

CHARITY REGISTRATION NUMBER: 1167443

Abalon Trust
Unaudited Financial Statements
30 April 2025

Jackson & Jackson
A trading name of Jackson Nicholas Assie Limited
Chartered Certified Accountants & Statutory Auditors
Suite 7, Meridian House
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London E4 7BA

Abalon Trust
Financial Statements
Year ended 30 April 2025

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Abalon Trust
Trustees' Annual Report
Year ended 30 April 2025

The trustees present their report and the unaudited financial statements of the charity for the year ended 30 April 2025.

Reference and administrative details

Registered charity name Abalon Trust
Charity registration number 1167443
Principal office 4/4A Bloomsbury Square
London
WC1A 2RP

The trustees

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(Resigned 6 September 2024)

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Abalon Trust

Trustees' Annual Report

Year ended 30 April 2025

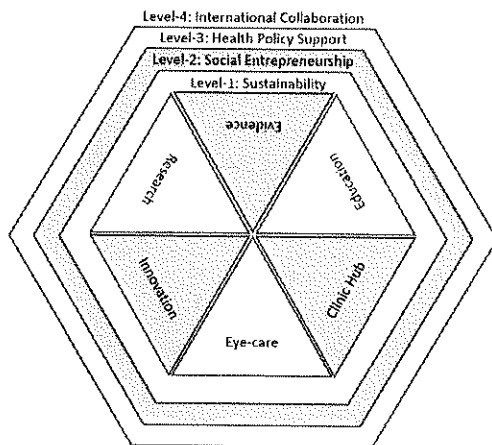
Structure, Governance and Management

Abalon is a Charitable Incorporated Organisation (CIO). It was registered as a charity with the Charity Commission in June 2016 and is governed by its charity governing document ('the constitution').

The Trustees confirm they have had regard to the Charity's Commission's guidance on public benefit when planning activities, ensuring all events and services directly benefit the community, particularly underserved groups.

Objectives and Activities

The ABALON Trust VISION-4-VISION strategy has four pillars: education, research, eye-care and sustainability. Each of the pillars is designed to deliver a different solution to the challenges of accessing eye care.



The change model above demonstrates how the four pillars (in white) deliver outcomes against the vision (outcomes in grey).

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VISION-4-VISION: The four pillars of change.

Eye-care – Reducing health inequalities by providing equitable access to world class eye-care services.

ABALON Trust will provide access to high-quality eye screening and treatment in marginalised communities internationally.

The trust has already delivered eye-camps in Zimbabwe, Uganda and Kenya, providing access to eye care for more than 150 people per day in communities with little access to healthcare. We will extend its reach globally. It will consolidate the work it has done in Sub-Saharan Africa, extend its work to the Caribbean and across the Commonwealth, and then establish itself as a provider to low- and middle-income countries without universal access to eye care.

Abalon continues to initiate community initiatives such as health awareness and screening both in the UK abroad.

Research – supporting clinical trials and validation for new eye health technology.

It is our commitment to innovation that sets ABALON Trust apart from other eye care charities.

Links with academic institutions like the University of the West Indies allow us to apply for academic grant funding to develop new approaches to eye-care, and test new technologies.

Innovations like teleophthalmology and digital health records are cornerstones in the development of technology that can be deployed remotely, improving access to eye care in hard-to-reach communities.

We will work with academic teams and researchers, government and industry to validate technology for use in countries where eye-care is difficult to access.

Education – Support training and development of the next generation of nurses, ophthalmologists, trainee, optometrists and volunteers.

ABALON Trust will provide education and training to local community volunteers to help us set-up eye camps and carry out eye checks remotely.

This will create local ownership of the eye systems we establish. It will build a resilient service that is sustainable during pandemics, crises and periods of social upheaval. It will also provide opportunities for volunteers to develop new skills that might benefit them.

We will work with our network of universities and teaching hospitals to create a programme of overseas medical electives and placements for medical international trainees, improving specialist training and recruitment, internationally.

Sustainability – working in partnership with local communities, international experts and supporters to deliver universal eye care services and create social entrepreneurship.

Sustainability is a theme that cuts across each of the other pillars. In order to deliver sustainable improvements in access to eye care, we need to maintain an appetite for positive change.

We do this by designing initiatives that encourage social entrepreneurship.

If communities own the solution locally, service improvements will continue to be made, provided there is external mentorship and support.

ABALON Trust will establish sustainable income to support ongoing, locally owned initiatives, clinical services and centres of excellence in host countries.

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ABALON Trust has a set of 5 values that inform the priorities, choices, decisions, and working relationships of our organisation.

They are:

1. Having vision.
2. Empowering communities.
3. Giving back.
4. Creating resilience.
5. Being innovative.

In addition to our organisational values, we have two universal values.

They are:

6. Role modelling.
7. Equality, diversity and inclusion.

These values underpin our work with all

Empowering communities – through Innovation, Engagement, Involvement and Equity

ABALON Trust works with communities to embed all principles for empowerment and delivering community centred services. At the core of our activities and vision, is engagement and involvement of communities in meeting their needs within trusted space such as hair saloons and barbers.

Our volunteers and paid temporary personnel are given access to training, education and support to deliver community outreach programmes, in the form of health screening. It is our belief that by supporting the development of these key local skills, that our volunteers and their communities will value the service more and take ownership and pride in it.

In addition to our people, we also aspire to embed national policies, guidance and recommendations such as The NHS 10 Year Health Plan. This means being at the forefront of delivering evidence-based initiatives, integrating innovation and digital solutions in empowering communities. It also means providing access to the mobile and digital technologies that support our services in connected communities. Empowering communities in a culturally sensitive and trusted way is our key to success.

Your Hair & Your Health Matters is a community-driven health initiative by Abalon Trust Charity, proudly sponsored by Time4U Ltd.

Abalon's activities rely heavily on volunteers, the volunteers are vital to delivery of services.

Achievements and Performance

Project Overview – see next page

In September 2024, ABALON Trust (UK charity number 1167443) ran a campaign “Your Hair & Your Health Matters” which was a community-driven health initiative aimed at addressing critical health disparities through the unique and trusted setting of hair salons and barbershops. Recognizing that hair professionals often develop close relationships with their clients, this initiative leverages those spaces as entry points for health education and preventive care services. We screened for hypertension, diabetes, and delivered BMI checks. Our goal is to increase awareness, provide early health screenings, and connect the community to vital healthcare resources.

People from black minority ethnic groups in the United Kingdom are at 3-4 times greater risk of hypertension than the white U.K. population (Chaturvedi N, McKeigue PM, Marmot MG: 1993). People from South Asian communities in the United Kingdom are at up to six times greater risk of type-2 diabetes than the white U.K. population (Diabetes UK: 2009). 18.2% of COVID-19 deaths in England between March and December 2020 were in people with underlying hypertension (ONS: 2021). Diabetes was mentioned on 21% of death certificates where COVID-19 was also mentioned (Public Health England: 2020). It is estimated that at least 1 million people are living with undiagnosed diabetes in England and Wales, around 1 in 9 adults are living with prediabetes and 1 in 4 adults in the UK have high blood pressure. Evidence in literature suggests that black men in particular are unlikely to visit their GP or any other healthcare providers. Therefore, it can be argued that a large percentage of people with undiagnosed diabetes are from BAME backgrounds.

