team at APP reached out to me while I was in recovery, bringing with them a boatload of love, warmth and hope, sharing information, and introducing me to an amazing network of women that I have been engaged with ever since. I know from personal experience just how vital APP’s work is, and that’s why I’m so proud that Hugo and I will become ambassadors. I hope I can help to reach others who may be struggling because, as I now know, there is always hope and light - we just need to show people how and where to find it.” Laura Dockrill

¹ <https://www.bbc.co.uk/programmes/w3ct1p8v>

² http://urdutimesuk.com/epaper.php?page_id=9053

³ <https://www.easterneye.biz/charity-urges-to-increase-awareness-about-maternal-mental-health-among-black-and-asian-women/>

⁴ <https://www.app-network.org/personal-experiences/charitys-story-i-became-obsessed-by-the-idea-that-the-doctors-thought-i-couldnt-look-after-my-babies/>

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"Postpartum psychosis is a traumatic experience for all involved - it's totally devastating seeing the person you love in such pain. That's why I'm keen to support APP's partner peer support work. Having someone to talk to who really gets what you've been through, or what you're still going through, makes a huge difference." Hugo White

Laura and Hugo have spoken widely about their experience of PP, including in broadsheet newspapers, glossy magazines, podcasts and on television. Highlights included:

- Hugo sharing his postpartum psychosis experience as a husband and father in the Independent.⁵
- Laura speaking on Radio 4's Four Thought in September describing her experience of PP. In her essay 'And They Said We'd Be Glowing' she calls for a wider conversation about risks to perinatal mental health.⁶

In 2021, we continued to plan social media and media work around various awareness days or weeks and in support of our regional projects, as well as reacting to events and media requests. We joined more than 200 partners in the social media campaign for World Maternal Mental Health day in May and were one of the top ten influential twitter accounts for the #maternalMHmatters hashtag over Maternal Mental Health Awareness week. In September, we ran a campaign for World Suicide Prevention Day and Maternal Suicide Prevention Week, highlighting the signs and symptoms of PP, reaching 33,144 people across our social media channels and engaging 1,482. Comments on the campaign included: "This is very insightful - well done. More awareness will save lives and give a better understanding to families."

Alongside his cycling challenge, our Partner Peer Support Coordinator, Simon, used social media opportunities to raise awareness of the needs of partners and of APP's support for them. He took part in 'Family Hour' and 'Dadventurers' live chats, wrote blog posts for International Fathers' Mental Health Day and for 'DadPad' and was interviewed on BBC Radio Surrey. In Wales, APP volunteer Barbara, told her story of having PP after the birth of her two children and her role in campaigning for the new MBU in South Wales in Wales Online. We also promoted our film Facebook Live: #HonestConversations about Postpartum Psychosis: With Sally, Ines & Sharon in Wales recorded at the very end of 2020⁷. Other highlights included:

- Volunteer Kat Grant shared her story and experience of MBU care in an article for Health Affairs.⁸
- APP volunteer Katherine Shaw shared her PP story in the Daily Mail⁹, The Sun¹⁰ and The Mirror¹¹ in October.
- APP staff member Naomi shared her story with The Flock for Menopause Awareness Day, calling for an increase in awareness about the risk posed in menopause to those who have previously suffered from mental health issues¹².

APP has always sought to understand the experience of PP in a variety of ways, from clinical and research studies to supporting personal stories and awareness raising pieces in the arts. June 2021 saw the launch in Oxford of "after birth", a new play written by Zena Forster and directed by Grace Duggan. "after birth" is a comedy deeply rooted in the real-life testimonies of women within the APP network. APP has been supporting Zena's development of this piece for several years. In 2021, we also worked with a theatre company who are researching and developing a theatre piece, based on an historic account of postpartum psychosis.

We continued to use social media to provide peer support in new ways, running live events and activities online for volunteers and beneficiaries - for example our regular book club – and ensuring that there was

⁵ <https://www.independent.co.uk/voices/postnatal-depression-psychosis-fathers-day-b1867734.html>

⁶ <https://www.bbc.co.uk/programmes/m000zl0x>

⁷ https://www.youtube.com/watch?v=IM_kTqn4DSM&t=10s

⁸ <https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2021.01288>

⁹ <https://www.dailymail.co.uk/femail/article-10079479/Healthy-mum-suffered-rare-psychotic-episode-week-giving-birth-warns-parents-signs.html>

¹⁰ <https://www.thesun.co.uk/health/16386363/thought-i-would-be-crucified-babys-arrival-second-coming/>

¹¹ <https://www.mirror.co.uk/lifestyle/family/mum-suffers-rare-psychotic-episode-25184708>

¹² <https://flockmag.com/the-menopause-could-be-life-threatening-for-me-but-nobody-seems-to-be-listening/>

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always a trained peer supporter monitoring our social media to provide support and signposting to anyone needing help who commented or messaged us. We used social media to promote our online café groups, online volunteer meetups and community activities in order to manage the ongoing stress and isolation felt by many in our community during the pandemic

The impact of the coronavirus pandemic meant that some planned work was delayed; for example, although our survey of changes in women's and families' experiences over the past 10 years was conducted, analysis of the results was delayed to 2022. However, we continued to extend our social media content and reach: our social media followers increased by a third on Facebook and Instagram and by 26 percent across all platforms. Our total social media reach was 2,469,054 (2020: 2,159,356), with engagement 75,290 (2020: 63,094), whilst we had 132,833 website hits (2020: 124,339), including more than 6,000 views of our Insider Guides web page (2020: 4,500). We supported 33 national and regional media stories in 2021¹³, and shared these across our three main social media channels.

Campaigning for improved services

In 2021, we used our specialist expertise and lived experience voice to work towards change in systems that are important to women and families affected by postpartum psychosis. We were delighted to see the new Mother and Baby Unit in South Wales open in April 2021. Uned Gobaith ('Unit of Hope') is the only inpatient unit in Wales. The six-bed unit is at Tonna Hospital in South Wales and is providing specialist inpatient care to new and expectant mums in Wales who experience serious mental health problems. APP's staff and lived experience volunteers in Wales have been campaigning for this unit for several years, and we worked closely with the MBU development group to ensure that the voices of women with Lived Experience shaped all aspects of the design of the new unit. In April 2021, APP staff and volunteers trained the new staff at the unit. APP will continue to strengthen this relationship with the unit to ensure all new staff are inducted.

Our ten Wales volunteers have supported our campaigning work during 2021, sharing their stories in the media to raise awareness of PP and the effect on families. For example, APP volunteer, Barbara, told her story of having PP after the birth of her two children and her role in campaigning for the new MBU in south Wales in Wales Online. The volunteers have also been part of our campaign supporting a petition to the Senedd for a new Mother and Baby Unit in north Wales led by APP storyteller, Nia Faulks. This has now reached committee panel stage and has been passed to the Children and Young People's Committee to act upon.

As capacity allowed, we continued to develop our work in Northern Ireland and Scotland. Representatives from APP spoke at the virtual Northern Ireland Maternal Mental Health Conference, reaching 111 delegates including parents, health services professionals and representatives from the third sector. We participated in MMHA's Northern Ireland meetings and continued supporting APP volunteer, Orlagh Quinn's petition calling for an MBU in Northern Ireland¹⁴. We continued working with our Scottish volunteers and met with MMHA's Scotland Coordinator, Latnem - a perinatal mental health organisation working in the North East of Scotland - and the new Ayrshire and Arran perinatal mental health team. We recruited six new Regional Rep volunteers in 2021 and continued to focus on building capacity in the devolved nations. We have 11 volunteers in Scotland, 10 in Wales, and one in Northern Ireland. Overall, APP now has 106 Regional Reps in total, of whom around 61 are currently active in volunteering.

We launched our survey on experiences of care in autumn 2021; 350 women with experience of postpartum psychosis in the last 10 years completed the survey. The survey will help us to understand how differences in the types of care women receive for postpartum psychosis impacts on their experiences and recovery outcomes. The data is being analysed and will be used to assess and compare recovery

¹³ www.app-network.org/news-events/in-the-press/

¹⁴ <https://www.change.org/p/robin-swann-northern-ireland-health-minister-help-save-lives-demand-mother-and-baby-units-in-northern-ireland>

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and care outcomes in women cared for in MBUs and un General Units and to inform APP's future work and objectives.

APP participated in meetings and input into national consultations to ensure that the voices of women and families with lived experience were considered. Policy activities included:

- Consulting with members of our network and responding to the Mental Health Act (MHA) consultation. We called for greater consideration to be given to perinatal mental health, welcomed "Advanced Choice Documents" and "Nominated Person" powers, recommended that a perinatal psychiatrist be involved in MHA assessments for perinatal women, access to specialist treatment or a Mother and Baby Unit and written accountability if an MBU is not part of the treatment plan for a perinatal woman.
- Responding to the Department of Health and Social Care Women's Health Strategy consultation, emphasising the need for equitable access to perinatal mental health services, more research into PP, education about PP and information for women and families.
- Submitting written evidence to the All-Party Parliamentary Group on Menopause Inquiry drawing on the limited existing research data and the personal experiences of women of menopausal age in our network to support recommendations to improve health outcomes for women at risk of a relapse of severe mental illness during menopause. Our recommendations included: mandatory GP training on risks to mental health during menopause for women with a history of severe perinatal mental illness and/or a diagnosis of bipolar disorder; mandatory training for psychiatrists on interactions between HRT and psychotropic medication; and a rapid review, and dissemination to women's organisations and health professionals, of evidence relating to perinatal illness, menopause, and HRT use.
- Signing a joint letter to the Chair of the Children, Young People and Education Committee of the Senedd, responding to the consultation on the Committee's priorities and emphasising the importance of perinatal and infant mental health.

Research

APP is hosted by Birmingham University and works closely with researchers at the National Centre for Mental Health at Cardiff University. We facilitate research, support lived experience consultancy, and help disseminate findings, ensuring evidence-based information is accessible to women, families and health professionals. In 2021, with more staff capacity devoted to research, we developed a lived experience research group to advise and support research studies. We continued to engage with students, academics and health professionals to facilitate interest in PP research throughout the UK. We formed collaborations to help fill gaps in research knowledge, for studies that will be conducted over coming years and supported recruitment for 16 research studies during the year, including 10 student projects and 5 funded research projects. APP have helped with research questions, study design, recruitment and study write ups for reports and peer reviewed journals. Some highlights include:

- Working with the MRC Centre for Neuropsychiatric Genetics and Genomics¹⁵ and the National Centre for Mental Health at Cardiff University on a programme of reproductive neuroscience studies, including the *Motherhood and Mental Health (MaM) Study*, supporting recruitment to clinical and genetic studies of postpartum psychosis, and research into sleep, menopause, risk factors and outcomes.
- Collaborating in a National Institute for Health Research (NIHR) study examining the *Accessibility & Acceptability of Specialist Perinatal Mental Health Services to women and families from Black and Minority Ethnic groups (PAAM)*. APP employed a Lived Experience Peer researcher to conduct

¹⁵ <https://www.cardiff.ac.uk/mrc-centre-neuropsychiatric-genetics-genomics>

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qualitative interviews and worked with the study team to support planning, design and interpretation of results.¹⁶

- Working with Matrix Cymru: Public Health Wales: APP worked on the task group to review the evidence for psychological therapies in postpartum psychosis. Findings will be published in 2022.
- Supporting *The Wellcome Trust: Postpartum Psychosis Drug Discovery study*, led by Professor John Atack, Director of the Medicines Discovery Institute, at Cardiff University.
- The publication of Elen Thomas' doctoral thesis developing and testing a new tool for women and health professionals to use to support decision-making for women with bipolar disorder or those with previous postpartum psychosis, during pregnancy and the postpartum period, which APP had supervised.¹⁷
- Working with writers of 'After birth' theatre piece and researchers from the University of Oxford to develop a study exploring the feasibility of using theatre/film as a health professional training intervention.

Fundraising and strengthening our capacity

In 2021, the coronavirus pandemic continued to have a significant impact on APP: plans for the year were adapted, and staff and resources were directed to peer support, signposting and disseminating information about PP and the support available. This reprioritisation meant that some organisational transformation work was delayed, in particular the website, CRM/data and impact report projects were put on hold. We continued to train and develop our staff, including through the opportunities provided through our Lived Experience Leaders project. We used the project funds to further invest in our National Coordinators' leadership and management skills. Building on these skills means we can support the growth of the organisation as well as deliver better quality programmes and services for the women and families we support. Our National Coordinators have seen their roles and responsibilities increase and evolve; they have each at least doubled the number of volunteers for whom they are responsible, and all now manage their own staff and projects. Training in leadership, project planning, managing staff, managing volunteers, presentation skills and time management have all been hugely beneficial for them. In 2021 we also developed and implemented tailored Wellbeing Plans for all staff.

In 2021, we had aimed to recruit a Treasurer to the Board and recruit an experienced fundraiser, senior manager and lived experience Coordinator and to contract writers for our reports and website content development. We were delighted that Annette Bauer - a Health Economist and Assistant Professor at the London School of Economics - joined our Board as Treasurer in March 2021. A new national Coordinator with lived experience of PP was recruited in late 2021 for a 2022 start date, whilst recruitment for an experienced fundraiser was underway by year end with the successful candidate starting in March 2022. We also contracted a writer who began work on redeveloping our website.