Research indicates that people of African descent have higher salt sensitivity due to differences in kidney function and sodium handling, this predisposes them to higher blood pressure with increased salt intake (Falkner, B., & Kushner, H. (2003)).

Certain genetic variants that affect insulin action are more common in South Asia and African populations, making them more susceptible to diabetes (Nature genetics, 42(1), 37-45. Differences in fat distribution between Asians, Blacks and Caucasians significantly influence the risk of metabolic diseases like diabetes and cardiovascular disease. While body mass index (BMI) is commonly used to assess obesity, it does not fully capture differences in body fat distribution, which has a more significant

impact on health outcomes. Asians have higher visceral fat and reduced muscle mass, putting them at increased risk for diabetes and cardiovascular diseases (Yajnik, C. S (2004)), whereas black populations have a higher proportion of composition, fat metabolism and insulin sensitivity may explain the black individuals are more prone to hypertension and diabetes, even with lower visceral fat. Moreover, socioeconomic, psychosocial, and chronic stress factors also play a role. (Goedecke, J. H., et al).

Poor eye health outcomes are also affected by uncontrolled high blood pressure and diabetes. ABALON Trust(UK Charity 1167443) re is an international eye-health charity working with people in sub-Saharan Africa, the Caribbean and the diaspora, with a strong London-based support network. This made ABALON Trust ideally placed to engage with at-risk communities in Chatham Medway to provide tailored health education and interventions in diabetes and high blood pressure.

We had already responded to the COVID-19 emergency when it made its application to Power-to-Change to extend our community response. The campaign, “known the unknown) **designed to support minority communities at greatest risk of poorer health outcomes resulting from COVID-19. We aimed to raise awareness and empower communities to manage the health risks associated with severe illness resulting from COVID-19, namely uncontrolled and undiagnosed high blood pressure and diabetes mellitus.**

Building on our previous work and legacy of community engagement we launched “Your Hair and Your Health matters”. The campaign was privately funded by a local business known as “Time4u” specialists in social care. Time 4u provided an arm’s length donation to Abalon Trust as part of their cooperate, social responsibility strategic objective. The Your Hair & Health Matters campaign grant by Time 4 u enabled us to fund a community outreach project that addressed hypertension and diabetes screening in BAME groups in hair salons and barbershops across Chatham Highstreet. The project also focused on education and engagement via a variety of media to help people understand what their blood-pressure and blood-sugar numbers mean for their health.

These included active engagement with patients who volunteered to partake in the project, having personalised GP consultations as well as eye health specialists to talk to those more at risk, tailored fitness and diet advice tailored to the individual norms of the ethnicity groups, and distribution of leaflets from the British Heart Foundation and Diabetes UK. Additional funding has also enabled us to develop an online documentary capturing the legacy and create life-changing testimonials, write articles and generate resources for to highlight the impact of the campaign and help create sustainable impact on the community. The following report contains details of the impact of our campaign.

Impact report – “Your Hair & Your Health Matters”

The campaign reached ~550 people within our target demographic £72,72 each including those from community and professional groups. We also reached out to those outside the targeted group (Global Majority) , screening about +100. The local community pharmacists, Optometrists and other primary care providers in the high street experienced traffic as we made on ward referral to their services.

We delivered:

- Health screenings across 4 barbershops, 6 days a week
- Distributed 1000 flyers from the British Heart Foundation and Diabetes UK to help improve patient education and therefore adherence to medication
- Had an on-call GP Monday to Friday and in person on Saturday to give private consultations to patients at risk, as well as give urgent advice and referral
- Diversified multi professional groups- Medical staff, pharmacists, nurses, specialists' nurses, Fitness Instructor, Dietician, Support workers, and educators
- Used social media platforms to spread the news across Kent and encourage people to come to our clinics
- Collected anonymised qualitative data to demonstrate which groups are at higher risk based on age, sex, and sub ethnicity,
- Collected quantitative data in the form of feedback sheets to record how many people that were diagnosed knew what the condition was, were regularly taking their medication, as well as feedback on the impact the campaign had on them

- Created a documentary to record impact
- Targeted social media groups – containing 1000 members +
- Hosted a webinar with local churches reaching out to over 1000 participants
- Had prominent figures express interest and come to view the clinics such as the mayor of Kent, local businesses and community champions.
- Early findings and campaign presented at the Diabetes Professional Conference London October 2024
- Engaged with other community groups influencers, community advocates, local charities and other establishments

Additionally, a project delivery team comprising of project manager, 1 project director, medical student (writing up and poll management), 5 doctors, Diabetes Nurse Consultant x1, Fitness Instructor x1, Dietician x1, Ophthalmic Nurse Specialists x2, x3 Support workers; 1 GP consultant IT expert, digital and marketing, and 2 nurses, was established in partnership with ABALON trustee board. There were noticeable practical challenges in the marketing and communicating of the campaign, where more could have been done at the beginning of the project to spread awareness. Learning curves include hiring marketing and social media specialists to strengthen the impact by allowing us to reach a wider audience.

Our social media campaign using WhatsApp, Facebook and Instagram generated 22 posts with the most popular content generating 5-6k page impressions, with the top 3 locations being Kent, London and Essex.

Presentations and recordings are now being made available on the Abalon Trust website, social media platforms Facebook, Instagram, what's app and YouTube. We have also distributed one of the diabetes education videos by Dr St John presentation via WhatsApp platforms to the targeted communities.

Examples of innovation

Barbershop-Based Health Hubs: By embedding healthcare in familiar, trusted spaces like barbershops and salons, we provided a unique

touchpoint for health promotion. This approach effectively reduced the stigma of health screenings and increased participation.

Health Ambassador Training: Barbers and stylists were trained as "Health Ambassadors" to encourage health screenings, initiate health conversations, and offer clients educational materials on health and wellness. This approach created a trusted channel for delivering health education.

Use of Technology: Leveraging social media platforms such as WhatsApp, Facebook, and Instagram to share educational health content and campaign updates. Digital tools were also used to provide reminders about health checks and follow-up care.

Pop-Up Health Clinics: Temporary health clinics were set up within barbershops and salons, enabling access to health screenings during peak customer hours. These pop-ups provided immediate access to care in a familiar environment.

Culturally Tailored Health Messaging: Health education materials were designed with cultural relevance in mind. Messaging addressed common health myths and framed healthcare as a collective community responsibility, which resonated deeply with the target audience.

Flexible Health Check Hours: To accommodate clients with varying schedules, we offered health checks during non-traditional hours, including evenings and weekends, increasing access for individuals with limited availability during standard working hours.

Community-led content

The "Your Hair and Your Health Matters" campaign was community-led at every stage. Barbers, stylists, and community leaders provided critical input on the design and delivery of health interventions. This co-production approach increased community trust and participation. Key interventions included:

On-Site Health Checks: Offering same-day screenings at salons and barbershops.

Health Promotion Days: Events with free health checks, healthy lifestyle advice, and expert talks.

Health Referral Pathways: Individuals with concerning test results were referred to GPs or community health clinics for follow-up care.