We were successful in securing two small trust and foundation grants to fund our peer support work in Wales and nationally. Staffing pressures meant that planned work on larger funding proposals to expand our peer support was delayed until later in the year and early 2022. We expanded our contract with Birmingham and Solihull Mental Health Foundation NHS trust to provide an additional day per week of peer support in the community perinatal mental health teams. We also secured contracts to provide peer support in the community in the Black Country and in the Morpeth MBU and as women transition home.

Despite the pandemic, our voluntary fundraising continued to be successful, with our Miles for Mums and Babies fundraising campaign being a significant new source of funding. Each mile reflects the journey mums, babies, partners and families travel to be together, whilst mums receive care in Mother and Baby

¹⁶ Jankovic, J., Parsons, J., Jovanović, N., Berrisford, G., Copello, A., Fazil, Q. and Priebe, S. (2020) *Differences in access and utilisation of mental health services in the perinatal period for women from ethnic minorities—a population-based study*. *BMC medicine*, 18(1), pp.1-12.

¹⁷ Thomas, E. (2021) *Bipolar Disorder and Postpartum Psychosis Pregnancy Planning (PREP) Study: developing an interactive guide for women at high risk* (Doctoral dissertation, Cardiff University). <https://orca.cardiff.ac.uk/id/eprint/148927/>

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Units (MBUs). We had a fantastic response to our challenge; fundraisers and their chosen challenges included:

- Consultant Psychiatrist, Neha Rawat, and her family who covered 534 miles in May through a combination of walking, running, jumping and crawling. They chose their target to represent the distance between the NHS Lothian Livingston MBU in Scotland and Jasmine Lodge MBU in Devon.
- The team from the MBU at Glasgow's Leverndale Hospital and colleagues from the Community Perinatal Mental Health Team challenged themselves to walk 10,000 steps a day throughout May to raise awareness of postpartum psychosis and to support APP.
- APP staff member, Naomi Gilbert, who took part in her first ever triathlon in September 2021. She chose a triathlon to highlight that during her recovery from PP she had to go to three separate psychiatric hospitals without her daughters, as there was no local Mother and Baby Unit at the time.
- The team from the new Perinatal Mental Health Service in Ayrshire and Arran challenged themselves to walk 1,400 miles throughout October. They wanted to take part in #MilesForMumsAndBabies to raise awareness of PP, support APP, and come together as a team. They chose the distance as it represents the 1,400 mums who experience PP in the UK each year.
- Anna Grisedale, who had PP in 2015 and 2018, challenged herself to walk 119 miles, which represents the journey she made from Leeds to the MBU in Morpeth with her first born.
- Simon O'Mara, APP's Partner Peer Support Facilitator who cycled an 852-mile virtual route between the UK's MBUS, raising awareness of the impact of PP and of APP's support for dads and coparents.

We are very grateful to all our many individual fundraisers who have found creative ways to fundraise and increase awareness. We'd particularly like to thank Katherine Kay who completed a sea swim of 40 miles in 40 days in support of APP and Winston's Wish, to honour the memory of her friend Amy Rogers, raising more than £10,000, and Dale Marr who walked 250 miles in memory of her sister and to raise awareness and funds for APP. Finally, we'd like to thank Stephen Vinter for his perseverance in training and fundraising; after three cancellations of the in-person event, he finally ran a virtual Edinburgh marathon in May 2021.

Financial Review

The Statement of Financial Activities on page 23 shows APP's income and expenditure for the year. During the year ended 31 December 2021, income exceeded expenditure by £8,833. These net incoming resources are primarily the result of planned activities being delayed by the coronavirus pandemic as we focused available staff resources on peer support, signposting and disseminating information about PP and the support available.

In our Unrestricted Funds, income exceeded expenditure by £40,362. Income from charitable activities increased significantly, reflecting new increased contract income with the further expansion of our work in Birmingham and Solihull and new work in Morpeth and the Black Country. Grant income decreased as Covid grants came to an end and we did not secure new larger grants. Income from training decreased whilst income from donations increased, with a decrease in corporate donations being offset by increased general fundraising. In our restricted funds expenditure exceeded income by £31,529, reflecting the expenditure of funds carried forward from the prior year to complete activities on the Comic Relief Peer Support and COVID Response projects and the Leaders with Lived Experience project.

The Balance Sheet on page 24 shows that at 31st December 2021, APP was holding £190,462; of which £5,438 was restricted funds. Of the remaining £185,024 unrestricted funds, £24,078 had been designated by the Trustees to complete organisational transformation work in 2022 to respond to APP's growth, and £8,631 and £25,821 had been designated by the Trustees to complete planned work in Morpeth and the Black Country respectively. APP's reserves policy is to hold three months core operating costs in reserve to guard against fluctuations in income. At the end of the 2020 financial year, the Board deemed three months core operating costs to be in the range of £80,000 to £90,000. On 1st January 2021, APP was

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 DECEMBER 2021

holding £86,301 in free reserves, which was within the range then recommended by our reserves policy. On 31st December 2021, APP was holding £126,493 in free reserves, which was slightly above the range then recommended by our reserves policy (£110,000 - £120,000). The Board continues to review the appropriate reserves level and take steps to bring the funds held in line with that.

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 is still hosted by the University of Birmingham today. The University provides office space, expert time, infrastructure and resources to the charity. We are co-hosted by the Birmingham and Solihull Mental Health Foundation NHS Trust and the University of Cardiff National Centre for Mental Health, who provide 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. Her time for this is bought by the charity from the University of Birmingham. Operational plans and all major strategic decisions are discussed and agreed by the Board of Trustees.

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. A skills audit has been undertaken and efforts are made to recruit Trustees who meet the skills requirement. In 2016, the Board agreed to aim towards a leaner Board, with all the skills necessary to the functioning of the charity. During 2021, one long standing Board member resigned, and a new Board member was appointed as Treasurer to fill an identified skills gap.

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.

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 is high, and capacity pressures impact on income generation. Since 2017, a new fundraising strategy has been implemented to improve sustainability and diversify our funding base, whilst in 2021 we began recruiting for a dedicated fundraising role. 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 (for example peer support contracts), the financial, legal, health and safety, operational and reputational risks are reviewed by senior

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT FOR THE YEAR ENDED 31 DECEMBER 2021

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.

COVID-19: Throughout 2021, the Trustees reviewed the principal risks in relation to the unfolding Coronavirus pandemic. As a home-based organisation, APP had adapted well to the restrictions of government measures to control the pandemic, however all staff have school age children and we anticipated a significant increase in demand from women and families affected by PP, particularly during periods of national lockdown.

Key risks facing the organisation in 2021 were financial sustainability, management capacity, and operational risks related to the pandemic, in particular high rates of mental health relapse in staff and volunteers. Financial sustainability was addressed by: revising the budget and regularly reviewing forecast income and expenditure in light of the pandemic; launching the Miles for Mums and Babies fundraising campaign; trialling online workforce training that could be booked by anyone (rather than being commissioned to deliver workforce training for a particular organisation); securing and new or extended NHS contracts; and seeking closer research collaborations, in particular with the Institute for Mental Health at Birmingham University, to increase future research funding. Management capacity risks were addressed through recruiting an additional national lived experience Coordinator, a fundraiser and further administrative support. We recruited a Treasurer and continued to actively network to seek Board members to fill the identified skills gaps. Operational risks arising from the coronavirus pandemic were addressed through: continuing to agree new flexible working patterns, prioritise and reassign work; holding regular meetings with staff, contractors and volunteers to provide pastoral care and support; reviewing staff Wellbeing Plans; offering both face-to-face services and online services where possible; updating risk assessments for NHS contracts; and increasing staff capacity.

Plans for Next Year

Action on Postpartum Psychosis plans for 2022 were grouped under the following objectives:

- 1. Supporting women and families.** We plan to maintain and grow our national and regional peer support service by:
 - Maintaining our current NHS projects and ensuring the resilience of each project under a range of scenarios (e.g., staff sickness, pandemic restrictions) by training and supporting employees, sessional workers and new volunteers.
 - Strengthening our NHS peer worker team by providing ongoing training, opportunities to meet regularly online, share resources and participate in co-working days.
 - Building links with the newly developing provider collaboratives and strengthening links with all UK MBU peer workers and ward managers with the aim of reaching all MBUs with peer support in the future.
 - Growing our national peer support team, to meet demand for forum, email, and social media support, together with online wellbeing, creative and community building activities.
 - Reviewing processes for beneficiaries and volunteers to improve journeys and engagement. Gaps in volunteer skills will be managed through new volunteer recruitment and an ongoing volunteer training programme.
 - Developing protocols to support our network of café groups, increasing attendance, and ensuring they are safely run and well-advertised.
 - Recruiting volunteers in Northern Ireland, Scotland and North Wales and setting up café groups to deliver support and facilitate campaigning. Continuing supporting two café groups in Wales and establishing up to two new café groups in locations with NHS projects or where we have new Lived Experience staff.

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT FOR THE YEAR ENDED 31 DECEMBER 2021

- Running regular activities to engage partners, grandparents, and Black and Asian communities to increase engagement. Producing a written plan to reach into Black and Asian communities with input from our volunteers.

2. **Raising awareness amongst health professionals.** We plan reach more health professionals with training by:

- Delivering three online bookable one-day training sessions and up to three NHS commissioned in person training days, promoting, evaluating and seeking university accreditation for this training.
- Continuing collaborations with the Institute of Health Visiting (iHV) and other professional bodies, training, supporting and developing resources for Lived Experience speakers. Supporting up to 50 events throughout the year.
- Surveying professional groups to identify training needs.
- Identifying a provider to develop APP training modules and creating a timetable for module development and outline of costs.
- Developing a written plan for training updates for NHS teams who have already been trained by APP, and in APP's NHS partnership project regions.

3. **Raising awareness amongst the general public.** We plan to raise awareness in the general public to reduce stigma and misinformation by:

- Using media case studies and social media to raise awareness of our lifesaving information and support, using storytelling to help the public understand PP and the importance of our work.
- Sharing stories from women, partners and families about care received in an MBU and the impact of not being able to access an MBU bed.
- Sharing stories from women, partners and families about the impact of not hearing about PP during antenatal classes, and not knowing about the illness before diagnosis.
- Continuing to support film, theatre, TV or book projects that tell PP stories, linking creatives to our network of women and families with lived experience.

4. **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:

Mother & Baby Units

- Highlighting the gaps in Mother and Baby Unit (MBU) provision in North Wales, Northern Ireland, northern Scotland working with the Maternal Mental Health Alliance (MMHA) and National Society for the Prevention of Cruelty to Children (NSPCC).
- Ensuring MBUs are valued by the public and policy makers, by sharing powerful stories from women, partners, families at national events, at key meetings, to influencers, on social media and in the press. Sharing stories about care received in an MBU or care in other settings.
- Connecting with MBU staff and NHS Trusts to support MBU communications and share good news stories. Connect with MBUs via APP staff and volunteer initiatives.
- Preparing press releases and expert commentary, writing up and making accessible APP's MBU data, analysing and reporting on data collected in our recent 10-year survey.

PP in Antenatal Classes

- Promoting the findings of our YouGov survey about PP antenatal class education.
- Surveying midwives and National Childbirth Trust (NCT) trainers about PP content in antenatal education, fears and practice, using the results to develop content, suggested phrases, and an online Q&A for midwives/NCT providers.
- Seeking collaboration for a campaign for PP to be an essential part of all antenatal class training, with NCT, MMHA involving our network of regional reps.
- Placing powerful media and social media stories and using our charity ambassador Laura Dockrill as spokesperson.

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT FOR THE YEAR ENDED 31 DECEMBER 2021

5. **Research.** We will continue to facilitate research studies of importance to women and families affected by postpartum psychosis, by
- Analysing and reporting on APP's MBU survey and plan to maximise the impact of the results.
 - Building stronger links with the Institute of Mental Health in Birmingham University and the National Centre for Mental Health at Cardiff University, working with them to raise awareness of APP, develop funding proposals, and share communications.
 - Surveying women and families on research gaps, publishing results on our website, liaising with funders and research groups to make plans to fill research gaps. Publishing guidelines for researchers and students on our website regarding the type of research APP will support and our expectations.
 - Supporting and engaging our Lived Experience research consultation group and developing our processes for supporting lived experience co-production.
 - Considering improvements to processes needed to build APP's research register and engage our community in research participation.
 - Developing web content on survey findings, and fill information gaps (e.g., menopause, becoming a grandparent, accessing an MBU, updating partner info, parenting after PP info).
6. **Strengthening our capacity to fulfil our charitable objectives.** We plan to transform APP data and management systems in order to manage our rapid growth by:
- Building fundraising capacity by appointing an experienced to oversee the growth of APP's fundraising campaigns and grassroots fundraising fundraiser (recruitment began in late 2020).
 - Increasing core capacity by increasing admin support to the management team, research, training and NHS projects.
 - Continuing to develop staff training, staff support practices, and report on pay and conditions best practice to support the further development of APP as a model lived experience/working parent employer.
 - Refreshing the website template and working through web content section by section.
 - Improve internal processes by appointing a senior staff member with data management and CRM implementation expertise to implement a CRM towards the end of 2022 and oversee a review of data policies and IT security.
 - Carrying out the groundwork in considering the organisational capacity and structure required for future growth: internationally; research impact; health professional training reach; café groups; MBU inreach; and capacity to develop information and content. This will enable us to begin to seek funding for pilot international work in 2023.