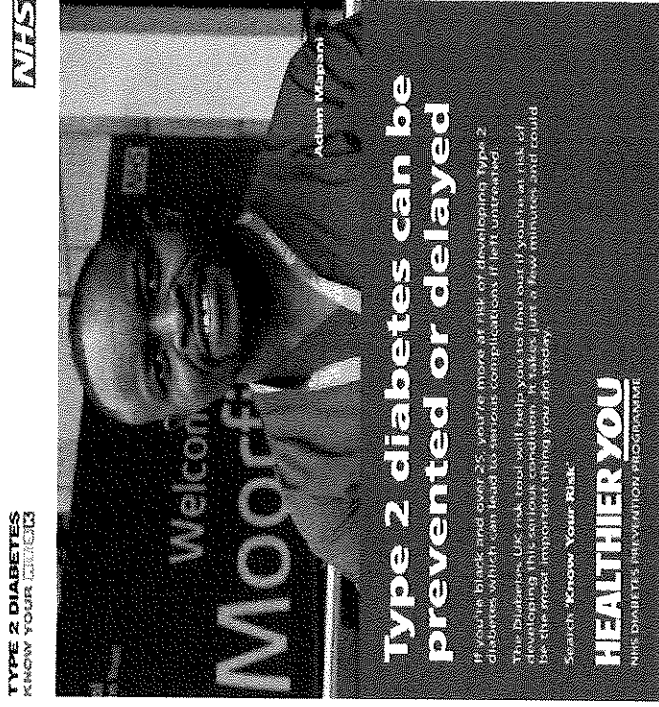
We also engaged directly with several media, social groups and community partners to spread the campaign message, including Diabetes Professional Conference, online World Sight Day event, and World Diabetes Day. We also engaged an AI company that has technology to predict who is likely to miss scheduled hospital appointments.

Challenges in the delivering of the "Your Hair & Your Health Matters" campaign

Engagement and Trust Issues: Building trust within underserved communities can be difficult, as many people are wary of health interventions due to previous negative experiences with healthcare systems. Gaining the trust of community members required consistent visibility, the use of culturally relevant materials, and the involvement of trusted community figures like barbers and stylists.

Access and Transportation Barriers: Some community members faced transportation challenges in accessing screening sites, even when located in familiar community spaces. Pop-up clinics and mobile health units helped address this barrier.

Cultural and Language Barriers: Health messages and educational materials needed to be culturally relevant and delivered in the preferred languages of the community. Simplifying health concepts using visual aids and infographics was key to improving comprehension.



Mr Adam Mapani MBE -NHS Diabetes Ambassadorial role. Mr Mapani's photo is widely used in most NHS diabetes related campaigns. This includes the Kent and Medway wellbeing bus. This provided additional reassurance to clients visiting hair salons and barbershops. This was also familiar to most people living in Kent. Most visitors to the targeted establishments often eluded that they knew Mr Mapani's photo, and some had seen him in person and experienced his community initiatives. T

The same photo was used on all digital campaign materials to raise awareness giving people reassurance
Digital Divide: Not all community members had access to digital platforms where health updates and appointment reminders were shared. Addressing this required the use of low-tech communication methods like posters and flyers.

Staffing and Volunteer Limitations: Recruiting and training volunteers from the local community was essential, but limited capacity during peak times sometimes caused bottlenecks. Health ambassador programs mitigated this challenge by empowering local barbers and stylists to take on some health advocacy responsibilities.

Overdiagnosis and Follow-Up: Screening can sometimes identify health issues that may not require immediate intervention, leading to overdiagnosis. Clear communication about test results and appropriate next steps helped to manage expectations and reduce anxiety among participants. Values that are slightly over the normal range are advised differently than those at imminent risk of hypertensive crises or diabetic

Data Privacy Concerns: Some participants were hesitant to share personal health data due to concerns about privacy and confidentiality. Addressing these concerns required clear messaging about data protection protocols and confidentiality assurances, including the use of anonymised data and not collecting personal information.

Operational Challenges: Coordinating schedules with barbers, stylists, and healthcare professionals posed logistical challenges. Offering screenings during peak business hours and extending service hours to evenings and weekends was essential for maximizing participation.

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ketoacidosis. The use of traffic light systems and tables with specific guidelines were placed in each shop for reference.

Evidence of Sustainability

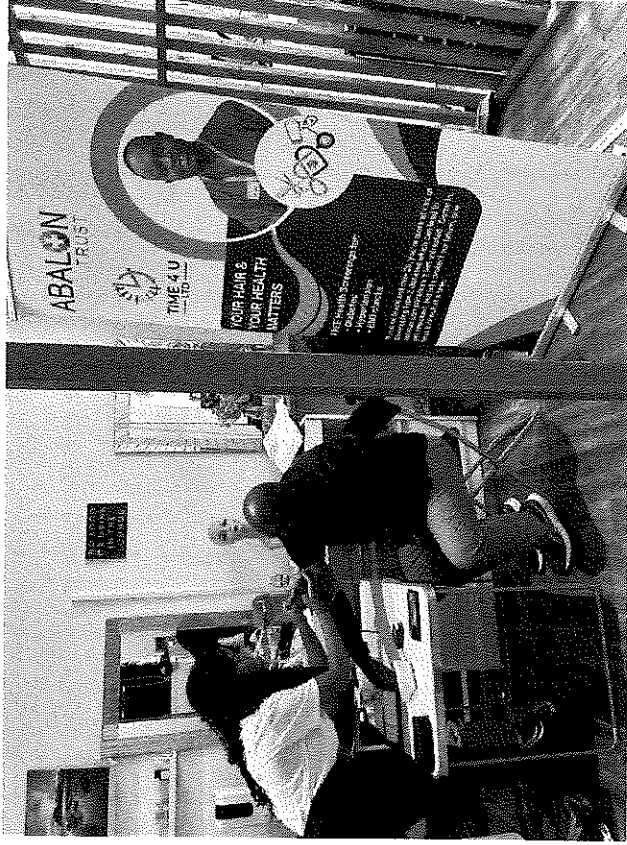
Training Local Health Ambassadors: By training barbers and stylists as health advocates, the campaign left a lasting impact on community health literacy. These ambassadors can continue to promote health messages long after the campaign ends.

Access to Resources: Created a library of health education materials, which remain accessible to the community via local barbershops, salons, and online platforms.

Community Partnerships: Partnerships with local health authorities and NGOs created pathways for continued support, training, and resource sharing.

Building Partnerships and Sustainable Community Engagement: The campaign's success was rooted in strong partnerships with stakeholders, including:

Local Health Authorities: Enabled referral pathways for individuals flagged during screenings.



Hair Industry Partners: Gained the support of barbershop and salon owners, as well as 2 hair product shops, ensuring the initiative's longevity.

Charity and NGO Partners: Collaborated with organizations like Diabetes UK and the British Heart Foundation to access funding, materials, and training.

Local GPs- We were also approached by Local GPs from the Global Majority who expressed the desire to support. Some of the GPs with special interest in equality and diversity, access to health also approached us for potential engagements.