ACTION ON POSTPARTUM PSYCHOSIS
TRUSTEES' REPORT
FOR THE YEAR ENDED 31 DECEMBER 2021

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., finance, HR and digital marketing). Directors/Trustees during 2021 were as follows:

Dr Giles Berrisford	Chair	
Annette Bauer	Treasurer	(appointed 9 March 2021)
Dr Clare Dolman		
Sarah Hind		
Anna Jones	Vice Chair	
Professor Ian Jones		
Andrea Lambert		(resigned 1 July 2021)
Abbie Sampson		

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 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.

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT FOR THE YEAR ENDED 31 DECEMBER 2021

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;
- 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.

Approved by order of the board of trustees on and signed on its behalf by:

.....

G S Berrisford - Trustee

INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF ACTION ON POSTPARTUM PSYCHOSIS

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 2021.

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

Date:

ACTION ON POSTPARTUM PSYCHOSIS

STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING AN INCOME AND EXPENDITURE ACCOUNT) FOR THE YEAR ENDED 31 DECEMBER 2021

	Notes	Unrestricted funds £	Restricted funds £	2021 Total funds £	2020 Total funds £
INCOME AND ENDOWMENTS FROM					
Donations and legacies	2	137,683	-	137,683	128,325
Charitable activities					
General	5	266,455	34,952	301,407	252,437
Other trading activities	3	-	-	-	198
Investment income	4	<u>8</u>	<u>-</u>	<u>8</u>	<u>102</u>
Total		404,146	34,952	439,098	381,062
EXPENDITURE ON					
Raising funds		6,019	-	6,019	2,865
Charitable activities					
General	6	357,765	66,481	424,246	321,030
Total		<u>363,784</u>	<u>66,481</u>	<u>430,265</u>	<u>323,895</u>
NET INCOME/(EXPENDITURE)		40,362	(31,529)	8,833	57,167
RECONCILIATION OF FUNDS					
Total funds brought forward		144,662	36,967	181,629	124,462
TOTAL FUNDS CARRIED FORWARD		<u>185,024</u>	<u>5,438</u>	<u>190,462</u>	<u>181,629</u>

CONTINUING OPERATIONS

All income and expenditure has arisen from continuing activities.

ACTION ON POSTPARTUM PSYCHOSIS (REGISTERED NUMBER: 07466643)**STATEMENT OF FINANCIAL POSITION
31 DECEMBER 2021**

	Notes	2021 £	2020 £
FIXED ASSETS			
Tangible assets	12	280	680
CURRENT ASSETS			
Debtors	13	89,084	16,525
Cash at bank		<u>142,030</u>	<u>196,652</u>
		231,114	213,177
CREDITORS			
Amounts falling due within one year	14	(40,932)	(32,228)
NET CURRENT ASSETS		<u>190,182</u>	<u>180,949</u>
TOTAL ASSETS LESS CURRENT LIABILITIES		190,462	181,629
NET ASSETS		<u>190,462</u>	<u>181,629</u>
FUNDS	16		
Unrestricted funds:			
General Fund		126,494	86,300
Designated Fund		<u>58,530</u>	<u>58,362</u>
		<u>185,024</u>	<u>144,662</u>
Restricted funds		<u>5,438</u>	<u>36,967</u>
TOTAL FUNDS		<u>190,462</u>	<u>181,629</u>

The charitable company is entitled to exemption from audit under Section 477 of the Companies Act 2006 for the year ended 31 December 2021.

The members have not required the company to obtain an audit of its financial statements for the year ended 31 December 2021 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

ACTION ON POSTPARTUM PSYCHOSIS (REGISTERED NUMBER: 07466643)

**STATEMENT OF FINANCIAL POSITION - continued
31 DECEMBER 2021**

These financial statements have been prepared in accordance with the provisions applicable to charitable companies subject to the small companies regime.

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

.....
G S Berrisford - Trustee

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2021

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.

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 its estimated useful economic life of 3 years, on a straight line basis.

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.

Debtors

Prepayments are valued at the amount prepaid.

Cash and cash equivalents

Cash and cash equivalents include cash in hand and deposits held at call with banks.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2021

1. ACCOUNTING POLICIES - continued

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.

Pensions

Payments to defined contribution retirement benefit schemes are charged as an expense as they fall due.

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 £	2021 Total funds £	2020 Total funds £
Donations	<u>137,683</u>	<u>-</u>	<u>137,683</u>	<u>128,325</u>

In the prior year, £128,325 of the income related to unrestricted funds and £nil to restricted funds.

3. OTHER TRADING ACTIVITIES

	Unrestricted funds £	Restricted funds £	2021 Total funds £	2020 Total funds £
Sale of literature	<u>-</u>	<u>-</u>	<u>-</u>	<u>198</u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2021

4. INVESTMENT INCOME

	Unrestricted funds £	Restricted funds £	2021 Total funds £	2020 Total funds £
Bank interest	<u>8</u>	<u>-</u>	<u>8</u>	<u>102</u>

In the prior year, £102 of the income related to unrestricted funds and £nil to restricted funds.

5. INCOME FROM CHARITABLE ACTIVITIES

	2021 £	2020 £
Comic Relief - APP Peer Support Community Project	32,452	32,452
Comic Relief - Covid response	-	21,302
tnlcf - Leaders with Lived Experience Programme	-	19,757
The Fore	-	5,000
Mind Grants	-	2,496
Other Trusts and Foundations	2,500	3,000
Government Grants - Coronavirus Statutory Sick Pay Rebate Scheme	128	-
Contract Income - Lancashire and South Cumbria NHS Foundation Trust	67,530	67,530
Contract Income - Birmingham and Solihull Mental Health NHS Foundation Trust	96,614	72,105
Contract Income - Black Country Healthcare NHS Foundation Trust	48,050	-
Contract Income - Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust	29,998	-
Workforce Training and Experts by Experience	8,925	17,406
Research contracts	<u>15,210</u>	<u>11,389</u>
	<u>301,407</u>	<u>252,437</u>

In the prior year, £176,430 of the income related to unrestricted funds and £76,007 to restricted funds.

6. CHARITABLE ACTIVITIES COSTS

	Direct Costs (see note 7) £	Support costs (see note 8) £	Totals £
General	<u>416,820</u>	<u>7,426</u>	<u>424,246</u>

In the prior year, £252,864 of the expenditure related to unrestricted funds and £68,166 to restricted funds.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2021

7. DIRECT COSTS OF CHARITABLE ACTIVITIES

	2021	2020
	£	£
Staff and freelance costs	304,339	209,623
Consultancy	62,887	63,636
Project costs	320	461
Travel	9,704	7,435
Information materials and awareness raising	11,806	5,971
Volunteer training & expenses	1,167	1,823
Office and running costs	26,070	22,544
Workforce training and experts by experience costs	127	974
Depreciation	<u>400</u>	<u>401</u>
	<u>416,820</u>	<u>312,868</u>

8. SUPPORT COSTS

	Governance costs £
General	
	<u>7,426</u>

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

	2021	2020
	£	£
Independent examiners fee	2,200	2,220
Accountancy fees	5,140	4,153
Other fees	86	1,503
Board expenses	<u>-</u>	<u>286</u>
	<u>7,426</u>	<u>8,162</u>

9. NET INCOME/(EXPENDITURE)

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

	2021	2020
	£	£
Depreciation - owned assets	400	401
Independent Examination Fee	<u>2,200</u>	<u>2,220</u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2021

10. TRUSTEES' REMUNERATION AND BENEFITS

There were no trustees' remuneration or other benefits for the year ended 31 December 2021 nor for the year ended 31 December 2020.

Trustees' expenses

There were no trustees' expenses paid for the year ended 31 December 2021 nor for the year ended 31 December 2020.

11. STAFF COSTS

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

	2021	2020
Core charitable activity	<u>14</u>	<u>10</u>

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 £42,412 (2020: £40,656).

12. TANGIBLE FIXED ASSETS

	Office equipment £
COST	
At 1 January 2021 and 31 December 2021	<u>1,200</u>
DEPRECIATION	
At 1 January 2021	520
Charge for year	<u>400</u>
At 31 December 2021	<u>920</u>
NET BOOK VALUE	
At 31 December 2021	<u>280</u>
At 31 December 2020	<u>680</u>

13. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2021	2020
	£	£
Trade debtors	79,492	9,313
Other debtors	96	-
Prepayments and accrued income	<u>9,496</u>	<u>7,212</u>
	<u>89,084</u>	<u>16,525</u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2021

14. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2021	2020
	£	£
Trade creditors	2,637	11,124
Social security and other taxes	6,069	4,979
Other creditors	339	181
Accruals and deferred income	<u>31,887</u>	<u>15,944</u>
	<u>40,932</u>	<u>32,228</u>

15. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Unrestricted funds	Restricted funds	2021 Total funds	2020 Total funds
	£	£	£	£
Fixed assets	280	-	280	680
Current assets	225,676	5,438	231,114	213,177
Current liabilities	<u>(40,932)</u>	<u>-</u>	<u>(40,932)</u>	<u>(32,228)</u>
	<u>185,024</u>	<u>5,438</u>	<u>190,462</u>	<u>181,629</u>

16. MOVEMENT IN FUNDS

	At 1.1.21	Net movement in funds	Transfers between funds	At 31.12.21
	£	£	£	£
Unrestricted funds				
General Fund	86,300	118,242	(78,048)	126,494
Designated Fund	<u>58,362</u>	<u>(77,880)</u>	<u>78,048</u>	<u>58,530</u>
	144,662	40,362	-	185,024
Restricted funds				
Comic Relief Covid Response	4,502	(4,502)	-	-
Comic Relief Peer Support	16,291	(16,291)	-	-
tnlcf - Leaders With Lived Experience	9,955	(9,955)	-	-
Other Peer Support	<u>6,219</u>	<u>(781)</u>	<u>-</u>	<u>5,438</u>
	<u>36,967</u>	<u>(31,529)</u>	<u>-</u>	<u>5,438</u>
TOTAL FUNDS	<u>181,629</u>	<u>8,833</u>	<u>-</u>	<u>190,462</u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2021

16. 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	404,146	(285,904)	118,242
Designated Fund	-	(77,880)	(77,880)
	404,146	(363,784)	40,362
Restricted funds			
Comic Relief Covid Response	-	(4,502)	(4,502)
Comic Relief Peer Support	32,452	(48,743)	(16,291)
tnlcf - Leaders With Lived Experience	-	(9,955)	(9,955)
Other Peer Support	500	(1,281)	(781)
Wales Peer Support	2,000	(2,000)	-
	34,952	(66,481)	(31,529)
TOTAL FUNDS	<u>439,098</u>	<u>(430,265)</u>	<u>8,833</u>

Comparatives for movement in funds

	At 1.1.20 £	Net movement in funds £	Transfers between funds £	At 31.12.20 £
Unrestricted funds				
General Fund	35,336	75,964	(25,000)	86,300
Designated Fund	60,000	(26,638)	25,000	58,362
	95,336	49,326	-	144,662
Restricted funds				
Comic Relief Covid Response	-	4,502	-	4,502
Comic Relief Peer Support	-	16,291	-	16,291
Mind - South Wales Project	8,401	(8,401)	-	-
tnlcf - Leaders With Lived Experience	13,165	(3,210)	-	9,955
Other Peer Support	7,560	(1,341)	-	6,219
	29,126	7,841	-	36,967
TOTAL FUNDS	<u>124,462</u>	<u>57,167</u>	<u>-</u>	<u>181,629</u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2021

16. 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	305,055	(229,091)	75,964
Designated Fund	-	(26,638)	(26,638)
	305,055	(255,729)	49,326
Restricted funds			
Comic Relief Covid Response	21,302	(16,800)	4,502
Comic Relief Peer Support	32,452	(16,161)	16,291
Mind - South Wales Project	2,496	(10,897)	(8,401)
tnlcf - Leaders With Lived Experience	19,757	(22,967)	(3,210)
Other Peer Support	-	(1,341)	(1,341)
	76,007	(68,166)	7,841
TOTAL FUNDS	<u>381,062</u>	<u>(323,895)</u>	<u>57,167</u>

Unrestricted funds

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

Designated funds

The designated fund is made up of £24,078 re the Organisational Transformation Fund (2020: £58,362), £25,821 re Black Country Peer Support (2020: £nil) and £8,631 re Morpeth Peer Support (2020: £nil).

Organisational Transformation Fund

In 2019, Trustees designated £60,000 for organisational transformation work in 2020. Whilst significant progress was made, the impact of the pandemic meant some planned organisational transformation work was set aside. In planning for 2021, Trustees considered the constraints under which the Charity was operating in 2020 as the organisation expanded and the pandemic impacted upon capacity and priorities. Organisational transformation priorities were included in the 2021 plan and budget including: data management and financial forecasting systems; conducting a data security review; a ten-year impact project; website structure and content review; recruiting a fundraiser; and further developing APP's project management structure. The Trustees designated a further £25,000 to complete the work initially planned in 2020 and the new priorities added for 2021.

In 2021, the coronavirus pandemic continued to have a significant impact on APP: plans for the year were adapted; staff and resources were directed to peer support, signposting and disseminating information about PP and the support available. This reprioritisation meant that some organisational transformation work was delayed, in particular the website, CRM and impact report projects were running behind their original schedules at year end. APP's 2022 budget includes plans to spend the remaining designated organisational transformation funds to complete these projects.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2021

16. MOVEMENT IN FUNDS - continued

Morpeth and Black Country Peer Support Fund

In December 2021, Trustees decided to designate the funds required for APP to meet its existing commitments to peer support projects in the Black Country and Morpeth. The funding for these projects to October 2022 and April 2022 had already been paid to APP, so Trustees felt it was important to set aside the funds to complete the agreed work.

Restricted funds

Comic Relief - Covid Response

APP received a grant from Comic Relief co-funded from the Comic Relief 'The Big Night In' Match Fund - COVID Response through a partnership between Comic Relief and the Department for Digital, Culture, Media and Sport (the DCMS). The grant helped APP adapt our services to meet the needs of women and families suffering from postpartum psychosis during the pandemic: increasing our use of social media; developing our support for partners of women with PP; and, working to understand and better meet the needs of diverse communities. The project ended in February 2021.

Comic Relief Peer Support and Other Peer Support

Our Comic Relief funded peer support project had ended during 2019. The Comic Relief grant for the APP Peer Support Community Project enabled our Peer Support Coordinators to support and manage APP's existing Peer Support Volunteers and train new volunteers to provide peer support to women and families affected by Postpartum Psychosis across the UK. In 2020, Comic Relief made an additional grant to APP to extend this project in 2020 and 2021. The grant was for the continued operation of APP's peer support services and the development of APP's digital information and support to adequately meet the need of pregnant women at risk of PP, families in crisis developing PP, and families recovering from PP during the Covid-19 crisis. The additional Comic Relief grant ended in November 2021. The Other Peer Support fund consists of donations restricted to peer support activities.

tlncf - Leaders with Lived Experience

APP was awarded a project grant from the Leaders with Lived Experience Programme of the National Lottery Community Fund (tlncf). The project started in July 2019 and enabled APP to provide additional training and support to our three national programme leaders. Project activities would enable our staff to develop as vocal lived experience leaders and enable APP to pilot gold standard ways of supporting and sustaining lived experience leadership, informing APP's future work, and championing lived experience at all levels within our charity. The project was due to end in 2020, however some activities were delayed due to the coronavirus pandemic and the Fund agreed to extend the project into 2021. The National Lottery Community Fund also provided some additional COVID-19 funding under this grant in 2020 which enabled APP to employ and develop a fourth lived experience leader, to co-ordinate APP's marketing and digital communications work.

Wales Peer Support

APP received a grant from the Gwendoline & Margaret Davies Charity in February 2021 to develop our peer support community and café groups in Wales. The grant enabled us to run our café groups in North Wales and South Wales, which met a total of 11 times throughout the year, both virtually and in person. mixture of virtual (video call) and in-person meet-ups. We now have 10 Welsh volunteers who support our PP awareness-raising work through lived experience talks and sharing their experiences in the media. The project ended in 2021.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2021

17. RELATED PARTY DISCLOSURES

Action on Postpartum Psychosis is hosted by the University of Birmingham. During 2021 Action of Postpartum Psychosis paid a hosting fee to the University of £39,167 (2020: £38,944). The charity receives benefits from this relationship including meeting and office space.

Accounts

REGISTERED COMPANY NUMBER: 07466643 (England and Wales)
REGISTERED CHARITY NUMBER: 1139925 (England and Wales)

ACTION ON POSTPARTUM PSYCHOSIS
(A COMPANY LIMITED BY GUARANTEE)

TRUSTEES' REPORT AND
UNAUDITED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2020

ACTION ON POSTPARTUM PSYCHOSIS

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ACTION ON POSTPARTUM PSYCHOSIS

REFERENCE AND ADMINISTRATIVE DETAILS FOR THE YEAR ENDED 31 DECEMBER 2020

TRUSTEES	A Bauer (appointed 9.3.21) G S Berrisford C Dolman S A Hind I R Jones A R Jones A J Lambert A Sampson
REGISTERED OFFICE	International House 12 Constance Street London E16 2DQ
PRINCIPAL ADDRESS	PO Box 137 Swansea SA3 9BT
REGISTERED COMPANY NUMBER	07466643 (England and Wales)
REGISTERED CHARITY NUMBER	1139925 (England and Wales)
INDEPENDENT EXAMINER	TCA (Shrewsbury) LLP 4 Claremont Bank Shrewsbury Shropshire SY1 1RW
SOLICITORS (PRO BONO)	Howard Kennedy LLP No 1 London Bridge London SE1 9BG
BANKERS	HSBC Bank PLC 18 High Street Burton on Trent Staffordshire DE14 1HU The Cooperative Bank PLC 1 Balloon Street Manchester M60 4EP

ACTION ON POSTPARTUM PSYCHOSIS
TRUSTEES' REPORT
FOR THE YEAR ENDED 31 DECEMBER 2020

Objectives and Activities

Postpartum Psychosis

Each year, one to two in every thousand new mums will develop hallucinations, delusions, mania, depression and odd and erratic 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 a leading cause of death among new mothers, with postpartum psychosis responsible for a large percentage of these. Each year, babies lose mothers and families are bereaved, when the fact is, postpartum psychosis is a treatable illness and full recovery is possible. A shortage of Mother and Baby Units means that new mothers can be separated from their new-borns 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 and 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.

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 DECEMBER 2020

- **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.

Objectives and Activities in 2020

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 2020 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 email, face-to-face, telephone and video call support 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 is safe; the Coordinators are supported in turn by specialist health professionals and academic experts. The Coordinators recruit, train and support Peer Support Volunteers with experience of postpartum psychosis to provide empathy, practical information and hope for recovery. In 2020, we aimed to:

- develop our training for peer support volunteers, running four one-day training workshops, training more volunteers from Black and Asian backgrounds, running a separate online training session for partner peer supporters, developing ongoing online training for existing volunteers, adapting our Peer Support Volunteer training for NHS PP lived experience staff, and considering the training needs for a bereavement support group.
- maintain and grow our national and regional peer support service, training six more volunteers in video call support and extending the pilot to support 12 women and family members.
- maintain and develop our peer support work including: continuing NHS partnership work in Lancashire and Birmingham, gaining one further NHS partnership contract for an embedded peer support worker; operate existing café and Facebook groups and seeking funding to expand the number of café groups and moderated Facebook peer groups (e.g., supporting partners); considering research outcomes to develop our peer support to better meet the needs of Black and Asian women and families.

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TRUSTEES' REPORT
FOR THE YEAR ENDED 31 DECEMBER 2020

- run a campaign explaining the importance of specialist PP peer support for women and families affected by PP, utilising media and social media, writing and publishing content, and seeking partnerships with other organisations to call for at least one specialist PP peer support worker in each NHS STP footprint (Sustainability and Transformation Partnership) in England and the equivalent in Wales, Scotland and Northern Ireland.
- set up a bereavement working group and set up support in the manner determined by the group.

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 2020, we aimed to deliver six sessions of our well received workforce training course and at least 36 lived experience talks across the UK, reaching more than 3,000 health professionals. Our workforce training courses are delivered by our world leading experts in Perinatal Psychiatry, APP staff members, and an APP Expert 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, the impact on their relationship with their baby, family and friends. We would continue to train, support and build our team of lived experience speakers and Regional Representatives who raise awareness and network with teams in their local areas. We planned to continue our partnership with the Institute of Health Visiting and seek further involvement in health professional training, including GPs. We planned to develop our specialist training including: reviewing and updating resources, collaborating with the Royal College of Psychiatrists on e-learning, and considering how our training could be adapted for midwives, following our survey of midwives in 2019.

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 2020, 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. We planned to particularly target areas where we have projects, campaigns or need more volunteers, for example Wales, Northern Ireland and Scotland. In

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 DECEMBER 2020

addition, we planned to: develop a programme of ministerial engagement, following the December 2019 election; develop APP's marketing strategy; plan media and social media campaigns to raise APP's profile; support the launch of Laura Dockrill's book about her experience of postpartum psychosis; support continued outreach around Irene's Ghost; and support publicity for an upcoming film⁴ piece on PP.

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

In 2020, we aimed to use our specialist expertise and lived experience voice to create change in systems that are important to women and families affected by postpartum psychosis. We planned to continue campaigning for all women affected by postpartum psychosis in the UK to have access to a Mother and Baby Unit (MBU), a specialist perinatal mental health team, well-trained health professionals, information and access to peer support. We would build our volunteer numbers in regions and nations of the UK that do not have an MBU (Wales, Northern Ireland and the North of Scotland) and support them to network and identify opportunities for influencers to hear lived experience voices. We planned to run social media and media campaigns highlighting the need for an MBU in these parts of the UK. We aimed to continue campaigning for mandatory PP training for frontline health professionals, including responding to consultations on professional standards and working closely with partner organisations. We would continue to support and build our team of lived experience speakers and Regional Representatives who raise awareness and network with teams in their local areas. In particular we aimed to recruit Regional Reps in new areas of the UK to ensure a lived experience link with each MBU, in each Perinatal Mental Health Network, and ensure APP lived experience input on key committees.

Research

In 2020, we aimed to continue to facilitate research studies of importance to women and families affected by postpartum psychosis, such as the causes of PP; parenting and long-term outcomes for children; management and prevention in high-risk women; reducing trauma; improving care; improving recovery outcomes for women and families; information and support needs in BAME populations; and information and support needs in countries outside UK. We planned to: continue working closely with Cardiff University to facilitate projects that will improve the lives of women and families affected by postpartum psychosis, ensuring research is written up and accessible to patients; work with our NIHR collaboration and others to increase knowledge on PP in women from BAME populations; update our research on Mother and Baby Units and publish a leaflet and web content for women and families; develop a funding proposal to study the benefits of embedded peer support; continue supporting a PhD study of information needs during pregnancy for women at risk of PP and support the development of a pregnancy workbook that women can use with their health professionals; develop a funding application for global work into PP, developing collaborations to begin studies examining information and support needs in women who suffer from PP around the world. We would continue to advertise opportunities to take part in research into postpartum psychosis and work with researchers to facilitate lived experience input.

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FOR THE YEAR ENDED 31 DECEMBER 2020

Fundraising and strengthening our capacity

In 2020, we aimed to strengthen our capacity to fulfil our charitable objectives through: seeking funding opportunities to set up further regional groups, employ paid regional and thematic Coordinators; ensuring funding proposals include adequate management resources to give good support to peer support staff and volunteers; increasing staff capacity, particularly in the areas of programme management, marketing and social media; completing the review of policies with our pro bono legal support; recruiting a fundraiser; and reviewing our systems for managing impact reporting, volunteer management and fundraising data. We would ensure our staff have access to a high standard of professional training and development – including the opportunities provided through our Lived Experience Leaders project - so that they continue to grow their strengths and help to secure the future of APP.

Achievements and performance

COVID-19

As detailed in risk management below, the Trustees reviewed the impact of the Coronavirus pandemic and made the following adaptations to APP's plans for 2020:

1. Agreeing new flexible working patterns, and a plan to prioritise and reassign work, directing all available staff and financial resources to peer support, signposting and disseminating information about PP and the support available. Trustees anticipated increased demand and the need to support four distinct groups of women and family members:
 - *APP staff and volunteers:* Almost all staff and volunteers are parents of young children who needed to home-school for periods of the year, and many of whom have a history of, or manage, ongoing severe mental illness diagnoses. Staff and volunteers would need support to manage competing priorities as well as additional anxieties and stressors. Many volunteers offered more support to APP during this time, as they could imagine how difficult it would have been to develop PP during the pandemic.
 - *Pregnant women at risk of PP:* women who are pregnant and have had previous PP, psychosis or bipolar, who are experiencing fears about birth, support and the care that will be available. Access to routine birth planning appointments and medication advice is essential to manage anxieties and risks.
 - *Women who developed postpartum psychosis and their families:* Those who develop PP and are in crisis during the pandemic would be in a very difficult position: many health professional home visits might not happen, and all normal routes to care (the GP, mental health crisis team, ambulance, A&E) would be disrupted. Partners would need to be able to identify the symptoms of PP for themselves and know how to access care. Partners would need a great deal of support to manage with reduced health service input.
 - *Women and families trying to recover:* After discharge women and families would struggle to recover without the usual NHS home visits, friend and family support.
2. Rapidly expanding our pilot video call peer support, including moving all regional café groups online. Launching an online support group for partners of women with PP. Holding regular online meetings for groups of volunteers (peer support volunteers, Regional Reps), staff and contractors ensuring that not only are they supported through

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the pandemic, but also that they are aware of how they can help spread and amplify APP's messages, and contribute to peer support, signposting and information dissemination.

3. Increasing planned investment in management, social media and marketing capacity. In particular: running social media campaigns to make people aware of the signs and symptoms of PP; networking with influencers to ensure the needs of women and families with PP are being considered; developing new kinds of social media content, working with women with lived experience and clinical experts to develop more video content.
4. Joining with other organisations and campaigns to provide evidence on the impact of the pandemic on women and families experiencing or at risk of PP and share agreed campaigning.
5. Reviewing the budget and medium-term financial projections, prioritising grant fundraising activities - including opportunities to secure funding for COVID-19 related support - and promoting new avenues for voluntary fundraising. Working with funders to review and adjust targets.
6. Regularly reviewing the impact of the pandemic on APP and on the women and families we support, prioritising staff and volunteer wellbeing, adjusting plans and activities as required and continuing with lower priority activities in the original business plan as staff capacity allows.