Trust and Confidentiality: Ensuring clients felt comfortable sharing personal health data required careful messaging and clear confidentiality protocols. The photos for campaign provided additional reassurance due to familiarity with the community.

Scheduling Issues: Balancing the availability of hair professionals with the

campaign's operational hours proved challenging, necessitating flexible health check schedules. We also used digital software's for staff to log in and record working hours. The technology was an enabler to efficiency, auditing trail, managing rota systems and communicating with Abalon Representative.

Our target population was also struggling with getting GP appointments after referrals due to very high blood pressure or blood glucose levels. Many of them came back multiple times, as they claimed they were unable to get GP appointments for months and wanted to be retested after implicating suggested lifestyle changes. This further highlighted to us the necessity of our campaign.

Positive Community Testimonials

Life-Saving Referral for Hypertensive Patients: Three individuals were referred directly to A&E after presenting with critically high blood pressure and symptoms like headaches, dizziness, and shortness of breath. Timely intervention prevented potential strokes or heart attacks.

Breaking Mental Health Barriers: A hypertensive woman experiencing hallucinations admitted she had never sought mental health care due to social stigma. After receiving compassionate advice, she committed to seeking help, highlighting how the campaign addressed both physical and mental health.

Correcting Misdiagnosis: A patient who had been incorrectly diagnosed with diabetes for years discovered, through our screenings, that her blood sugar levels were normal. This revelation spared her unnecessary medication and its side effects, significantly improving her quality of life.

Reaching the Underserved: A man with persistent stage 1 hypertension visited four times, stating he couldn't secure a GP appointment despite trying for over a month. Our team's support provided him with essential guidance and care he otherwise would have missed.

Encouraging Lifestyle Changes: Another patient with stage 2 hypertension and obesity returned weeks later to share that he had lost weight, started adhering to his medication, and was actively managing his health. He credited the campaign for "saving his life."

Navigating Complex Healthcare Needs: A suspected cancer patient,

unable to secure UK care, resorted to seeking help abroad but struggled to access prescribed medications. Our team guided him on next steps, ensuring he could pursue urgent care.

Many patients were aware they had hypertension, but they didn't fully understand the condition or its seriousness. They often reported that they were given a diagnosis and prescribed medication, but no one took the time to explain what hypertension really was or why it mattered. Our intervention made a significant difference, as we took the time to thoroughly explain the condition, its potential consequences, and the importance of taking medication. This approach helped patients understand the urgency, leading to better compliance and improved health outcomes, with many returning to report that their levels were now within the normal range.

Time Efficiency:

Based on NHS patient flow data, the average time for an individual patient to secure a GP consultation, undergo screenings, and receive referrals is approximately 8 weeks due to appointment backlogs. By formally screening 550 patients within 8 weeks, the campaign has saved over 3,300 patient-weeks of waiting time. This time efficiency ensured that patients received immediate care and guidance, significantly reducing the likelihood of complications caused by delayed diagnosis.

Evidence and sustainability

The success of the Your Hair and Your Health Matters Campaign highlights the potential for this innovative model to be sustained and scaled. To ensure long-term impact and financial viability, we propose the following strategies:

1. Strengthening Community Partnerships
 - Expanding Locations: Collaborate with more community-based businesses, such as additional barbershops, salons, local supermarkets, and churches, to embed healthcare services into accessible spaces.

- Partnership with Local Pharmacies: Work with pharmacies to provide additional support for follow-ups, medication reviews, and community health education sessions.

2. Securing Funding and Sponsorships

- Government Grants: Apply for public health funding and grants focused on preventative care and reducing health inequalities.
- Corporate Sponsorships: Partner with corporations and local businesses to sponsor equipment, educational materials, and outreach events. For example, beauty product brands could contribute to health and wellness campaigns aligned with their customer base.

3. Leveraging Digital Tools

- Telehealth Integration: Introduce virtual consultations and follow-ups for patients identified as at-risk, ensuring continuity of care without requiring physical attendance.
- Educational Platforms: Develop an online resource hub with videos, articles, and interactive tools on managing hypertension, diabetes, and related conditions.
- Data-Driven Insights: Utilize data collected from the campaign to monitor trends, measure health outcomes, and refine strategies for future iterations.

4. Scaling Through Workforce Development

- Training Community Health Workers: Empower local community members by training them as health ambassadors who can assist with screenings and patient education.
- Expanding Volunteer Networks: Recruit volunteers to assist with administrative tasks, patient engagement, and community outreach.

5. Advocacy and Policy Integration
 - Embedding in NHS Pathways: Advocate for integrating this model into NHS primary care services, reducing strain on GP practices by handling early-stage screenings and referrals.
 - Policy Support: Work with policymakers to recognize community-based health initiatives as a cost-effective solution to addressing health inequalities.
6. Cost-Effectiveness Demonstrations
 - Present this campaign's results to stakeholders, emphasizing the savings compared to traditional NHS costs for equivalent services. Highlight how early interventions reduce emergency care costs and improve long-term health outcomes.

Conclusion

The Your Hair and Your Health Matters Campaign demonstrated an innovative, community-centred approach to healthcare delivery, achieving measurable success in:

- Increasing Access: Reaching over 550 individuals who might otherwise face barriers to traditional healthcare.
- Raising Awareness: Educating patients on preventable chronic conditions and encouraging proactive health management.
- Saving Lives: Identifying and addressing life-threatening conditions in real time.

Future Recommendations:

Expand the Campaign: Scale the model to additional locations, particularly in areas with high BAME populations and limited healthcare access.

Integrate Additional Services: Incorporate screenings for other conditions such as mental health, cholesterol, and cancer risk assessments.

Secure Funding Partnerships: Collaborate with local authorities, NHS trusts, and community organizations to ensure sustainability and scale.

This was privately funded by Time4u , local business in Kent.

Enhance Digital Engagement: Leverage the documentary and patient testimonials to drive awareness and secure broader community buy-in.

Community based diagnostic hub , culturally sensitive and be spoke to the people from the Global Majority. This could pave way to upscaling research, disease awareness and areas such as sickle cell, maternal health and cancer services. This community is rich in terms of culture and could add more to both societal and health contributions.

By prioritizing prevention and leveraging trusted community spaces, the Your Hair and Your Health Matters Campaign has proven to be a cost-effective and impactful model for addressing healthcare disparities. Continued support will not only sustain these outcomes but further empower communities to take charge of their health.

Recommendations for academic and community collaborations

Learning from community engagements have been shared widely with like minded academics and researchers in exploring further research gaps. The quantitative data used in this campaign explored a range of different parameters, including sub ethnic groups, which has not been commonly reported.

The historical and structural factors influencing healthcare mistrust and disparities among sub ethnic groups in Africa can significantly impact health behaviours and outcomes among African populations living in the UK. For example, individuals from regions such as West Africa, where unethical medical practices and systemic inequities have fostered deep mistrust, may carry those perceptions into their interactions with healthcare systems in the UK. This can manifest as hesitancy to seek medical care, reluctance to adhere to treatment plans, or scepticism toward healthcare providers, even in well-resourced settings. Additionally, disparities in health education and awareness within different subgroups may lead to varying levels of engagement with preventative measures, such as routine screenings or early interventions for chronic diseases like hypertension and diabetes.