Peer Support to affected women and families

In 2020, APP continued its national peer support service, making adaptations to plans and prioritising activities because of the pandemic. We were successful in securing: Comic Relief follow-on funding and voluntary fundraising to continue our national service; and coronavirus response funding from Comic Relief and the Fore, which enabled us to expand our work with partners and women from Black and Asian communities. In 2020, we had four National Coordinators with lived experience of postpartum psychosis: leading our Peer Support Service; Health Professional Training, NHS Partnerships & Regional Projects, and Marketing & Digital Communications. Our National Coordinators worked together with a Peer Support Facilitator, a contracted Assistant Coordinator and our peer support volunteers to provide peer support. We recruited a new Partners Peer Support Facilitator who, together with four partner volunteers, has begun to offer one-to-one email, telephone, forum, and video call support to other partners. A new Black and Minority Ethnic Communities Peer Support Facilitator has begun working with volunteers from diverse backgrounds to understand the needs of different communities, deliver peer support, network with other organisations, and develop media and social media content. Planned work to develop our understanding of the support needs of families and friends who lose someone to PP, and then develop web information and development to help them was put on hold due to the pandemic.

Despite the pandemic, we were able to increase the numbers of women and family members we support, as well as offering support in a greater variety of ways. We had the flexibility to adapt our services to respond to the needs of our population, with increased social media content, regular volunteer calls, online café groups, book clubs, art and craft activities, and health and wellbeing activities. Overall, APP supported more than 600 people, including women, grandparents, wider families and friends in 2020. An average of 270 people (2019: 293) used our peer support forum every month with the number of registered users

ACTION ON POSTPARTUM PSYCHOSIS

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FOR THE YEAR ENDED 31 DECEMBER 2020

increasing from 2,460 to 2,806. Coordinators and volunteers provided ongoing telephone support to 30 people, video call support to 27 women, one-to-one messaging support to 52 people (2019: 40), support via email to 128 people, plus one-to-one support for nine partners. Café groups continued online, with regular virtual meetups in Sussex, London, Lancashire, South Wales, North Wales, Birmingham and Yorkshire. More than 70 women and partners attended these support meetings during the course of the year. We set up a partners Facebook group and developed social media content for partners. The following feedback from a woman who has received one-to-one peer support and attended café groups demonstrates the impact of our peer support:

"Getting in touch with APP is one of the most positive things I have done for my recovery. Since being discharged from the MBU I've felt very isolated and at times like a total freak, as I don't know anyone else who had PP and struggled so much after having a baby. My peer supporter has been a great source of support, providing a listening ear and reassurance from someone who has been where I am, reminding me that I will get through and won't feel this way forever. I don't feel so alone with it anymore, and it's a big help knowing that support is always there, either by message or video call."

Our beneficiaries have been especially impacted by the pandemic and APP support has been particularly valued during this time. Our annual survey of peer support service users found that three-quarters of respondents thought that Covid had had a negative impact on their mental wellbeing. These quotes show the kinds of issues experienced:

- *"I had PP during the lockdown and it is extremely isolating to go through this in Covid times."*
- *"Everything I put in place to keep me ok stopped overnight, psychiatric care became a phone call every now and then, I was home alone with two young kids who hate sleep 24/7 with no in person support and I deteriorated rapidly and attempted suicide."*
- *"It has made me feel very isolated once again. Lockdown One happened just after I returned home from a stay in a MBU so the whole of 2020 has been a challenge for me, but the highlight has been meeting others who have experienced PP."*
- *"The lockdowns and social restrictions did cause a deterioration in my wife's mental health and lead to a PP relapse."*
- *"My 19-year-old daughter is in a psychiatric unit three hours' drive away and visits have been either not allowed or extremely limited. I am not allowed to hug or touch her. My mum has Covid and is in a care home very far away. Seeing people is so difficult in this pandemic and I worry about losing my loved ones as they are so vulnerable. I have difficulty sleeping, I am stressed all the time and life feels very difficult."*

APPs virtual support and video call peer support were described as particularly important during the pandemic in managing mental wellbeing:

- *"I am able to access support during lock down which is great. I feel comfortable in my own home and I'm in my comfort zone."*
- *"During Covid-19 lock down this has been amazing, to still be able to stay in touch."*
- *"Someone there to listen to my stresses and strains. It has, put basically, been an outlet for my concerns and helped me come to terms with my mental health."*
- *"Something nice to look forward to, some connection in these times while we have less chances for connection."*

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In March 2020, we put the recruitment and training of new volunteers on hold, both because of the capacity and work prioritisation issues described above, but also because we felt it was important for peer support training for new volunteers to take place face-to-face. We focused on engaging well with our current volunteers, supporting their mental wellbeing, and using their available capacity to meet the increased UK need for peer support and signposting. We also began training more of our current volunteers in video call support, aiming to increase from 11 to 21. We anticipated high demand for video call support during the lockdown. As schools returned in September, staff had capacity again to train new volunteers. We adapted our peer support training to deliver online and trained 12 peer support volunteers over two online training sessions in November and December. In order to increase the amount of support we can provide to partners, we ran an online training for five new partner peer supporters (our new Partners Peer Support Facilitator and four volunteers). All 12 new women volunteers and five partners also received training in video call support. These new volunteers bring our total number of currently active peer support volunteers to 64 and our 'all time' trained peer support volunteers to 86.

In 2020, we received good feedback from volunteers about the online training we provided – 100 per cent rated the training as excellent. Many also found it supported their own wellbeing and recovery: 100 per cent felt more supported, 83 per cent had more understanding about PP and 83 per cent felt more able to talk about their feelings with friends and family. We received positive feedback in training evaluation forms: *"I now feel fully equipped to set the right tone when providing peer support to other women. I feel armed with confidence"* and *"I feel more confident that I do have the skills and qualities needed to be a good peer supporter and believe the training gave me this confidence"*.

At the start of 2020, we had two Peer Support Facilitators embedded in NHS perinatal mental health services: in the new Mother and Baby Unit in Chorley / Lancashire and South Cumbria community; and in the East Birmingham Community Perinatal Mental Health Team. In 2020 our existing Facilitator began working in South Birmingham and we were able to expand this arrangement and recruit a further Peer Support Facilitator to provide support in the West Birmingham and Sandwell community, and the Birmingham Mother and Baby Unit. In addition, we have sessional peer support workers in both the Birmingham and Lancashire & South Cumbria regions able to provide holiday cover and additional support to women and families. Our NHS embedded peer supporters helped 120 women (2019: 100) and 13 of their family members (2019: 20) in 2020, in the Chorley and Birmingham MBUs and in the community in Birmingham, Solihull, Lancashire and Cumbria. There were fewer MBU admissions during the pandemic and less opportunity to meet partners and family members due to visiting restrictions. We held 25 café groups across both regions to enable recovering women to meet. Our Mind-funded South Wales project came to an end in June 2020, but we used our general funds to continue to support the monthly online café group in South Wales and establish a new group in North Wales.

Case study

APP supports women throughout their lifetime, 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 who initially receive peer support, become volunteers themselves. This case study demonstrates the impact of APP's peer support on one family and their journey to recovery.

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"I had postpartum psychosis in 2016 after the birth of my first baby. Having PP came as a complete shock, completely out of the blue. I had no previous history of mental health problems. I was admitted to a Mother and Baby Unit following an A&E admission only three days after my son was born. The Mother and Baby Unit treated me for the acute symptoms of PP, and after three weeks I was discharged into the care of a community mental health team to continue my recovery at home. At that time, specialist perinatal mental health teams didn't exist. I felt a little lost under the care of a general mental health team as a new mum having gone through such trauma – I was extremely low – at times suicidal and completely desperate. I felt abnormal, unable to be a mother, alone, afraid, anxious and extremely depressed once the psychotic symptoms had abated. My recovery at home once I was discharged from hospital was just the beginning of trying to rebuild my life.

I first heard about Action on Postpartum Psychosis from my Mum who had been receiving peer support from them herself whilst I was unwell in hospital. When I was discharged home, I felt so desperately depressed and alone, my Mum suggested that APP peer support might just help. I posted my first message on the forum from underneath my duvet in the middle of the day. My Mum had taken my little boy out for a walk in his pram, she was helping me, keeping us safe, but I felt so desperate and sad that she could do all the things with him that I so longed for. I asked the forum community if I would ever get better. Thankfully, some amazing women started to write back, many of them, all women with messages of such hope, strength and solidarity. I started, gradually with their help, to realise that I could beat this illness. That I could get better, that it would take time, but it was possible. These women understood – their words meant everything to me.

Alongside posting and reading on the forum, I spoke on the phone with Ellie, the National Peer Support Coordinator. I just cried and cried. She 'got me', everything she said gave me such reassurance – she totally understood. She helped me to attend a local café group to meet with other mums who had also experienced PP. I was able to go along and take my little boy. Meeting other mums who had been ill too, face to face, was so very important to my recovery. I describe my recovery as a bit like building blocks. With each interaction with the staff and volunteers of APP my recovery was built that bit stronger, solidified. My confidence in myself started to re-emerge.

In 2019 I attended the APP peer support training to become a peer supporter myself. It has been so special to be able to share my own recovery to help other women in theirs. I have also become a Regional Rep in the southeast and have been able to give presentations to health professionals about the work of APP and my own experience of recovery.

Most recently, in 2019/2020 APP helped me and my husband in planning our second pregnancy. I was able to read the guides which were written in part by women who have experienced PP, which helped enormously. I was able to read on the forum about other women's experiences and meet face to face with mums through my local café group. I met both those who had chosen not to have further children and those that had. I was able to ask those tricky questions about growing our family, that only someone who had "been there" would truly understand. APP has seen us through our second pregnancy and welcoming our second child into the world during the coronavirus pandemic.

Without the work of APP, I know that I would not have recovered as strongly as I have. I cannot imagine the charity not being in mine and my family's life. Following such a horror as postpartum psychosis, we feel extremely fortunate to have found the charity. In my own experience, they are a lifesaving charity."

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Raising awareness amongst health professionals

In March 2020, all training and talks to health professionals were postponed as NHS staff and services struggled with the pandemic. We redirected resources towards support and disseminating information. We resumed talks and training in the autumn, delivered online. During 2020, 1,823 health professionals heard an APP lived experience speaker, excluding one-day training courses. We participated in 23 face-to-face events between January and March, reaching 1,090 professionals and 31 live online talks between July and December, reaching a further 733 professionals. The health professionals attending our training included midwives, student midwives, health visitors, psychiatrists, GPs, obstetricians, community mental health teams, crisis liaison teams, psychologists, nursery nurses, social workers and occupational therapists. APP's National Training Coordinator supported our lived experience volunteer speakers to adapt to delivering their stories at online events including practice sessions, backup plans in case the technology failed and hints and tips about how to manage question and answer sessions online.

We continued our partnership with the Institute of Health Visiting and participated in 11 of their face-to-face training courses and 12 of their online courses. We worked closely with the iHV's training coordinator to shape the content, volunteer experience and feedback and evaluation process. We received excellent feedback from our speakers' sessions, including:

- *"I think I learned more from [APP speaker] than anything. She is phenomenal and it was so helpful to hear it from her perspective – so powerful."*
- *"It was inspirational to hear her speak – really showed the impact on her and her family."*
- *"I hope you know how brave you are and how lucky your family are to have you! Your sharing of your story will ensure I champion PIMH (Parent and Infant Mental Health) as best as I can."*
- *"Parent stories are always powerful as they make it real. It is possible to feel the impact of poor mental health."*

In 2020, we developed our relationship with the Royal College of Psychiatry (RCPsych) and co-delivered online consultant psychiatry Master Class training days (September – October 2020). These were lived experience talks and related to: the impact of postpartum psychosis on partners; and co-production with lived experience women and families, clinicians, and academics. We co-delivered workforce training to 115 trainee GPs in February 2020 and will seek further opportunities to work with NHS Trusts to input into GP study days across the UK.

In 2020, we delivered three sessions of APP's one-day training course – Managing Postpartum Psychosis and Severe Mental Illness in the Perinatal Period – in Wales, training 46 health professionals. The first two sessions were delivered face-to-face and the third was delivered online. In our evaluation, 100 per cent of participants rated the training excellent. All participants said that the training would change their practice, with 85 per cent saying it would change their practice *"a lot"*. All respondents said the training had increased their confidence to work with women and families and that they felt better equipped to help families recover from postpartum psychosis. Feedback included:

- *"The individual storytelling had a massive impact and was so honest. All speakers were fantastic, it felt very enthusiastic, amazing training, thank you. I will share the experience with work colleagues"*
- *"Powerful, thought provoking and gave an insight I've never had before..."*

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- *“Excellent training day, really informative, good content, speakers spoke well, the personal experience was so brave, thank you”.*

In addition to talks and training delivered by APP staff and volunteers, we worked with other organisations on their training courses and content. We have co-developed an online eLearning module for the RCPsych: A one-hour continual professional development (CPD) module in ‘Postpartum psychosis and bipolar disorder’ with the National Centre for Mental Health (NCMH) (submitted, not yet live). We also worked closely with the Wales perinatal network to develop content related to postpartum psychosis for an eLearning module for GPs across Wales. The module in Perinatal Mental Health will be rolled out by Health Education and Improvement Wales in 2021.

We contributed to RCPsych’s scoping exercise for ‘creating a credential in perinatal mental health’ for multidisciplinary health professionals, outlining why and how lived experience should be included.

Raising awareness amongst the general public

The impact of the coronavirus pandemic meant that some planned work – such as ministerial engagement and Laura Dockrill’s book launch event – did not go ahead. However, we secured additional coronavirus response grant funds from Comic Relief, The Fore and the National Lottery Community Fund which enabled us to employ a fourth National Coordinator with lived experience of postpartum psychosis to lead on APP’s marketing and digital communications work. This enabled us to plan new ways of reaching and supporting women and families affected by PP during the coronavirus pandemic, including reaching groups likely to be disproportionately impacted, including women pregnant or recovering from PP, women’s partners, those managing ongoing mental health diagnoses, and women from Black and Asian communities. We secured pro bono support from high-profile PR agency ‘Mother London’ to develop a new graphic on the signs and symptoms of PP.

In 2020, we recruited two new media volunteers, bringing our total number to 32. We trained two staff members and one new volunteer from Black and Asian communities as media volunteers. We supported more than one hundred PP media and social media stories in 2020.¹ Highlights included working on Bijan Sheibani’s Film 4 short Morning Song, the launch of two stigma-busting lived experience books: Laura Dockrill’s ‘What Have I Done?’ and Catherine Cho’s ‘Inferno: A Memoir’, and a collaboration with a TV Soap, Hollyoaks, on the soap’s biggest Christmas storyline – where character Liberty Savage (played by actress Jessamy Stoddart) became ill with postpartum psychosis following the birth of her child. Bijan, Laura, Catherine, Jessamy and the Hollyoaks team worked hard to support us in raising awareness of PP and of APP.

¹ www.app-network.org/news-events/in-the-press/

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With resources from Covid emergency funds, we greatly extended our social media content and reach, more than doubling followers across all platforms whilst website hits increased each quarter in 2020. We had more than 4,500 views of our Insider Guides web page and our Facebook reach increased by nearly 60 per cent. We shared information about PP signs and symptoms and how to get help during the pandemic. We made short films with leading clinicians and women with lived experience:

- *What is postpartum psychosis? Early signs and symptoms of PP*: in conversation with Sally, Jamie, and Professor Ian Jones²;
- *Supporting you and yours – getting care for PP*: In conversation with volunteers Tom and Kat, Ellie and Dr Giles Berrisford³; and
- *PP #Honestconversations* with volunteer, Laura Dockrill, Jessie and Dr Jo Black⁴.

We launched a signs and symptoms graphic⁵, developed with 'Mother London', as part of our #MumWatch campaign aimed at partners. The graphic has been seen by hundreds of thousands of people and re-tweeted by key national influencers. The campaign reached more than 278,500 people and engaged over 14,500, with a campaign spend of just £75. The campaign had wider success - health professionals and organisations have requested the graphic for their presentations and conferences and postcards and posters to display in GP surgeries and waiting rooms etc.

We also used social media to provide peer support in new ways, running live events and activities online for volunteers and beneficiaries - for example, a Christmas craft-along and a regular book club – and ensuring that there was always a trained peer supporter monitoring our social media to provide support and signposting to anyone needing help who commented or messaged us. We used social media to promote our online café groups, online volunteer meetups and community activities in order to manage the stress and isolation felt by many in our community during the pandemic. We started work on our Ambassadors Pack in order to recruit high profile supporters to extend the reach of our work in 2021.

Campaigning for improved services

In 2020, we recruited 16 new Regional Rep volunteers, including one from Wales and five from Scotland. We have one Regional Rep volunteer in Northern Ireland who has been campaigning for specialist services and working on a petition for a Mother and Baby Unit; work to recruit more Northern Irish volunteers was delayed until 2021. Overall, APP now has 100 Regional Reps in total, of whom around 70 are currently active in volunteering. Regional Reps disseminate APP information, support co-production and support talks and training. Opportunities in 2020 for Lived Experience speaking since the Covid-19 pandemic have been limited, but we have held regular volunteer Zoom calls to help volunteers remain connected, to support volunteers with their mental health, and share ways they can support APP's activities.

We continued to campaign for better services in Wales. After many years of APP campaigning, with volunteers telling their story, engaging with influencers, and working with the MBU planning group, in the final quarter of 2020, it was confirmed that an MBU for South

² <https://www.youtube.com/watch?v=SVnVV0lyARI>

³ <https://www.youtube.com/watch?v=UfUIPyVecmQ>

⁴ https://www.youtube.com/watch?v=qG_c8ERIHjs&t=3s

⁵ <https://twitter.com/ActionOnPP/status/1389483116113313794>

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Wales would open in Spring 2021. Our staff and Wales volunteer team continue to collaborate with the All-Wales Perinatal Mental Health Board and steering committee for a North Wales MBU solution. We submitted a stakeholder response to the Welsh Health Specialised Services Committee consultation on the perinatal mental health mother and baby unit specification document in August 2020. Eight APP staff and volunteers with lived experience of PP have contributed to the development of the MBU in South Wales, attending four MBU engagement meetings. Volunteers attended four MBU artwork consultation meetings with the Wales perinatal mental health network and the service lead for Swansea Bay University Health Board NHS Trust. Our staff and volunteers shared their experiences and inputted into the design, layout, artwork, staffing and pathways of care for the MBU and the perinatal service. We received the following message of thanks from an NHS staff member which demonstrates the impact of lived experience on the MBU project:

"Please could you ensure my personal thanks are passed to the group for the hugely important and much appreciated role they have played so far in the project, it's been completely invaluable having such a wealth of experience, passion and energy contributing to the process. The generosity of the group in sharing their own personal experiences and time, to benefit other women experiencing perinatal mental illness, has been inspirational and moving - but perhaps most importantly has been used to directly inform many decisions taken in the project."

In 2020, we worked closely with the national clinical lead to upskill the workforce and showcased APPs work in Wales at the RCPsych virtual network resource. We contributed to NSPCC and Maternal Mental Health Alliance reports for the Welsh Senedd (Children, Young People and Education Committee) 'Babies in lockdown debate' in December 2020.

Although capacity was reduced, we began to build networks in Scotland and Northern Ireland, connecting with organisations and joining committees. We supported our Northern Ireland Regional Rep to develop and promote a petition. We continued to collect and share social media and media stories to highlight the need for MBUs in these regions. We used the Hollyoaks storyline to talk about MBUs on BBC Radio 4's Woman's Hour; the Metro, and Digital Spy, whilst The Independent published a comment piece on the need for MBUs by APP Director Dr Jess Heron⁶. In February 2020, our National Training Coordinator Sally Wilson appeared on BBC Wales Live with Helen Rogers (Director of The Royal College of Midwives, Wales) discussing the urgent need for MBUs across Wales. We held meetings and input into national consultations to ensure that the voices of women and families with lived experience were considered during the coronavirus pandemic.

Research

APP is hosted by Birmingham University and works closely with researchers at Cardiff University. We facilitate research, and help disseminate findings, ensuring evidence-based information is accessible to women, families and health professionals. Although much research work was impacted by the pandemic, in 2020 APP supported 12 research projects, including:

- Clinical & Molecular Genetic Studies of PP with the NCMH at Cardiff University and BDRN at Worcester University.

⁶ <https://www.independent.co.uk/voices/mother-baby-mental-health-nhs-b1766754.html>

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- A National Institute for Health Research (NIHR) study examining the Accessibility & Acceptability of Specialist Perinatal Mental Health Services to women and families from Black and Minority Ethnic groups (PAAM). APP employs a Lived Experience Peer researcher to conduct qualitative interviews and APP work with the study team to support planning, design and interpretation of results.
- Supervising a Cardiff University PhD student study to develop and test a new tool for women and health professionals to use to support decision making for women with bipolar disorder or those with previous postpartum psychosis, during pregnancy and the postpartum period.
- A qualitative study of the experience of postpartum psychosis and information and support needs in women from Black and Minority Ethnic communities working with a Trainee Clinical Psychologist.
- Facilitating recruitment for a study of PP in women from the Punjabi community
- Supporting with a case review of women with PP in Malawi
- Planning a tool to support with anxiety management during pregnancy for high-risk women with the University of Hull.
- A qualitative study of Women's Perceptions about the relationship with their infant after PP with Bournemouth University

In 2020, we continued to engage with students, academics and health professionals to facilitate interest in PP research. We formed collaborations in order to help fill gaps in research knowledge, for studies that will be conducted over coming years and supported recruitment for a number of other qualitative, student, health professional and trainee projects. Areas to be studied include: factors that contribute to periods of relapse during recovery from postpartum psychosis; the role and experience of Occupational Therapy in Perinatal Mental Health Services; impact of menopause on women who have experienced PP; a PP new drug discovery study, and outcomes for children following postpartum psychosis.

The APP team presented a Symposium at the International Marce Society for Perinatal Mental Health online Conference in October 2020: Working to improve outcomes for women and families affected by postpartum psychosis. We shared strategies, learning and evaluation in: developing a PP peer support community; training health professionals; working with regional volunteers to create local change; and learning from APP's UK work to create global change in PP stigma and care.

Fundraising and strengthening our capacity

We secured new grant funds from Comic Relief for maintaining and developing our national peer support service and new grant funds from Comic Relief, The Fore, and the National Lottery Community Fund to enable us to respond to the Coronavirus pandemic. We also expanded our contract with Birmingham and Solihull Mental Health Foundation NHS trust to provide an additional peer support worker to support women and families experiencing PP in the Mother and Baby Unit and in the community in West Birmingham and Sandwell.

Despite the pandemic, our voluntary fundraising continued to be successful, with Facebook fundraisers and an Active May fundraising campaign being significant new sources of funding. We are very grateful to all our individual fundraisers who have found many creative ways to fundraise and increase awareness, despite the limitations of social distancing

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requirements – for example Simon and Judith Hill's Pedalling for PP awareness 2,500-mile Land's End to John O'Groats (and back home again) cycle ride raised more than £6,000 and including media work to awareness of PP, the challenge they were undertaking, and the support APP provides.

In 2020, we had aimed to increase our organisational capacity in a number of areas, using funds designated by the trustees and the opportunities provided through our Lived Experience Leaders project. When we adapted our plans in light of the pandemic, some planned work was set aside. However, we were able to increase our core staffing capacity in the areas of programme management, digital marketing and social media. Having additional programme management capacity helped greatly in dealing with the challenges of growth as we doubled our staff numbers during the year, and especially as new flexible working patterns and the prioritisation of work during the period of school closures impacted on the team. Increasing our digital marketing and social media capacity had a significant impact on our social media reach – detailed above – whilst the learning from our new and expanded social media work in 2020 places APP in a much stronger position for future awareness raising and campaigning work. We were able to lay some of the groundwork for improvements to our data systems, but most of the planned work was postponed to 2021.

Financial Review

The Statement of Financial Activities on page 20 shows APP's income and expenditure for the year. During the year ended 31 December 2019, income exceeded expenditure by £57,167. These net incoming resources are the result of Comic Relief grant income being received for expenditure in 2021, delays in expenditure of our Leaders with Lived Experience Grant due to cancelled training during the pandemic and of income being designated by the Trustees for activities planned in 2021.

In our Unrestricted Funds, income exceeded expenditure by £49,326. Income from charitable activities increased significantly, reflecting new grants received for responding to the coronavirus pandemic and our ongoing peer support work, and increased contract income with the expansion of our contract to provide peer support in Birmingham and Solihull. Income from training decreased as training was put on hold for a large part of the year whilst healthcare professionals responded to the pandemic; however, towards the end of 2020 we were able to resume training online. Income from donations increased, with a decrease in corporate donations being offset by increased general fundraising.

The Balance Sheet on page 21 shows that at 31st December 2020, APP was holding £181,629; of which £36,967 was restricted funds. Of the remaining £144,662 unrestricted funds, £58,362 had been designated by the Trustees for organisational transformation work in 2021 to adapt data and core systems to respond to APP's growth. APP's reserves policy is to hold three months core operating costs in reserve to guard against fluctuations in income. At the end of the 2019 financial year, the Board deemed three months core operating costs to be £58,000. On 1st January 2020, APP was holding £34,235 in free reserves, which was below the level then recommended by our reserves policy (£58,000); however, the designated reserve was available for the Trustees to re-designate if required. In early 2020 free reserves returned to above the level required by the reserves policy therefore no Board action was required, and the planned organisational transformation work

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could go ahead. On 31st December 2020, APP was holding £85,620 in free reserves, which was within the range then recommended by our reserves policy (£80-90,000). It was expected and budgeted that the funds designated for organisational transformation would be spent during 2021; however, this is constantly under review due to the impact of the coronavirus pandemic. The Board continues to review the appropriate reserves level and take steps to bring the funds held in line with that.

COVID-19

The duration and impact of the COVID-19 pandemic remains unclear, which means it is not possible to reliably estimate the impact on APP's future financial position. However, as detailed under risk management and plans for 2021, the Trustees reviewed the impact of the latest lockdown and school closures and expect that APP can maintain its services – focussing on peer support, signposting and disseminating information – without needing to utilise free reserves; and, planned organisational transformation work, utilising the designated reserve, can go ahead as and when organisational capacity allows.