The data collected from campaigns like Your Hair and Your Health Matters provides valuable insights into these behaviours, highlighting gaps in healthcare access, trust, and awareness among African subgroups. This information can be instrumental in academic research to better understand the unique health needs and barriers faced by these populations. It also serves as a foundation for community collaborations, enabling culturally tailored health interventions. For instance, academic institutions can partner with local organizations to design educational initiatives that address mistrust by incorporating community voices and culturally relevant messaging. Similarly, healthcare providers can use this data to develop inclusive care models that prioritize trust-building, accessibility, and equity for African subgroups in the UK. By leveraging these insights, we can bridge the gap between historical disparities and current health outcomes, fostering a more inclusive and effective healthcare system.

The qualitative data tells a beautiful story on the impact of the project and some of the barriers faced from the BAME in terms of accessibility to healthcare, directly from their own words. This can be used to implement policy change that will address some of these inequalities and accessibilities, allowing people to be diagnosed in the early stages rather than later when they require secondary or tertiary intervention, which is a lot more costly on the NHS and a lot more devastating to the individual and community

In conclusion Your Hair and Your Health campaign pilot project have positively impacted in Global Majority communities in Medway Kent. Health screening interventions in Barbershops and Hairdressers has been reported in literature. The cost effectiveness and wider benefits, individual, communities and health gate keepers are described in our series. The report highlights an innovative and sustainable health partnership interventions in a trusted environment such as hairdressers and barbershops. This ensures communities from the Global Majority receive culturally be spoke accessible health services for both prevention and management of health. A formal research study is recommended for future sustainability and wider implications across communities. This includes empowering hairdressers and barbers to promote uptake of health checks, blood pressure, blood sugar and other baseline tests. Adequate training, collaborations with local GPs and other primary care givers will bring sustainability to such initiative. However, we acknowledge these environments would also need to be aligned with health care regulations

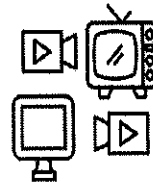
We are grateful to Time4u Group CEO and Founder for their huge financial generosity through their Cooperate Social Responsibility. This was an enabler for the pilot project, highlighting the potential benefits of this initiative.

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Trustees' Annual Report
Year ended 30 April 2025

Impact – At a Glance



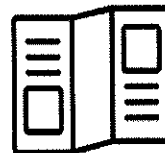
**550
participants**



**Media engagement
7000 people**



**Educated over
5000 people**



**Leaflets and literature
over 1000**



**Partnered with 4 barbershops and
2 hair product shops**

Abalon Trust

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Social Media Designs

ABALON TRUST

YOUR HAIR & YOUR HEALTH MATTERS CAMPAIGN

WHERE TO FIND US

TIME 4 U LTD

ABALON TRUST

WHAT TO EXPECT

WHAT YOU CAN EXPECT

TIME 4 U LTD

ABALON TRUST

WHAT WILL WE TEST?

WHAT HAPPENS IF WE FIND SOMETHING CONCERNING?

TIME 4 U LTD

TRAIN OPTIONS

1. **HIGH-SPEED TRAINS (HVLIA SERVICES):**
 - ROUTE: LONDON ST PANCRAS INTERNATIONAL TO CHATHAM
 - JOURNEY TIME: APPROXIMATELY 38 MINUTES
 - FREQUENCY: UP TO 14 TRAINS DAILY
 - TICKET PRICES: PRICES START AROUND £34 FOR ADVANCE TICKETS

2. **SLOWER TRAINS:**
 - ROUTE: LONDON VICTORIA TO CHATHAM, OR FROM LONDON BRIDGE TO CHATHAM
 - JOURNEY TIME: ABOUT 1 HOUR TO 1 HOUR AND 15 MINUTES
 - FREQUENCY: NUMEROUS TRAINS OPERATE THROUGHOUT THE DAY, TYPICALLY INCLUDING 60 SERVICES

TICKET PRICES: GENERALLY RANGE FROM £8.50 TO £14, DEPENDING ON THE TIME OF BOOKING AND TRAVEL.

- TICKET PRICES:**
- ADVANCE TICKETS: THESE CAN BE SIGNIFICANTLY CHEAPER, OFTEN STARTING FROM £8.50 WHEN BOOKED IN ADVANCE.
 - OFF-PEAK TICKETS: THESE ARE AVAILABLE AT LOWER PRICES DURING LESS BUSY TRAVEL TIMES.

WHERE TO FIND US

- **LACKEY'S BEAUTY AND BARBERS**
 - ADDRESS: 27 HIGH STREET, CHATHAM, ME4 4AA
 - DIRECTIONS: FROM CHATHAM STATION, HEAD EAST ON KIRKBY STREET TOWARDS THE HIGH STREET, TURN RIGHT (FOR ABOUT 7 MINUTES) UNTIL YOU REACH LACKEY'S BEAUTY AND BARBERS
- **ELIOPAPAS'S BEAUTY SPACE**
 - ADDRESS: 27 HIGH STREET, CHATHAM, ME4 4AA
 - DIRECTIONS: WALK FROM CHATHAM STATION TO THE HIGH STREET, TAKE A LEFT AT THE BUSHBAGG AND HEAD TOWARDS JOHN LUBBICK, ELIOPAPAS'S BEAUTY SPACE IS 12 MINUTES WALK FROM THE STATION
- **SCOTTY'S HAIR SALON**
 - ADDRESS: 27 HIGH STREET, CHATHAM, ME4 4AA
 - DIRECTIONS: FROM CHATHAM STATION, HEAD EAST ON KIRKBY STREET, WALK FOR ABOUT 3 MINUTES UNTIL YOU REACH THE HIGH STREET, CONTINUE ALONG THE HIGH STREET FOR ABOUT 7 MINUTES, AND SCOTTY'S HAIR SALON WILL BE ON YOUR RIGHT (ABOUT 15 MINUTES FROM CHATHAM STATION)
- **DOCK BUSINESS SALON**
 - ADDRESS: 27 HIGH STREET, CHATHAM, ME4 4AA
 - DIRECTIONS: FROM CHATHAM STATION, HEAD EAST ON KIRKBY STREET, WALK FOR ABOUT 3 MINUTES UNTIL YOU REACH THE HIGH STREET, CONTINUE ALONG THE HIGH STREET FOR ABOUT 7 MINUTES, AND DOCK BUSINESS SALON WILL BE ON YOUR RIGHT (ABOUT 15 MINUTES FROM CHATHAM STATION)

WHAT HAPPENS IF WE FIND SOMETHING CONCERNING?

If we find something mildly concerning (values that are higher or lower than normal but do not cause imminent threat to your health), we will refer you to see a GP and also advise you on lifestyle factors that could help keep your BP (blood pressure) and blood sugars in normal range.

If your blood sugars test positive for diabetes, we will also give you a monitoring diary and a self test kit to take home and record your values. This will give your GP a better understanding of your condition when you see them.

If the values are dangerously high, we will refer you to out of hours GP or A&E based on guidelines and our on-call GP's advice.

WHAT WILL WE TEST?

We will take a brief and anonymous history from you (including your age, where you are from, how often you exercise etc) - we will not take any personal or identifiable data.

We will then check your BMI, blood pressure and blood sugars respectively, educating you on what these things are.

This will take roughly 10 minutes.

Abalon Trust

Trustees' Annual Report

Year ended 30 April 2025

AFTER THE SCREENING

You will be given the chance to ask our team any questions you may have about your health. We will also give you a QR code to scan and give us feedback.

You may also be given some free drinks and refreshments.

We are very excited to see you and serve you so come so come in, get checked, and let's protect our health, one health check at a time!

INACCESSIBILITY TO HEALTHCARE IN BME

- **Geographic Barriers:** Black and ethnic minority groups are more likely to live in deprived areas with fewer healthcare facilities. In the UK, these communities often reside in urban, underfunded areas where access to GPs and specialists is limited.
- **Language Barriers:** For some ethnic minorities, English may not be the first language, which complicates communication with healthcare providers. This can lead to misunderstandings, poorer patient experiences, and inadequate care.
- **Digital Divide:** A report by Public Health England highlighted that many ethnic minorities experience digital exclusion, making it harder to access online healthcare services, which are becoming increasingly common.
- **Health Insurance and Private Care:** While the NHS is free at the point of access, those seeking private care due to long NHS wait times may find it financially inaccessible.

Publicity

ABALON TRUST

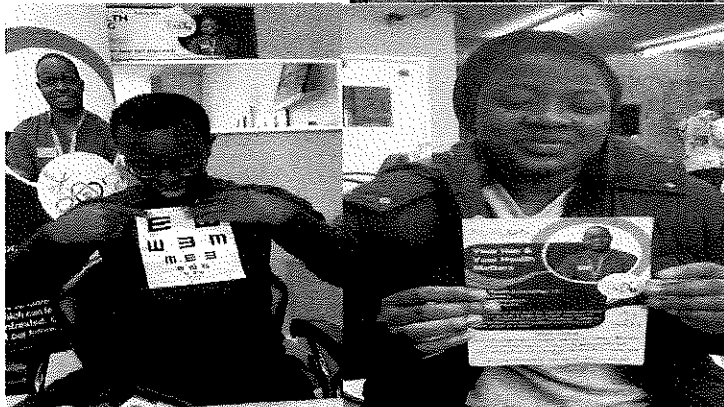
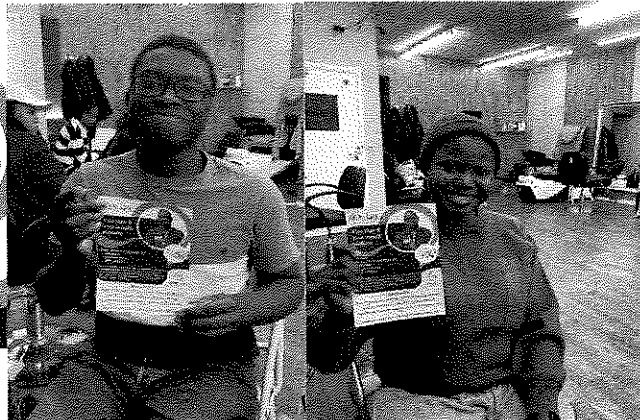


YOUR HAIR & YOUR HEALTH MATTERS

FREE Health Screenings for:

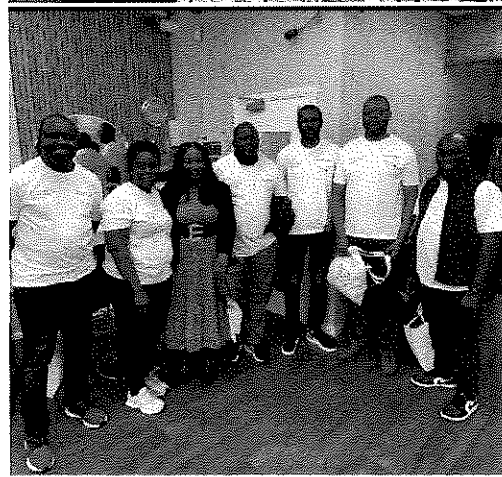
- Diabetes
- Hypertension
- BMI checks

If you're black and over 25, you're more at risk of developing type 2 diabetes which can lead to serious complications if left untreated. Come in, get checked, and let's protect our future, one health check at a time.



Abalon Trust
Trustees' Annual Report
Year ended 30 April 2025





Abalon Trust
Trustees' Annual Report
Year ended 30 April 2025

Financial Review

At the end of the period, Abalon Trust maintained a modest financial position with limited reserves. At the end of the reporting period the charity made a deficit of £4,868 (2024: £2,499 surplus) and reserves of £4,723 (2024: £9,591 surplus) of which £3,717 was unrestricted and £1,006 restricted funds. The charity's primary income sources were donations from regular supporters and a grant from Time 4 U Ltd. While these funds have supported core activities and community programmes. The charity's policy is to hold reserves to ensure it can meet essential running costs in the event of a temporary shortfall in income. This reserve acts as a buffer to protect key programmes and commitments, particularly for events and community engagement activities.

Events after the end of the reporting period

Particulars of events after the reporting date are detailed in note 18 to the financial statements.

Trustees' Responsibilities

- (a) the Trustees are responsible for preparing the Trustees' Report and the financial statements in accordance with applicable law and regulations and in accordance with United Kingdom Generally Accepted Accounting Practice.
- (b) Charities Act requires the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the situation of the charity and of the surplus or deficit profit or loss of the charity for that period.
- (c) in preparing the financial statements the directors are required to:
 - (i) select suitable accounting policies and then apply them consistently.
 - (ii) make judgements and accounting estimates that are reasonable and prudent.
 - (iii) State whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
 - (iv) prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in business.
- (d) the Trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the company's transactions and disclose with reasonable accuracy at any time the financial position of the charity and that enable them to ensure that the financial statements comply with the Charities Act 2011.
- (e) the Trustees are responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities; and
- (f) where appropriate, the Trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charity's webs

The trustees' annual report was approved on 26th February 2026 and signed on behalf of the board of trustees by:



Adam Mapani
Trustee

Abalon Trust

Independent Examiner's Report to the Trustees of Abalon Trust

Year ended 30 April 2025

I report to the trustees on my examination of the financial statements of Abalon Trust ('the charity') for the year ended 30 April 2025.

Responsibilities and basis of report

As the trustees of the charity you are responsible for the preparation of the financial statements in accordance with the requirements of the Charities Act 2011 ('the Act').

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

Independent examiner's statement

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

1. accounting records were not kept in respect of the charity as required by section 130 of the Act; or
2. the financial statements do not accord with those records; or
3. the financial statements do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair' view which is not a matter considered as part of an independent examination.