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 is still hosted by the University of Birmingham Medical School today. The University provides office space, expert time, infrastructure and resources to the charity. We are co-hosted by the Birmingham and Solihull Mental Health Foundation NHS Trust and the University of Cardiff National Centre for Mental Health, who provide 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. Her time for this is bought by the charity from the University of Birmingham. Operational plans and all major strategic decisions are discussed and agreed by the Board of Trustees.

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. A skills audit has been undertaken and efforts are made to recruit Trustees who meet the skills requirement. In 2016, the Board agreed to aim towards a leaner Board, with all the skills necessary to the functioning of the charity. During 2020, one Board member resigned. In early 2021, a new board member was appointed as Treasurer to fill an identified skills gap.

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.

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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.

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 is high, and capacity pressures impact on income generation. Since 2017, a new fundraising strategy has been implemented to improve sustainability and diversify our funding base. 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 (for example peer support contracts), 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.

COVID-19: During 2020 and in early 2021, the Trustees reviewed the principal risks in relation to the unfolding Coronavirus pandemic. As a home-based organisation, APP was in a strong position to adapt to the restrictions of government measures to control the pandemic, however all staff have school age children and we anticipated a significant increase in demand from women and families affected by PP, particularly during periods of national lockdown.

Key risks facing the organisation in 2020 were financial sustainability, management capacity, and operational risks related to the pandemic. Financial sustainability was addressed by: revising the 2020 Budget and medium-term financial projections and regularly reviewing forecast income and expenditure in light of the pandemic; submitting proposals for coronavirus response funding; devising an Active May fundraising campaign taking into account the constraints of social distancing and promoting it via social media; adapting our training for online delivery and continuing to explore new or extended NHS contracts. Management capacity risks were addressed through recruiting additional project management, social media and administrative support. We continued to actively network to seek Board members to fill the identified skills gaps and a Treasurer was recruited shortly after year end. Operational risks arising from the coronavirus pandemic were addressed through: agreeing new flexible working patterns, prioritising and reassigning work; increasing the frequency of meetings with staff, contractors and volunteers to provide pastoral care and support; developing Wellbeing Plans, moving face-to-face services (e.g. café groups) online; updating risk assessments for NHS contracts, working closely to provide face-to-face peer support where it was still requested by NHS partners and ensuring safety of APP staff and the women and families they are supporting; and increasing project management, social media and administrative capacity.

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Plans for Next Year

Action on Postpartum Psychosis plans for 2021 were grouped under the following objectives:

- 1. Supporting women and families.** We plan to maintain and grow our national and regional peer support service by:
 - increasing the number of regional café groups, social groups and wellbeing activities we offer
 - increasing our support to partners, grandparents, bereaved families and those from underrepresented groups.
 - seeking a contract to deliver peer support in Wales, project funding for developing our work in Scotland.
 - building our volunteer group and networks in Northern Ireland.
- 2. Raising awareness amongst health professionals.** We plan reach more health professionals with training by:
 - delivering more training online, in addition to our face-to-face workforce training and lived experience talks.
 - developing standalone in-depth/specialist and health professional e-modules and video content.
- 3. Raising awareness amongst the general public.** We plan to raise awareness in the general public to reduce stigma and misinformation by:
 - using media case studies and social media to raise awareness of our lifesaving information and support, using storytelling to help public understand PP and the importance of our work.
 - particularly targeting UK regions where we have projects, campaigns or need more volunteers.
 - conduct a ten-year anniversary campaign highlighting APP's impact and changes in women's and families' experiences over the past 10 years analysing questionnaire data.
- 4. Campaigning.** We plan to use our specialist expertise and lived experience voice to create change in systems that are important to women and families affected by postpartum psychosis, by:
 - continuing to campaign for all women affected by postpartum psychosis in the UK to have access to a Mother and Baby Unit (MBU), a specialist perinatal mental health team, well-trained health professionals, information and access to peer support.
 - continuing our campaign to highlight the need for an MBU in Wales, Northern Ireland and Northern Scotland: sharing women's powerful stories; analysing and sharing data on MBU compared to general unit admissions over past 10 years; and, producing a leaflet about MBUs - what they are and why they are important for women and families.

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT

FOR THE YEAR ENDED 31 DECEMBER 2020

- planning a fundraising/awareness raising campaign - “FromMe2MBU” - to raise awareness of the distances many women travel to access MBU care.
 - planning a campaign for PP to be an essential part of all antenatal class training, including surveying of women and midwives, placing powerful media stories and using our charity ambassador Laura Dockrill as spokesperson.
 - continuing our calls for mandatory training for frontline health professionals working with perinatal families to gain an understanding of PP (midwives, GPs, health visitors, peer support staff), by sharing stories, running social media surveys, sharing our data and quotes, and developing strategic responses to consultations.
5. **Research.** We will continue to facilitate research studies of importance to women and families affected by postpartum psychosis, by
- supporting and facilitating studies into the causes of PP; parenting and long-term outcomes for children; management and prevention in high-risk women; reducing trauma; improving care; improving recovery outcomes for women and families; information and support needs in BAME populations; and information and support needs in countries outside the UK.
 - building our income from research and building our links to try to fill research and knowledge gaps identified by women, academics and clinicians.
6. **International.** Our work to date places us firmly as the world leading organisation for PP support and information, however care for PP in other countries of the world is far behind. We plan to seek opportunities to influence care internationally, by:
- seeking funding to document the strategies we have used to achieve change in the UK over the last decade and what we have learnt, ensuring our strategies and learning are documented in a format that will be useful for translating or forming collaborations to influence care and reduce stigma in other countries.
 - building our international networks in 2021 and plan to seek funding for pilot project in 2022.
7. **Strengthening our capacity to fulfil our charitable objectives.** We plan to transform APP data and management systems in order to manage our rapid growth by:
- continuing to upskill staff by providing access to training and personal development opportunities.
 - continuing to develop APP as a model lived experience and working parent employer.
 - planning to: appoint a Treasurer to the board; recruit an experienced fundraiser, senior manager and lived experience coordinator; and to contract writers for our planned programme of report production and website content development.
 - planning to implement a CRM⁷ system to manage contacts and to continue reviewing reporting data and developing simpler cloud-based data recording systems.

COVID-19: Since the plan for 2021 was developed, and as detailed in risk management above, the Trustees have reviewed the impact of the Coronavirus pandemic and made the following adaptations to APP’s plans for 2021:

⁷ Customer Relationship Management system – a database to manage our contacts.

ACTION ON POSTPARTUM PSYCHOSIS

TRUSTEES' REPORT

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Agreeing new flexible working patterns, and agreeing adapted plans, directing all available staff and financial resources to **peer support**, **signposting** and **disseminating information** about PP and the support available. Similarly to the lockdown in 2020, Trustees anticipated the need to support four distinct groups of women and family members:

- **APP staff and volunteers:** (many of whom have a history of psychosis or bipolar) would need support to manage home-schooling, anxieties and stressors.
- **Pregnant women at risk of PP:** women who are pregnant and have had previous PP, psychosis or bipolar, who are experiencing fears about birth, support and the care that will be available. Access to routine birth planning appointments and medication advice is essential.
- **Women who develop postpartum psychosis and their families:** Those who develop PP and are in crisis during the pandemic would be in a very difficult position: many health professional home visits may not happen, and normal routes to care (the GP, mental health crisis team, ambulance, A&E) would be disrupted. Partners must be able to identify the symptoms of PP for themselves and know how to access care.
- **Women and families trying to recover** after discharge during social distancing would struggle without the usual NHS home visits, friend and family support.

Continuing to hold all regional café groups and the partners' group online and offer video call peer support widely. Holding **regular online meetings** for groups of **volunteers** (peer support volunteers, Regional Reps), **staff** and **contractors** ensuring that not only are they supported through the pandemic, but also that they are aware of how they can help spread and amplify APP's messages, and contribute to peer support, signposting and information dissemination. Continuing planned investment in **management**, **social media** and **marketing capacity**. Joining with other organisations and **campaigns** to provide evidence on the impact of the pandemic on women and families experiencing or at risk of PP and share agreed campaigning. Regularly **reviewing the impact** of the pandemic on APP and on the women and families we support, adjusting plans and activities as required and continuing with lower priority activities in the original business plan as staff capacity allows.

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., finance, HR and digital marketing). Directors/Trustees during 2020 were as follows:

Dr Giles Berrisford	Chair
Dr Clare Dolman	
Sarah Hayes	(resigned 26 th May 2020)
Sarah Hind	
Anna Jones	Vice Chair
Professor Ian Jones	
Andrea Lambert	
Abbie Sampson	

ACTION ON POSTPARTUM PSYCHOSIS
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FOR THE YEAR ENDED 31 DECEMBER 2020

Annette Bauer was appointed to the Board on 9 March 2021, after the year end, as Treasurer.

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 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.

ACTION ON POSTPARTUM PSYCHOSIS
TRUSTEES' REPORT
FOR THE YEAR ENDED 31 DECEMBER 2020

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;
- 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.

Approved by order of the board of trustees on and
signed on its behalf by:

.....

G S Berrisford - Trustee

INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF ACTION ON POSTPARTUM PSYCHOSIS

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 2020.

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 registered member of ICAEW 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
4 Claremont Bank
Shrewsbury
Shropshire
SY1 1RW

Date:

ACTION ON POSTPARTUM PSYCHOSIS

STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING AN INCOME AND EXPENDITURE ACCOUNT) FOR THE YEAR ENDED 31 DECEMBER 2020

	Notes	Unrestricted funds £	Restricted funds £	2020 Total funds £	2019 Total funds £
INCOME AND ENDOWMENTS FROM					
Donations and legacies	2	128,325	-	128,325	117,790
Charitable activities					
General	5	176,430	76,007	252,437	162,068
Other trading activities	3	198	-	198	-
Investment income	4	<u>102</u>	<u>-</u>	<u>102</u>	<u>249</u>
Total		305,055	76,007	381,062	280,107
EXPENDITURE ON					
Raising funds		2,865	-	2,865	3,874
Charitable activities					
General	6	252,864	68,166	321,030	264,733
Total		<u>255,729</u>	<u>68,166</u>	<u>323,895</u>	<u>268,607</u>
NET INCOME		49,326	7,841	57,167	11,500
RECONCILIATION OF FUNDS					
Total funds brought forward		95,336	29,126	124,462	112,962
TOTAL FUNDS CARRIED FORWARD		<u>144,662</u>	<u>36,967</u>	<u>181,629</u>	<u>124,462</u>

CONTINUING OPERATIONS

All income and expenditure has arisen from continuing activities.

The notes form part of these financial statements

ACTION ON POSTPARTUM PSYCHOSIS (REGISTERED NUMBER: 07466643)**STATEMENT OF FINANCIAL POSITION (BALANCE SHEET)
31 DECEMBER 2020**

	Notes	2020 £	2019 £
FIXED ASSETS			
Tangible assets	12	680	1,101
CURRENT ASSETS			
Debtors	13	16,525	48,660
Cash at bank		<u>196,652</u>	<u>137,022</u>
		213,177	185,682
CREDITORS			
Amounts falling due within one year	14	(32,228)	(62,321)
		<u>180,949</u>	<u>123,361</u>
NET CURRENT ASSETS			
		<u>180,949</u>	<u>123,361</u>
TOTAL ASSETS LESS CURRENT LIABILITIES			
		181,629	124,462
NET ASSETS		<u>181,629</u>	<u>124,462</u>
FUNDS	16		
Unrestricted funds:			
General Fund		86,300	35,336
Designated Fund		<u>58,362</u>	<u>60,000</u>
		144,662	95,336
Restricted funds		<u>36,967</u>	<u>29,126</u>
TOTAL FUNDS		<u>181,629</u>	<u>124,462</u>

The charitable company is entitled to exemption from audit under Section 477 of the Companies Act 2006 for the year ended 31 December 2020.

The members have not required the company to obtain an audit of its financial statements for the year ended 31 December 2020 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

**STATEMENT OF FINANCIAL POSITION - continued
31 DECEMBER 2020**

These financial statements have been prepared in accordance with the provisions applicable to charitable companies subject to the small companies regime.

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

.....
G S Berrisford - Trustee

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2020

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.

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 its estimated useful economic life of 3 years, on a straight line basis.

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.

Debtors

Prepayments are valued at the amount prepaid.

Cash and cash equivalents

Cash and cash equivalents include cash in hand and deposits held at call with banks.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2020

1. ACCOUNTING POLICIES - continued

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.

Pensions

Payments to defined contribution retirement benefit schemes are charged as an expense as they fall due.

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 £	2020 Total funds £	2019 Total funds £
Donations	<u>128,325</u>	<u>-</u>	<u>128,325</u>	<u>117,790</u>

In the prior year, £109,768 of the income related to unrestricted funds and £8,022 to restricted funds.