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

John Assie FCCA
Independent Examiner
Jackson Nicholas Assie Limited
Chartered Certified Accountants
Suite 7, Meridian House
62 Station Road
Chingford
London E4 7BA

26 February 2026

Abalon Trust
Statement of Financial Activities
Year ended 30 April 2025

		Unrestricted funds £	2025 Restricted funds £	Total funds £	2024 Total funds £
	Note				
Income and endowments					
Donations and legacies	4	2,113	37,375	39,488	3,220
Charitable activities	5	—	—	—	2,000
Total income		<u>2,113</u>	<u>37,375</u>	<u>39,488</u>	<u>5,220</u>
Expenditure					
Expenditure on charitable activities	6,7	(4,453)	(39,903)	(44,356)	(2,721)
Total expenditure		<u>4,453</u>	<u>39,903</u>	<u>44,356</u>	<u>2,721</u>
Net (expenditure)/income		<u>(2,340)</u>	<u>(2,528)</u>	<u>(4,868)</u>	<u>2,499</u>
Transfers between funds		2,000	(2,000)	—	—
Net movement in funds		<u>(340)</u>	<u>(4,528)</u>	<u>(4,868)</u>	<u>2,499</u>
Reconciliation of funds					
Total funds brought forward		4,057	5,534	9,591	7,092
Total funds carried forward		<u>3,717</u>	<u>1,006</u>	<u>4,723</u>	<u>9,591</u>

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

The notes on pages 25 to 32 form part of these financial statements.

Abalon Trust
Statement of Financial Position
30 April 2025

	Note	2025 £	2024 £
Current assets			
Debtors	13	164	164
Cash at bank and in hand		6,899	9,427
		<u>7,063</u>	<u>9,591</u>
Creditors: amounts falling due within one year	14	(2,340)	—
Net current assets		<u>4,723</u>	<u>9,591</u>
Total assets less current liabilities		<u>4,723</u>	<u>9,591</u>
Net assets		<u>4,723</u>	<u>9,591</u>
Funds of the charity			
Restricted funds		1,006	5,534
Unrestricted funds		<u>3,717</u>	<u>4,057</u>
Total charity funds	15	<u>4,723</u>	<u>9,591</u>

These financial statements were approved by the board of trustees and authorised for issue on 26 February 2026, and are signed on behalf of the board by:


Adam Mpani
Trustee

The notes on pages 25 to 32 form part of these financial statements.

Abalon Trust
Statement of Cash Flows
Year ended 30 April 2025

	2025	2024
	£	£
Cash flows from operating activities		
Net (expenditure)/income	(4,868)	2,499
<i>Adjustments for:</i>		
Accrued expenses	2,340	—
<i>Changes in:</i>		
Trade and other debtors	—	(164)
Cash generated from operations	<u>(2,528)</u>	<u>2,335</u>
Net cash (used in)/from operating activities	<u>(2,528)</u>	<u>2,335</u>
Net (decrease)/increase in cash and cash equivalents	(2,528)	2,335
Cash and cash equivalents at beginning of year	9,427	—
Cash and cash equivalents at end of year	<u>6,899</u>	<u>2,335</u>

Abalon Trust
Notes to the Financial Statements
Year ended 30 April 2025

1. General information

The charity is a public benefit entity and a registered in England and Wales as a Charitable Incorporated Organisation. The address of the principal office is 4/4A Bloomsbury Square, London, WC1A 2RP.

2. Statement of compliance

The financial statements have been prepared in accordance with the Statement of Recommended Practice: Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standards applicable in the UK and Republic of Ireland (FRS102) issued in October 2019 and the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS102) and the Charities Act 2011, and UK Generally Accepted Practice as it applies from January 2019.

3. Accounting policies

Basis of preparation

The financial statements have been prepared on the historical cost basis.

The financial statements are prepared in sterling, which is the functional currency of the entity.

Going concern

There are no material uncertainties about the charity's ability to continue.

Judgements and key sources of estimation uncertainty

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the amounts reported. These estimates and judgements are continually reviewed and are based on experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

Significant judgements

There are no judgements (apart from those involving estimations) that management has made in the process of applying the entity's accounting policies and that have the most significant effect on the amounts recognised in the financial statements.

Fund accounting

Unrestricted funds are available for use at the discretion of the trustees to further any of the charity's purposes.

Designated funds are unrestricted funds earmarked by the trustees for particular future project or commitment.

Restricted funds are subjected to restrictions on their expenditure declared by the donor or through the terms of an appeal, and fall into one of two sub-classes: restricted income funds or endowment funds.

Abalon Trust

Notes to the Financial Statements *(continued)*

Year ended 30 April 2025

3. Accounting policies *(continued)*

Incoming resources

All incoming resources are included in the statement of financial activities when entitlement has passed to the charity; it is probable that the economic benefits associated with the transaction will flow to the charity and the amount can be reliably measured. The following specific policies are applied to particular categories of income:

- income from donations or grants is recognised when there is evidence of entitlement to the gift, receipt is probable and its amount can be measured reliably.
- legacy income is recognised when receipt is probable and entitlement is established.
- income from donated goods is measured at the fair value of the goods unless this is impractical to measure reliably, in which case the value is derived from the cost to the donor or the estimated resale value. Donated facilities and services are recognised in the accounts when received if the value can be reliably measured. No amounts are included for the contribution of general volunteers.
- income from contracts for the supply of services is recognised with the delivery of the contracted service. This is classified as unrestricted funds unless there is a contractual requirement for it to be spent on a particular purpose and returned if unspent, in which case it may be regarded as restricted.

Resources expended

Expenditure is recognised on an accruals basis as a liability is incurred. Expenditure includes any VAT which cannot be fully recovered, and is classified under headings of the statement of financial activities to which it relates:

- expenditure on raising funds includes the costs of all fundraising activities, events, non-charitable trading activities, and the sale of donated goods.
- expenditure on charitable activities includes all costs incurred by a charity in undertaking activities that further its charitable aims for the benefit of its beneficiaries, including those support costs and costs relating to the governance of the charity apportioned to charitable activities.
- other expenditure includes all expenditure that is neither related to raising funds for the charity nor part of its expenditure on charitable activities.

All costs are allocated to expenditure categories reflecting the use of the resource. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs are apportioned between the activities they contribute to on a reasonable, justifiable and consistent basis.

Tangible assets

Tangible assets are initially recorded at cost, and subsequently stated at cost less any accumulated depreciation and impairment losses. Any tangible assets carried at revalued amounts are recorded at the fair value at the date of revaluation less any subsequent accumulated depreciation and subsequent accumulated impairment losses.

Abalon Trust

Notes to the Financial Statements (continued)

Year ended 30 April 2025

3. Accounting policies (continued)

Tangible assets (continued)

An increase in the carrying amount of an asset as a result of a revaluation, is recognised in other recognised gains and losses, unless it reverses a charge for impairment that has previously been recognised as expenditure within the statement of financial activities. A decrease in the carrying amount of an asset as a result of revaluation, is recognised in other recognised gains and losses, except to which it offsets any previous revaluation gain, in which case the loss is shown within other recognised gains and losses on the statement of financial activities.

Depreciation

Depreciation is calculated so as to write off the cost or valuation of an asset, less its residual value, over the useful economic life of that asset as follows:

Equipment - 33% reducing balance

Impairment of fixed assets

A review for indicators of impairment is carried out at each reporting date, with the recoverable amount being estimated where such indicators exist. Where the carrying value exceeds the recoverable amount, the asset is impaired accordingly. Prior impairments are also reviewed for possible reversal at each reporting date.

For the purposes of impairment testing, when it is not possible to estimate the recoverable amount of an individual asset, an estimate is made of the recoverable amount of the cash-generating unit to which the asset belongs. The cash-generating unit is the smallest identifiable group of assets that includes the asset and generates cash inflows that largely independent of the cash inflows from other assets or groups of assets.

Financial instruments

A financial asset or a financial liability is recognised only when the charity becomes a party to the contractual provisions of the instrument.

Basic financial instruments are initially recognised at the amount receivable or payable including any related transaction costs.

Current assets and current liabilities are subsequently measured at the cash or other consideration expected to be paid or received and not discounted.

Abalon Trust

Notes to the Financial Statements *(continued)*

Year ended 30 April 2025

4. Donations and legacies

	Unrestricted Funds £	Restricted Funds £	Total Funds 2025 £
Donations			
General Donations	2,113	—	2,113
Grants			
Time 4 U Ltd	—	37,375	37,375
	<u>2,113</u>	<u>37,375</u>	<u>39,488</u>
	Unrestricted Funds £	Restricted Funds £	Total Funds 2024 £
Donations			
General Donations	3,220	—	3,220
Grants			
Time 4 U Ltd	—	—	—
	<u>3,220</u>	<u>—</u>	<u>3,220</u>

Abalon Trust

Notes to the Financial Statements *(continued)*

Year ended 30 April 2025

5. Charitable activities

	Restricted Funds £	Total Funds 2025 £	Restricted Funds £	Total Funds 2024 £
Scope Funding	—	—	2,000	2,000

6. Expenditure on charitable activities by fund type

	Unrestricted Funds £	Restricted Funds £	Total Funds 2025 £
Eye Care Services	1,195	37,980	39,175
Support costs	3,258	1,923	5,181
	<u>4,453</u>	<u>39,903</u>	<u>44,356</u>

	Unrestricted Funds £	Restricted Funds £	Total Funds 2024 £
Eye Care Services	—	—	—
Support costs	2,721	—	2,721
	<u>2,721</u>	<u>—</u>	<u>2,721</u>

7. Expenditure on charitable activities by activity type

	Activities undertaken directly	Support costs	Total funds 2025 £	Total fund 2024 £
Eye Care Services	39,175	2,842	42,017	2,721
Governance costs	—	2,339	2,339	—
	<u>39,175</u>	<u>5,181</u>	<u>44,356</u>	<u>2,721</u>

8. Analysis of support costs (excluding governance costs)

	Eye Care Services £	Total 2025 £	Total 2024 £
Overheads	—	—	2,092
Website	2,172	2,172	528
Trustee Expenses	—	—	101
Legal and Professional	670	670	—
	<u>2,842</u>	<u>2,842</u>	<u>2,721</u>

Abalon Trust

Notes to the Financial Statements *(continued)*

Year ended 30 April 2025

9. Independent examination fees

	2025 £	2024 £
Fees payable to the independent examiner for: Independent examination of the financial statements	<u>2,250</u>	<u>—</u>

No Independent Examination was carried out in the previous financial period; hence no fees were paid.

10. Staff costs

The average head count of employees during the year was Nil (2024: Nil).

No employee received employee benefits of more than £60,000 during the year (2024: Nil).

11. Trustee remuneration and expenses

- no remuneration or other benefits from employment with the charity or a related entity were received by the trustees
- no trustee expenses have been incurred

12. Tangible fixed assets

	Equipment £
Cost	
At 1 May 2024 and 30 April 2025	<u>1,579</u>
Depreciation	
At 1 May 2024 and 30 April 2025	<u>1,579</u>
Carrying amount	
At 30 April 2025	<u>—</u>
At 30 April 2024	<u>—</u>

13. Debtors

	2025 £	2024 £
Other debtors	<u>164</u>	<u>164</u>

14. Creditors: amounts falling due within one year

	2025 £	2024 £
Accruals and deferred income	<u>2,340</u>	<u>—</u>

Abalon Trust

Notes to the Financial Statements *(continued)*

Year ended 30 April 2025

15. Analysis of charitable funds

Unrestricted funds

	At 1 May 2024 £	Income £	Expenditure £	Transfers £	At 30 April 2025 £
General funds	2,018	2,113	(4,453)	4,039	3,717
Designated Fund - 100 in 30	2,039	—	—	(2,039)	—
	<u>4,057</u>	<u>2,113</u>	<u>(4,453)</u>	<u>2,000</u>	<u>3,717</u>

	At 1 May 2023 £	Income £	Expenditure £	Transfers £	At 30 April 2024 £
General funds	1,519	3,220	(2,721)	—	2,018
Designated Fund - 100 in 30	2,039	—	—	—	2,039
	<u>3,558</u>	<u>3,220</u>	<u>(2,721)</u>	<u>—</u>	<u>4,057</u>

Restricted funds

	At 1 May 2024 £	Income £	Expenditure £	Transfers £	At 30 April 2025 £
Restricted Fund - Zimbabwe	3,534	—	(3,534)	—	—
Restricted Fund - Scope Time 4 U Ltd	2,000	—	—	(2,000)	—
	<u>5,534</u>	<u>37,375</u>	<u>(36,369)</u>	<u>—</u>	<u>1,006</u>
	<u>5,534</u>	<u>37,375</u>	<u>(39,903)</u>	<u>(2,000)</u>	<u>1,006</u>

	At 1 May 2023 £	Income £	Expenditure £	Transfers £	At 30 April 2024 £
Restricted Fund - Zimbabwe	3,534	—	—	—	3,534
Restricted Fund - Scope	—	2,000	—	—	2,000
	<u>3,534</u>	<u>2,000</u>	<u>—</u>	<u>—</u>	<u>5,534</u>

The Scope grant is for eye care to be provided in Zimbabwe.

Zimbabwe funds we funds raised specifically for eye camps in Zimbabwe.

Time 4 U Ltd grant was to carry out community-driven health initiative which involved screening for hypertension, diabetes and carrying out BMI checks

Abalon Trust

Notes to the Financial Statements *(continued)*

Year ended 30 April 2025

16. Analysis of net assets between funds

	Unrestricted Funds £	Restricted Funds £	Total Funds 2025 £
Current assets	6,057	1,006	7,063
Creditors less than 1 year	(2,340)	—	(2,340)
Net assets	<u>3,717</u>	<u>1,006</u>	<u>4,723</u>

	Unrestricted Funds £	Restricted Funds £	Total Funds 2024 £
Current assets	4,057	5,534	9,591
Creditors less than 1 year	—	—	—
Net assets	<u>4,057</u>	<u>5,534</u>	<u>9,591</u>

17. Analysis of changes in net debt

	At 1 May 2024 £	Cash flows £	At 30 Apr 2025 £
Cash at bank and in hand	<u>9,427</u>	<u>(2,528)</u>	<u>6,899</u>

18. Post balance sheet events

The trustees have considered the likelihood of any significant post balance sheet events and have concluded that there are none which impact the financial statements.

19. Related parties

During the financial year the following unconditional donations were received from trustees:

C Pierce	£240
C Wilson	£240
Y Obadeyi	£420
A Mapani	£800
G Knight	£250