3. OTHER TRADING ACTIVITIES

	Unrestricted funds £	Restricted funds £	2020 Total funds £	2019 Total funds £
Sale of literature	<u>198</u>	<u>-</u>	<u>198</u>	<u>-</u>

4. INVESTMENT INCOME

	Unrestricted funds £	Restricted funds £	2020 Total funds £	2019 Total funds £
Bank interest	<u>102</u>	<u>-</u>	<u>102</u>	<u>249</u>

In the prior year, £249 of the income related to unrestricted funds and £nil to restricted funds.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2020

5. INCOME FROM CHARITABLE ACTIVITIES

	2020 £	2019 £
Comic Relief - APP Peer Support Community Project	32,452	23,990
Comic Relief - Establishing a Quality Mark Framework	-	2,100
Comic Relief - Everyone's Business Campaign Phase 1	-	(3,426)
Comic Relief - Everyone's Business Campaign Phase 2	-	(36,064)
Mind Grants	2,496	22,472
tnlcf - Leaders with Lived Experience	19,757	20,371
Comic relief - Covid response	21,302	-
Other Trusts and Foundations	3,000	-
Contract Income - Lancashire and South Cumbria NHS Foundation Trust	67,530	66,632
Contract Income - Birmingham and Solihull Mental Health NHS Foundation Trust	72,105	21,305
Contract Income - Other	-	600
Workforce Training and Experts by Experience	17,406	29,088
Research contracts	11,389	-
	<u>252,437</u>	<u>162,068</u>

In the prior year, £132,625 of the income related to unrestricted funds and £29,443 to restricted funds.

6. CHARITABLE ACTIVITIES COSTS

	Direct Costs (see note 7) £	Support costs (see note 8) £	Totals £
General	<u>312,868</u>	<u>8,162</u>	<u>321,030</u>

In the prior year, £200,792 of the expenditure related to unrestricted funds and £63,941 to restricted funds.

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2020

7. DIRECT COSTS OF CHARITABLE ACTIVITIES

	2020	2019
	£	£
Staff and freelance costs	209,623	146,031
Consultancy	63,636	60,941
Project costs	461	1,791
Travel	7,435	12,810
Information materials and awareness raising	5,970	3,860
Volunteer training & expenses	1,823	5,423
Office and running costs	22,545	18,840
Workforce training and experts by experience costs	974	4,063
Depreciation	401	119
	<u>312,868</u>	<u>253,878</u>

8. SUPPORT COSTS - Governance

	2020	2019
	£	£
Independent examiners fee	2,220	2,020
Accountancy fees	4,153	6,728
Other fees	1,503	1,933
Board expenses	286	174
	<u>8,162</u>	<u>10,855</u>

9. NET INCOME/(EXPENDITURE)

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

	2020	2019
	£	£
Depreciation - owned assets	401	119
Independent Examination Fee	<u>2,220</u>	<u>2,020</u>

10. TRUSTEES' REMUNERATION AND BENEFITS

There were no trustees' remuneration or other benefits for the year ended 31 December 2020 nor for the year ended 31 December 2019.

Trustees' expenses

There were no trustees' expenses paid for the year ended 31 December 2020 nor for the year ended 31 December 2019.

11. STAFF COSTS

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

	2020	2019
	<u>10</u>	<u>9</u>
Core charitable activity		

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 £40,656 (2019: £32,445).

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2020

12. TANGIBLE FIXED ASSETS

	Office equipment £
COST	
At 1 January 2020	1,220
Disposals	<u>(20)</u>
At 31 December 2020	<u>1,200</u>
DEPRECIATION	
At 1 January 2020	119
Charge for year	<u>401</u>
At 31 December 2020	<u>520</u>
NET BOOK VALUE	
At 31 December 2020	<u>680</u>
At 31 December 2019	<u>1,101</u>

13. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2020 £	2019 £
Trade debtors	9,313	45,766
Prepayments and accrued income	<u>7,212</u>	<u>2,894</u>
	<u>16,525</u>	<u>48,660</u>

14. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2020 £	2019 £
Trade creditors	11,124	5,240
Social security and other taxes	4,979	2,547
Other creditors	181	902
Accruals and deferred income	<u>15,944</u>	<u>53,632</u>
	<u>32,228</u>	<u>62,321</u>

15. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Unrestricted funds £	Restricted funds £	2020 Total funds £	2019 Total funds £
Fixed assets	680	-	680	1,101
Current assets	176,210	36,967	213,177	185,682
Current liabilities	<u>(32,228)</u>	<u>-</u>	<u>(32,228)</u>	<u>(62,321)</u>
	<u>144,662</u>	<u>36,967</u>	<u>181,629</u>	<u>124,462</u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2020

16. MOVEMENT IN FUNDS

	At 1.1.20 £	Net movement in funds £	Transfers between funds £	At 31.12.20 £
Unrestricted funds				
General Fund	35,336	75,964	(25,000)	86,300
Designated Fund	<u>60,000</u>	<u>(26,638)</u>	<u>25,000</u>	<u>58,362</u>
	95,336	49,326	-	144,662
Restricted funds				
Comic Relief Covid Response	-	4,502	-	4,502
Comic Relief Peer Support	-	16,291	-	16,291
Mind - South Wales Project	8,401	(8,401)	-	-
tnlcf - Leaders With Lived Experience	13,165	(3,210)	-	9,955
Other Peer Support	<u>7,560</u>	<u>(1,341)</u>	<u>-</u>	<u>6,219</u>
	<u>29,126</u>	<u>7,841</u>	<u>-</u>	<u>36,967</u>
TOTAL FUNDS	<u>124,462</u>	<u>57,167</u>	<u>-</u>	<u>181,629</u>

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

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General Fund	305,055	(229,091)	75,964
Designated Fund	<u>-</u>	<u>(26,638)</u>	<u>(26,638)</u>
	305,055	(255,729)	49,326
Restricted funds			
Comic Relief Covid Response	21,302	(16,800)	4,502
Comic Relief Peer Support	32,452	(16,161)	16,291
Mind - South Wales Project	2,496	(10,897)	(8,401)
tnlcf - Leaders With Lived Experience	19,757	(22,967)	(3,210)
Other Peer Support	<u>-</u>	<u>(1,341)</u>	<u>(1,341)</u>
	<u>76,007</u>	<u>(68,166)</u>	<u>7,841</u>
TOTAL FUNDS	<u>381,062</u>	<u>(323,895)</u>	<u>57,167</u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2020

16. MOVEMENT IN FUNDS - continued

Comparatives for movement in funds

	At 1.1.19 £	Net movement in funds £	Transfers between funds £	At 31.12.19 £
Unrestricted funds				
General Fund	57,360	37,976	(60,000)	35,336
Designated Fund	-	-	60,000	60,000
	57,360	37,976	-	95,336
Restricted funds				
Mind - South Wales Project	-	8,401	-	8,401
tnlcf - Leaders With Lived Experience	-	13,165	-	13,165
Other Peer Support	-	7,560	-	7,560
Peer Support and Other Peer Support	15,712	(15,712)	-	-
Comic Relief Everyone's Business (EB) Phase 1 and Comic Relief Top- Up	3,426	(3,426)	-	-
Comic Relief Everyone's Business (EB) Campaign Phase 2	36,064	(36,064)	-	-
Establishing a Quality Mark Framework	400	(400)	-	-
	55,602	(26,476)	-	29,126
TOTAL FUNDS	<u>112,962</u>	<u>11,500</u>	<u>-</u>	<u>124,462</u>

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

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General Fund	242,642	(204,666)	37,976
Restricted funds			
Mind - South Wales Project	22,472	(14,071)	8,401
tnlcf - Leaders With Lived Experience	20,371	(7,206)	13,165
Other Peer Support	8,022	(462)	7,560
Peer Support and Other Peer Support	23,990	(39,702)	(15,712)
Comic Relief Everyone's Business (EB) Phase 1 and Comic Relief Top- Up	(3,426)	-	(3,426)
Comic Relief Everyone's Business (EB) Campaign Phase 2	(36,064)	-	(36,064)
Establishing a Quality Mark Framework	2,100	(2,500)	(400)
	37,465	(63,941)	(26,476)
TOTAL FUNDS	<u>280,107</u>	<u>(268,607)</u>	<u>11,500</u>

ACTION ON POSTPARTUM PSYCHOSIS

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2020

16. MOVEMENT IN FUNDS - continued

Unrestricted funds

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

Designated fund - In 2019, Trustees designated £60,000 for organisational transformation work in 2020 including: increased management time to support with project and staff management; transforming APP's data management systems, conducting a data security review, and ensuring other systems are fit for APP's growth; increasing social media time and content development; and recruiting an experienced fundraiser. Whilst significant progress was made in improving project and staff management systems, the impact of the pandemic meant other organisational transformation work was set aside.

In planning for 2021, Trustees considered the constraints under which the Charity was operating in 2020 as the organisation expanded and the pandemic impacted upon capacity and priorities. A number of organisational transformation priorities were included in the 2021 plan and budget including: data management and financial forecasting systems; conducting a data security review; a ten year impact project; website structure and content review; recruiting a fundraiser; and further developing our project management structure. The Trustees designated a further £25,000 to complete the work initially planned in 2020 and the new priorities added for 2021.

Restricted funds

Comic Relief Peer Support and Other Peer Support

Our Comic Relief funded peer support project had ended during 2019. The Comic Relief grant for the APP Peer Support Community Project enabled our Peer Support Coordinators to support and manage APP's existing Peer Support Volunteers and train new volunteers to provide peer support to women and families affected by Postpartum Psychosis across the UK. The Comic Relief grant was funded from the Tampon Tax Fund through a partnership between HM Government and Comic Relief. In 2020, Comic Relief made an additional grant to APP to extend this project in 2020 and 2021. The grant is for the continued operation of APP's peer support services and the development of APP's digital information and support to adequately meet the need of pregnant women at risk of PP, families in crisis developing PP, and families recovering from PP during the Covid-19 crisis. The Other Peer Support fund consists of donations restricted to peer support activities.

Mind South Wales ActiononPP Project

APP received a grant from Mind to train Peer Support Coordinators with lived experience of Postpartum Psychosis to build a Postpartum Psychosis community in South Wales. The project entailed running a peer support group in the Aneurin Bevan University Health Board area of South Wales, which is open to all affected women living in South Wales. The Coordinators met and supported women to access the group, networking widely to ensure barriers to access are removed. The South Wales PP peer support group and PP community is supporting access to appropriate care in the region, improve recovery outcomes, decrease isolation, and reduce life-long trauma in women who experience severe postnatal mental illness in South Wales. Our group aimed to empower women to recover and make a difference in the local area, creating a network to support change-making and helping women to bring about positive events from a traumatic experience. The project ended in June 2020; however, APP continues to operate the South Wales peer support group and has also established a North Wales group.

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16. MOVEMENT IN FUNDS - continued

tnlcf - Leaders with Lived Experience

APP was awarded a project grant from the Leaders with Lived Experience Programme of the National Lottery Community Fund (tnlcf). The project started in July 2019 and enables APP to provide additional training and support to our three national programme leaders. Project activities will enable our staff to develop as vocal lived experience leaders, and enable APP to pilot gold standard ways of supporting and sustaining lived experience leadership, informing our future work, and championing lived experience at all levels within our charity. The project was due to end in 2020, however some activities were delayed due to the coronavirus pandemic and the Fund agreed to extend the project into 2021. The National Lottery Community Fund also provided some additional COVID-19 funding under this grant in 2020 which enabled APP to employ and develop a fourth lived experience leader, to co-ordinate APP's marketing and digital communications work.

Comic Relief - Covid Response

APP received a grant from Comic Relief co-funded from the Comic Relief 'The Big Night In' Match Fund - COVID Response through a partnership between Comic Relief and the Department for Digital, Culture, Media and Sport (the DCMS). The grant helped APP adapt our services to meet the needs of women and families suffering from postpartum psychosis PP during the pandemic: increasing our use of social media; developing our support for partners of women with PP; and, working to understand and better meet the needs of diverse communities. The project ended in February 2021.

Comic Relief Everyone's Business (EB) Phase 1 and Comic Relief Top up

The Everyone's Business Phase 1 grant and Top up grant were Comic Relief grants for the Everyone's Business campaign and Maternal Mental Health Alliance (MMHA) that were due to end in September 2016. Comic Relief agreed that the underspend on these grants could be used in support of the ongoing campaign to achieve equitable access to high quality perinatal healthcare for women across the UK experiences mental illness.

Comic Relief Everyone's Business (EB) Campaign Phase 2

APP hosted the second phase of the Everyone's Business Campaign on behalf of the MMHA from October 2016 to September 2018. The Everyone's Business campaign calls for all woman throughout the UK who experience perinatal mental health problems to receive the care they and their families need. The phase 2 grant enabled an expanded campaign team to build on the previous phase, including dedicated resource in each of the devolved nations. The grant also funded organisational development work for the MMHA, which became a registered charity and took forward the work from October 2018, funded directly by Comic Relief. With Comic Relief's permission, the final balance of Everyone's Business Campaign funds, including those from the earlier phase 1 and top up grants were transferred to MMHA in 2019.

Establishing a Quality Mark Framework

As part of Comic Relief's Maternal Mental Health strategy, Comic Relief identified the need to develop quality assurance principles for third sector organisations providing peer support services in perinatal mental health. Comic Relief worked in partnership with the Maternal Mental Health Alliance (MMHA) to undertake a tender process and commission the development of a set of quality assurance principles for local providers across the UK. Action on Postpartum Psychosis is hosted the grant funding from Comic Relief for this tender on behalf of the MMHA. This work was completed in 2019 and the resulting perinatal peer support principles are published on the MMHA website.

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NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 DECEMBER 2020

17. RELATED PARTY DISCLOSURES

Action on Postpartum Psychosis is hosted by the University of Birmingham. During 2020 Action of Postpartum Psychosis paid a hosting fee to the University of £38,944 (2019: £38,883). The charity receives benefits from this relationship including meeting and office space.